The silent emergency: ‘You are what you eat!’
(The perceptions of Tampuan mothers about a healthy well nourished body in relationship to their daily food patterns and food habits)

Ratanakiri province
Cambodia

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Preface

‘I am old, my skin is dark because of the sun, my face is wrinkled and I am tired of my life. You are young, beautiful and fat, but I am old, ugly and skinny! What can I do, all the days of my life are the same and I do not have good food to eat like others, like Khmer people or Lao, or ‘Barang’ (literally French man, but used as a word for every foreigner), I am just Tampuan. I am small and our people will get smaller and smaller until we will disappear. Before we were happy to be smaller, because it was easier to climb into the tree to get the fruit from the tree, but nowadays we feel ourselves as very small people. We can not read and write and we do not have the alphabet, because it got eaten by the dog and we lost it. What should we do?’

‘We do not have the energy and we don’t have the power to change our lives. Other people are better than us. My husband is still alive, he is working in the field and he is a good husband, because he works hard on the field. We had some children, but some of them died when they were very young, maybe when they were one month or two months old, I am not sure. I do not know why they died; they got sick, hot and died. But still I do have some hope, because I send my children to school, so that they can learn, can get a good job and hopefully can earn some money to grow and to support their families. But the most important thing is that they feel happy! I want to feel happy too, but I do not know why, but I can not, I am too tired and lost my energy. It seems like God wants first to turn the world upside down, before we can be happy again’.

This is an example of an ordinary story, which I have often heard from the mothers in the villages in Ratanakiri to express their feelings about their lives. Such feelings expressed by many mothers made me very curious and concerned about why they feel often this way. When talking with mothers, it is easy to see that they have had hard and weary lives of which they are very tired. They all expressed that they don’t have enough energy. They find it very difficult to survive, because they do not have enough food and money. They look to others who from their viewpoint have an easier life and therefore better life. This makes them feel very small and of no worth by themselves. I realise this is a very complex situation, with social, cultural, spiritual, political, and economic dimensions. It makes me feel hopeless, but at the same time hopeful, and inspires me to identify points where we can reach out to really help these people whom I have come to love, and make a difference in their lives. Compassion and God’s love for these people were my inspiration to conduct this research, and to try and see ways to truly make a difference, even if they are small ways.
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This thesis is the result of teamwork and many different people contributed to the results, which is finalised in this report. Therefore I would like to acknowledge the main key persons who made it possible to conduct this research and write-up this thesis. Firstly, I would like to mention the village leader, Mr. Deng Song, of Paór village situated in Lung Khung commune, Børkeo district, Ratanakiri Province, Cambodia, who was very welcoming and made it possible for the team to conduct the research. Secondly, I would like to say thanks to the women of Paór village, who comprised the main source of the information collected. It is because of their willingness to share their ideas and views that we have gained insights in their lives and livelihood, and especially about their views on cultural traditions and customs of food. Thirdly, I would like to give a special thanks to two project managers of different Non Governmental Organisations (NGO), namely CARE and Health Unlimited, Mr. Jan Noorlander and Mrs Caroline McCausland, who made it possible to conduct the research through the provision of housing, transportation and national staff.

Without the assistance of the national staff, I would not have been able to conduct this research. Therefore, I would like to express my deep thanks for their efforts and energy towards supporting this research. I would like to say special thanks to Ms. Nong Pleut, Mr. Wain Churck and Mr. Near, who guided me to find the right persons, including walking through the bush on rough, narrow footpaths. They spent many hours in the village including overnights, all of which were not always very comfortable. They also needed to spend many hours on the computer to transcribe and translate interviews. Also special thanks for being patient enough to try to understand the things which I wanted to ask the women, which to them, included sometimes many strange and different western concepts. Three other names, which I wanted to mention and to whom I am very thankful, are Mr. Senj Sopech and Mr. Voun Sovoeun, working for CARE, and Mr. Sieng, working for International Cooperation Cambodia (ICC). All of them were willing to spend their free time to translate the interviews into Khmer and English languages.

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Without all these people, I would not have been able to conduct the research and analyse the results to write up into this thesis. It is my hope that the findings will be useful and of benefit to the people of Ratanakiri Province, Cambodia. Therefore, I would like to dedicate this thesis to the women of Ratanakiri Province, Cambodia. At the same time, it is my hope that the recommendations of this research will be useful for Government agencies and International organisations intending to implement programmes and activities directed towards improving the nutritional status of the women and their children in Cambodia.

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Abstract

Cambodia has a population of approximately 12 million people and is situated in South East Asia, bordering Thailand, Laos and Vietnam. Ratanakiri is one of the remote provinces situated in Northeastern Cambodia. More than 60% of the population is indigenous highland people who are marginalised by language, culture, geographic and economic factors in comparison to other Cambodians. War and civil strife affected the area from the early 1960’s until 1997. Threats to traditional livelihoods by rapid degradation of natural resources, migration from lowland provinces and land confiscation are having an impact on people’s health and well being including their nutritional status. Health and nutrition indicators in Ratanakiri are among the worst in Cambodia. A health survey found an under five mortality rate of 231/1000 live births and an infant mortality rate of 187/1000 live births (Hardy 2001). This is twice the national average of under five mortality rate of 124/1000 live births and an infant mortality rate of 95/1000 live births (Cambodia Demographic health Survey 2000). Also the malnutrition rates of children under five years in Ratanakiri are very high, with 21.4% children suffering from wasting (weight for height), 68.2% from stunting (height for age) and 58.1% from being underweight according the World Health Organisation (WHO) anthropometric measurements standards (World Health Organisation 2000).

To date, the main focus of the national Ministry of Health (MoH) in Cambodia has been to deal with the malnutrition problem of women and their young children from an epidemiological perspective by investigating and documenting malnutrition statistics. To date hardly any specific attention has been given to what people in the community think about these so-called malnutrition problems. Therefore, this research uses the comprehensive biocultural perspective, following the ecological model of Goodman, Dufour and Pelto, in order to discover relevant social and cultural factors influencing the nutritional status of women and children from the perspectives of the mothers themselves (2000). The study was an exploratory, descriptive and qualitative study, which delves into the emic views of Tampuan mothers about their perceptions of a healthy well nourished body, and explores whether or not there is a relationship between mothers’ perceptions and their food patterns and food habits which do or do not have consequences to their nutritional status of their own bodies and that of their children. Different aspects were highlighted, including: food availability, food patterns, cooking styles, categorising food, household food distribution, breastfeeding, weaning food, smoking, drinking, food taboos and food restriction especially during vulnerable periods of the women, such as during pregnancy and just after delivery.
The research was conducted in Paór village which is situated in Lung Khung commune, Borkeo district, Ratanakiri province, Cambodia. The total number of the population in Paór village is approximately 459 people in 94 families with a total of 249 females and 210 males including children. The women in Paór village do have a very hard and physically taxing way of life, which is based upon subsistence agriculture. The daily tasks related to taking care of their family and daily survival consumes all their physical energy.

The research indicated that women do make a link between their own health and the food they eat. The concepts of Tampuan women of being ‘healthy’ and ‘unhealthy’ differ only strongly from the western concepts. It is observed that these concepts have an impact on women’s diet. At the same time, it is also recognised that the diet of women depends on the food availability throughout the year and the family circumstances. The women, who do not have a husband or a male care-giver are especially vulnerable and have more problems to survive daily.

Another observation is that it is true to say; ‘you are what you eat’. If everybody looks the same, whether that is good or not, you get use to that and you don’t notice any irregularities or deviation anymore. It is like a silent emergency, you do not notice anymore and you even regard it as good, while the problem continue and comes even more bounded by the vicious circle of malnutrition. The ‘theory of the positive deviance’ can play an important role to discover the problems and delve into long-term solutions.

The preparation period of the research took place during May 2002 - May 2003, when the researcher was working as Project Manager of a community development programme in Ratanakiri province. The main and final part of the full-time research took place over a one-month period from 21 February to 23 March 2004.

The main data collection techniques used were: village mapping (a Participatory Rural Appraisal tool), ethnographic or semi-structured interviews, and focus group discussions. In addition, a lot of inside information was gained through participant observation and the day-to-day conversation when walking through the village, eating together, bathing near the stream, and staying overnight in their houses.

It is hope that the results and recommendations of the study will provide valuable information for government or non-governmental organisations and interested individuals who wish to implement nutritional projects in the area, all of whom are ‘outsiders’ to the ways of perception of the Ratanakiri Indigenous People Groups.
# Table of Contents

## PART 1: INTRODUCTION

1. Introduction ........................................................................................................... 10
   1.1 Background ........................................................................................................... 10
   1.2 Concepts ............................................................................................................. 13
   1.3 Objectives and research questions ................................................................. 14
   1.4 Research site ..................................................................................................... 15

2. Methodology ........................................................................................................... 17
   2.1 Study type and design ......................................................................................... 17
   2.2 Selection of the village ....................................................................................... 18
   2.3 Selection of staff and informants ....................................................................... 19
   2.4 Data collection techniques ................................................................................ 20
      2.4.1 Village mapping ............................................................................................. 21
      2.4.2 Ethnographic or semi-structured interviews ............................................ 21
      2.4.3 Focus Group Discussion .............................................................................. 22
      2.4.4 Participant observation and day-to-day conversations ........................... 23
   2.5 Interpretation and translations issues ................................................................ 23
   2.6 Ethical considerations ......................................................................................... 24
   2.7 Data processing and analysis ............................................................................ 24
   2.8 The impact of the fieldworker’s interference and confiding ............................ 25

3. Cambodia ................................................................................................................. 28
   3.1 Historical and environmental context ............................................................... 28
   3.2 Ratanakiri province ............................................................................................ 30

4. Tampuan Indigenous People Group (Highlanders) ............................................... 34
   4.1 Historical background ....................................................................................... 34
   4.2 Worldview and Religion ................................................................................... 35
   4.3 Clans .................................................................................................................. 40
   4.4 Family and marriage ......................................................................................... 41
   4.5 Gender issues .................................................................................................... 43
   4.6 Making a living .................................................................................................. 43

5. Paór village .............................................................................................................. 45
   5.1 Historical background ....................................................................................... 46
   5.2 Inhabitants ......................................................................................................... 46
   5.3 Village life .......................................................................................................... 48
      5.3.1 Housing ........................................................................................................ 49
      5.3.2 Food ............................................................................................................. 50
      5.3.3 Livestock ..................................................................................................... 51
      5.3.4 Water sources ............................................................................................. 51
      5.3.5 Education ................................................................................................... 51
   5.4 Village hygiene and sanitation .......................................................................... 51
6. General food situation in the village ............................................................... 53
   6.1 Availability of food ......................................................................................... 53
      6.1.1 Rice ........................................................................................................... 53
      6.1.2 Vegetables and fruits ............................................................................... 54
      6.1.3 Meat (= food) ......................................................................................... 55
      6.1.4 Concentrators of energy ......................................................................... 56
      6.1.5 Seasoning/flavouring .............................................................................. 56
   6.2 Women’s perception of food variety ............................................................ 57
   6.3 Household food distribution ........................................................................ 58

7. Food concepts and customs ............................................................................ 59
   7.1 Emic view of women about categorising food ............................................. 59
   7.2 Cooking styles .............................................................................................. 62
   7.3 Children en Food ........................................................................................... 63
      7.3.1 Breastfeeding ........................................................................................... 63
      7.3.2 Weaning food .......................................................................................... 64
   7.4 Smoking and drinking customs .................................................................... 65

8. Food Taboos and Restrictions ......................................................................... 67
   8.1 General food taboos and restrictions ............................................................ 67
   8.2 Food taboos during pregnancy ..................................................................... 69
   8.3 Food taboos after delivery ............................................................................ 70

9. Relationship between food and being healthy and beautiful ....................... 71
   9.1 Concepts of health and unhealthy ................................................................. 71
   9.2 Concepts of being beautiful ........................................................................ 72
   9.3 Relationship between food and their body .................................................. 73
      9.3.1 Food and being healthy or unhealthy ..................................................... 73
      9.3.2 Food and being beautiful ...................................................................... 74
   9.4 Nutritional problems ..................................................................................... 75

10. Reflections on theoretical perspectives and other researches ....................... 77
    10.1 The ecological model ................................................................................ 77
       10.1.1 Reflections on the ecological model ...................................................... 78
       10.1.2 Value of the ecological model .............................................................. 79
       10.1.3 Adaptation of the ecological model ...................................................... 79
    10.2 Reflections on other researches .................................................................. 80

11. Discussions and recommendations ................................................................ 81
    11.1 Major findings and discussions .................................................................. 81
       11.1.1 The Tampuan concept of a healthy well nourished body ..................... 81
       11.1.2 The relationship between a healthy well nourished body and food
            patterns and taboos .................................................................................. 82
       11.1.3 Nutritional problems .......................................................................... 84
    11.2 Recommendations ...................................................................................... 87
REFERENCES

LIST OF ABBREVIATIONS

GLOSSARY OF TAMPUAN WORDS

LIST OF TAMPUAN FOOD

ANNEXES:
Annex 1: Geographical situation of the research site: Paór village
Annex 2: Women Village Mapping of Paór village
Annex 3: Geographical situation of Ratanakiri province
Annex 4: Indigenous People Groups of North-eastern Cambodia
Annex 5: The different tasks between men and women and their working/resting hours
Annex 6: Seasonal variation and availability of plants and other food
Annex 7: MSG facts (source: Internet)
Annex 8: Healthy and unhealthy food
Annex 9: Cooking styles described by the women themselves:
Annex 10: Food taboos and their stories behind
Annex 11: Problem analysis
PART 1: INTRODUCTION

1. Introduction

This thesis describes the results of an exploratory and descriptive study done in Paôr village, a Tampuan village in Ratanakiri province, Cambodia. The title of the thesis: “The Silent Emergency: you are what you eat” is intended to stress the importance of the huge malnutrition problem, which happens to be an issue which we often do not recognise. In addition, there are health consequences of malnutrition, which we also often fail to recognise. According to the World Health Organisation (WHO), malnutrition is defined as ‘badly nourished’; however it is more than a measure of what we eat, or fail to eat. Clinically, malnutrition is characterised by inadequate intake of protein, energy, and micronutrients and by frequent infections or diseases. But from a broader perspective the nutritional status can be regarded as the result of the complex interaction between the food we eat, our overall state of health, and the culture, social and economic environment in which we live. Usually the people who are talking and doing surveys about malnutrition and the problem of food intake are outsiders: government officials or staff from international or local organisations. The voices of the people themselves are hardly heard. This study is meant to shed light on the perceptions of the mothers, their emic views, about their culture of food and its impact on their lives and the influences on the nutritional status of the mothers and their young children.

1.1 Background

Malnutrition is a factor in at least half of the 10.9 million deaths each year (WHO 2000). Protein Energy Malnutrition (PEM) affects every fourth child worldwide: 150 million (26,7%) children are underweight, while 182 million (32,5%) are stunted. Geographically, more than 70% of PEM children worldwide live in Asia. In Cambodia 23% of children under five years old are severely stunted and underweight and 51% are moderately stunted (Cambodia Demographic Health Survey 2000). The malnutrition rates in Ratanakiri, of children under five years old, are also very high, with 21,4% children suffering from wasting (weight for height), 68,2% from stunting (height for age) and 58,1% from being underweight (WHO 2000). A micronutrient (MN) study undertaken throughout Cambodia in 2000 found the highest rates of anaemia for children (90%) in Ratanakiri Province (HKI 2001). Night blindness caused by vitamin A deficiency in children and pregnant women is also found to be
the highest in Ratanakiri Province (HKI 2001). In 2002, a health and nutrition survey was
done by Health Unlimited (HU), an NGO who has been working in Ratanakiri for more than
10 years (Fisher and Sykes 2002). The survey was undertaken with 800 children aged 6-59
months and 400 women aged 15-45 years. The HU survey confirmed the Helen Keller
International (HKI) statistics of 2001. As it is generally known that malnutrition hinders
physical and mental development and is associated with increased morbidity and mortality in
children, clearly malnutrition is a serious health problem in Ratanakiri province, especially for
women and their young children.

The causes of malnutrition are complex and multidimensional. Some argue that the main
causes of child malnutrition and mortality in the developing world are either the absolute
nonavailability of food or poverty, which is the lack of money to purchase sufficient food
(Dettwyler 1994). These people reason that if food production is the problem, and then
genetically improved, higher yielding strains of millet, rice, sorghum, or corn are the solution;
or more pesticides, or herbicides, or fertilizers. If poverty is the problem, then income
generating programs and economic interventions are the solution. As Mr. A. Sen explained in
people through their ability to ‘command’ that they have goods, as provided by the workings
of the socio-economic system (Arrow 1982).

Another group argues that the main causes are ignorance and cultural beliefs and practices.
Ignorance is defined as a simple lack of knowledge, such as not understanding the
relationship between food and health, or not understanding the critical importance of good
nutrition during the first few years of a child’s life, with the care givers thinking that quantity
of food is more important than quality. This group reasons that if lack of knowledge or
cultural beliefs and practices are the problem, then nutrition education is the solution
(Dettwyler 1994: 159). Dettwyler notes that other causes of maternal malnutrition can be
the lack of women’s control over their own bodies, a phenomenon rooted in the position of
women within the traditional social organisation (Dettwyler 1994: 160) and something that
can be influence by women’s education, competence and attitude (Dettwyler and Fishman

Grantham-MrGregor (Aboud and Alemu 1995:725) has a different view about the causes of
malnutrition among children, arguing that a malnourished child is less active and so
contributes to its own stimulus deprivation. Accordingly, the mother of a malnourished child
engages in less responsive interaction with the child and so deprives the child of reciprocal
social interaction that is necessary for development. In this view we see the downward spiral of malnutrition: mothers are malnourished and this influences the way in which they socially interact with their children and their child feeding practices. As a result, the children grow-up malnourished and become malnourished women and mothers with malnourished children. Since a few years, the Cambodian Nutrition Investment Plan (CNIP) started to describe the root causes of malnutrition differently, including such factors as protracted civil conflict, widespread poverty and lack of availability and access to basic services (CNIP: 1999/2008).

The Ratanakiri health survey found that cultural beliefs and food taboos related to infant and child feeding, restricted diet options (Fisher and Sykes 2002). For example breastfeeding practices are a contributing factor to the poor nutritional status of children; the survey found that while almost all babies are breastfed, none of the mothers interviewed gave any food to the newborn baby during the first 24 hours, depriving them of vitamin A rich colostrum. Another survey done by the indigenous children’s health and nutrition project indicates that traditional feeding practices and lack of knowledge contribute to the poor nutritional stage of indigenous children (Fisher and Sykes 2002: 10). In addition food taboos and prejudices also reduce the food available to young children, pregnant and breastfeeding women.

From the literature it is easy to conclude that the nutritional status of people is the result of biological, cultural, social and economic forces which are inseparably intertwined. Jerome, Kandel and Pelto suggest that nutritional problems can only be understood and ameliorated when they are considered from a comprehensive bio-cultural perspective. Food, by virtue of its pivotal place in human experience is, at once, a bundle of energy and nutrients within the biological sphere, a commodity within the economic sphere, and a symbol within the social and religious spheres. Food ideas and attitudes, socioeconomic structure, patterns of resource allocation, dietary intake, and nutritional status must be studied holistically as part of a single system (Jerome, Kandel, Pelto 1980: 1).

This research acknowledges the comprehensive bio-cultural perspective as it seeks to discover relevant social and cultural factors influencing the huge malnutrition problems facing children in Ratanakiri Province. This is also in line what Douglas mentioned about the malnutrition problem, that it only can be approached from an anthropological perspective that takes into account the individual’s social and cultural environment (Douglas 1984: 498). Dettwyler write in her book: ‘Tell me what you eat and I will tell you what you are’ (Dettwyler 1994: 101), which is similar to the title of this research proposal: ‘You are what you eat’. If we study the consequences of malnutrition, then people and the community
where they live in, are very much affected by the results of malnutrition, in which we can say: ‘they are what they eat!’ Nevertheless, there are no simple solutions for this huge and widespread problem of malnutrition, the problems are like a vicious circle in which there seems to be no end. I do believe as long as other researchers continue to focus greatly on the biomedical approaches it will be very difficult to break this circle of malnutrition, but if we can also take into account the way they live, make decisions, interact with their children, their world view and perspectives, than we would have a better chance to interact into this ‘silent emergency’, break the circle and affecting the way people are. This whole approach need to be always based on the fact that people do have access to food in one way or the other. That all people do have access to food because it is available in their own surroundings or that people do have the money to buy food on the markets or from other sellers or that people can exchange food with other goods.

1.2 Concepts
There is a difference between under-nutrition and malnutrition. Under-nutrition refers to acute problems that occur during war, disasters, or epidemics, and which cause substantial weight loss. The results of under-nutrition can be seen in children who are struggling with wasting (an anthropometric index based on weight-for-height), and marasmus. Malnutrition relates to long-term or chronic nutritional problems such as Protein Energy Malnutrition (PEM), Micronutrient Malnutrition (e.g. iron deficiency anaemia, iodine deficiency disorders and Vitamin A deficiency) and over-nutrition (e.g. obesity, dental caries), which reflects the long-term effects of inadequate nutrition and/or health such as stunting or ‘shortness’ (an anthropometric index based on height-for-age) or kwashiorkor. Underweight is another anthropometric index calculated by correlating weight-for-age and it represents body mass relative to age. Since weight-for-age is influenced by both the height and weight of a child, it is a composite of stunting and wasting which makes this indicator sometimes difficult to interpret.

This research focuses on chronic malnutrition problems (PEM and stunting), which reflects the long-term effects of inadequate nutrition, such as shortness of the population. Chronic malnutrition in children is a widespread problem in many developing countries. In most of these countries, malnutrition peaks during the second year, indicating that lack of food is not the only cause, but that infection and inadequate child feeding are important contributors too. The consequences of chronic malnutrition for physical, mental, and social development have been well-documented, but due to the fact that the weight of children is in comparison with their height, it is not often recognised as a problem. One complication experienced
during this study was that parents do not really know the exact age of their children, and it was assumed that these children were younger than they actually are. Another problem is described by K. Dettwyler in her book, Life and death in West Africa, that most people in a community where every child is stunted, do not recognise the problem at all, the people simply get used to the way children look. If the typical child is mildly to moderately malnourished, then their appearance becomes the standard. That’s just ‘how children look, not a problem needed to be fixed’. Normal is what you are used too (Dettwyler 1994: 104).

1.3 Objectives and research questions

The objectives of the research study were:

1. To investigate the perceptions of Tampuan mothers about a healthy well nourished body and their meanings attached to it.
2. To discover if the perceptions of the Tampuan mothers about a healthy well nourished body are related to their food patterns and food habits.
3. To define nutritional problems from the perspectives of the mothers.
4. To investigate differences of perceptions of the mother groups over a certain time period and between female headed households, poor and rich families.
5. To formulate recommendations based on the findings during the research.

The research questions of the research study are:

1. How do mothers perceive a healthy well nourished body for themselves, their husbands and their children?
2. How do mothers think about being short, tall, fat, or skinny? Is being short, tall, fat or skinny an expression of beautiful, ugly, healthy or unhealthy? Is it important for the mothers to be beautiful or to be healthy?
3. What are the advantages or disadvantages of being short, tall, fat or skinny from the mother’s perspectives?
4. What kind of food do the mothers and their children eat daily and how often (food patterns and food habits)?
5. How do the mothers view the household food distribution within the family (gender allocation)?
6. What kind of food do mothers see as necessary or luxurious, leading to a healthy well nourished body for themselves and their children?
7. Where do the mothers collect or buy the different necessary or luxurious food items (shops, market or forest)? Do the mothers think there are enough necessary and luxurious food items available throughout the year in their village?

8. How do children’s illnesses and food related to each other from the perspective of the mothers (i.e. hygiene and diarrhoea)?

9. How do mothers categorise their food? Do mothers categorise their food in hot and cold concepts? Why do the mothers categorise their food?

10. What are the specific food taboos or restrictions within the family, especially for the mothers and their children? How do the mothers perceive these food taboos and restrictions?

1.4 Research site
The research was conducted in Paór village which is situated in Lung Khung commune, Borkeo district, Ratanakiri province, Cambodia (see annex 1). Total numbers of people living in the village were approximately 459 people in 94 families with a total of 249 females and 210 males including children. This statistics were provided by the village leader at the time of the research, but obviously populations change over-time and this is not always documented well, so it is not precisely how many people were actually living in the village. There has been nothing written about the village prior to this research. Therefore everything in this report is based on the stories of the people of Paór village themselves and the researcher’s observations.

The people in Paór village belong to the Tampuan Indigenous People Group. The Tampuan are highland people living in a mountainous forested area, and are characterised by their swidden agriculture, or slash and burn cultivation. This means that most Tampuan have two houses, one in the village and one in their fields ("chamkars"). They shift their residences as they move their chamkars every three to five years. Currently for political reasons (i.e. deforestation, degradation of natural resources, landownership, internal migration, land loss and confiscation) these movements are becoming limited and more and more people are staying permanently in their villages or in their chamkars. These political variables have an impact in people’s health and their nutritional status; the Tampuan are already marginalised through linguistic, cultural, geographical, and economic factors when compared with other citizens of Cambodia. Also malaria, tuberculosis and diarrhoeal diseases are endemic, and

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1 Chamkars are several fields together were the farmers plant their rice. In between these fields, the family has a small farmer’s house to live in.
vaccine preventable diseases and acute respiratory infections continue to be major causes of morbidity and mortality.

Upon entry to Paör village, it seems a quiet and cosy village. If one arrives early in the morning there are many people around, preparing to go to their fields. If one arrives in the afternoon, there are only a few elderly people with young school-aged children left in the village. The children who have not started eating rice yet, and are thus dependent on breastfeeding, go with their parents to the chamkars. Other young children stay behind with their grandmothers or another caregiver. During the day when most people are working in their chamkars, they leave early in the morning and come back late in the afternoon, just before dark. Some people spend the nights in their houses at their chamkars. In the early morning, people leave with their empty baskets ('kaphas', made from bamboo or rattan) and come back with their kaphas full of rice, vegetables, fruit, fish, small animals, and their gourds filled with water ('kloeks'). The kloeks are the container used for the storage and transportation of water, as well as for seeds. They are for family use or for exchange (3-4 kloeks for a chicken) and they are grown in the chamkars and then converted into containers. A hole is drilled into the flesh of a gourd from the top almost to the bottom, and then it is soaked in water for up to 3 months before the seeds and pulp fall out. It is dried in the sun before being rinsed out several times. For decoration the gourds are sometimes carved before being soaked or stained black by roasting in the fire.

Although there are many political and economic threats, it seems that life continues in the villages much as it has for centuries, and that people’s daily lives are consumed with meeting survival needs.
2. Methodology

2.1 Study type and design
The study is an exploratory, descriptive and qualitative study, which delves into the emic views of Tampuan mothers about their perceptions of a healthy well nourished body and explores whether or not there is a relationship between mothers’ perceptions and their food patterns and food habits. It is not the aim of the study to fully explore the complexity of all cultural and social factors which influence mothers and their children’s food intake and therefore their nutritional status. At the same time, the study does explore the emic views of mothers about many different cultural aspects related to food and food intake, which is very valuable information for all outsiders, government or non-governmental organisations who wants to implement nutritional projects in the area.

The study was implemented as much as possible based on participatory principles, involving local people from the start to the end of the research. The staff that was hired to support the research, came from the same indigenous people group as the informants. The research is based on the key principle of seeing villagers as partners, who indeed have a wealth of information to share about their (traditional) knowledge and experiences. Therefore, I lived, during the research, as much as possible in the village and slept in people’s houses. The research also involved both learning how to be a researcher, as well as going through the research process.

The preparation period of the research took place during May 2002 - May 2003, when I was working as Project Manager of a community development programme in Ratanakiri province. The main and final part of the research took place over a one month period from 21 February to 23 March 2004. Thus the total period comprises six weeks of research if conducted full-time, which complies with the timeframe given tot students in fulfilment of the requirements of the course Master’s in Medical Anthropology.
2.2 Selection of the village

The study was conducted among the Tampuan Indigenous Peoples Group. This specific group was chosen primarily because I worked with this people group for more than two years. Also, it was possible to make use of an interpreter/translator of the same indigenous peoples group during the research period. The research was conducted in Paór village, Lung Khung commune, Borkeo District, Ratanakiri province, Cambodia.

The reason to choose Paór village for this research was two-fold. First, the village was a bit remote: not situated near Ban Lung, the capital town of the province. To access the village, one really must go through the forest, but at the same time it was still accessible by motorbike. Secondly, I was informed that there was very limited outside interferences towards this village and that the people were open and interested to share their lives. Both reasons were important for this research, as the aim was to discover the ideas of the women themselves and not simply to hear what they already learned from outsiders. The village leader and elders were very welcoming.

In contradiction to the given information, it became apparent during the research that there was some significant outside interferences in this village from government and non-government organisations, and also from tourists and other foreigners including Khmer people. Furthermore, people in the village were open and interested, but up to a certain point after which, they were afraid to share too much, because they were restricted by the government not to talk with outsiders who were not authorised by an official contract to work there. This was a new policy of the Cambodian government, which was put into effect just before I went into the village. I did follow the official way as far as I knew through permission from organisations that were authorised to work in the area. I discovered this new policy in the fourth week of the research because people did not want to talk with us anymore in groups, which was different during the first few weeks of the research. Later on, I heard that people were afraid of the consequences and what will happen if they say the wrong things. The village leader was very kind to us, he still allowed us to finish the research by talking to women individually, but he did not allow us to talk in groups anymore.
2.3 Selection of staff and informants

There were two different Non-Governmental Organisations (NGO’s), namely CARE\textsuperscript{2} and Health Unlimited\textsuperscript{3}, provided staff to support the research. Both organisations provided a lot of background information which I used in implementing the research. Staff were selected based on motivation, experience, time available, knowledge of Khmer or/and English language, ethnicity (whether or not they were Tampuan), ability/willingness to stay overnight in the village, and level of computer literacy. Dependent on their skills they joined the research in the villages or did the translation on computers. A total of three staff, all Tampuan, two men and one woman, worked part-time to support the research in the village. They conducted interviews, focus group discussions, and talked with the village leader or village elders. These three staff stayed overnight in the village too. All three staff spoke Khmer as their second language and two of them had basic English skills, which made it easier to verify data when necessary. A total of three staff worked part-time with translating the interviews on tapes, from Tampuan into Khmer and English. They worked from the office in Ban Lung, the provincial capital town, and did not go out to the villages. All interviews were translated twice by different persons to verify the data. All staff was paid on the job while working on the research. I did provide the staff a half-day training before the research started and during the research, I continuously provided on-the-job training.

They were all very motivated staff, but at the same time it was very hard for them to fulfil the job, because none of them had ever conducted an anthropological study before and they found it difficult to understand and translate some of the concepts used during the research.

Several key informants from inside as well as outside the village were chosen in order to understand more about the kinship structure and social network of the village and about the Tampuan Indigenous People Group. The main key informants were the village leader, village elders, two Traditional Birth Attendants (TBA), a women leader, the diviners (‘Neaq Plai’ and ‘Kruu Boran’), and also a village elder from another Tampuan village.

The core informants were chosen after an introductory interview with the village leader. The village leader provided a list with the names of mothers and their children and the age of the children. It was planned to focus on the young mothers with children under two years old

\textsuperscript{2} CARE is a united force dedicated to helping the world’s poorest communities solve their most threatening problems. CARE Cambodia works since a few years in Ratanakiri province to support educational projects and learning people how to write and read the indigenous languages and the national language.

\textsuperscript{3} Health Unlimited was founded in 1984 to support communities affected by war or conflict in their efforts to achieve better health and well-being. Health Unlimited is a British NGO who works in Ratanakiri province already for more than 10 years, especially in health care projects throughout the province.
and their mothers. It was easy to make a distinction between younger and older mothers, but it was not always possible to interview the mothers of the young mothers, some were just not there or had died and others did not want to be interviewed. Also there were quite a few young mothers who were too shy to be interviewed. Within the selection of the core informants an attempt was made to distinguish between ‘rich’ and ‘poor’. However this was very problematic given that all villagers considered themselves ‘poor’ but in fact some were relatively more wealthy than others, judging from their access to financial resources and their ownership of various assets. For instance, some households did have money to buy food on the market, to purchase health care from the government clinic, or to buy medicines on the market and therefore had fewer problems with their health than others. Some children could even buy ice-cream which was sold by Khmer person from outside in the village. It was also apparent that the women, who did not have a husband or a male to take care of them, were living in much worse conditions. But as all the villagers were living under basically the same harsh conditions of weather and the circumstances, the researcher opted not to make ‘wealth’ a criterion for selecting informants.

In general it was easier to talk with the older women than with the younger women. The younger women were often too shy to share and they found it difficult to talk about their feelings. Also younger mothers knew less about traditions, customs and habits compared with the older women. The older mothers could tell much more about traditions and history and found it easier to share their life stories with us.

2.4 Data collection techniques
The method of triangulation, using different research instruments and methods, was employed during this research. The different methods complement each other, maximize the quality of data collected, and reduce the chance of bias. Different data collection techniques were not only used as a means of triangulating information sources but also to locate and fill gaps in the information collected. The main data collection techniques used were: village mapping (a Participatory Rural Appraisal tool), ethnographic or semi-structured interviews, and focus group discussions. In addition, I gained a lot of inside information through participant observation and the day-to-day conversation when walking through the village, eating together, bathing near the stream, and staying overnight in one of their houses.

The data collection started with an introductory interview of the village leader, explaining the purpose of the research and asking permission to do the research in his village. He shared with us the list of statistics and pointed out which women we could interview.
2.4.1 Village mapping

A village mapping exercise was completed during the first week of the research (see annex 2). The purpose of this village mapping was to get a general impression of structure of the village and life within the village from the women’s’ points of view, but was also a good way to start building relationships with the women of the village and to introduce the purpose of this research. The village mapping exercise was conducted with ten mothers. They made a village map from sticks and stones. During the production of this map, many discussions started about the people and about life in the village. It was also good to see the interaction between mothers, the ones who were very talkative or shy and the ones who did have the power and the rights. This information was very useful to discover the relationships between the women within the village. The information obtained from the village mapping was used as background information to conduct the interviews and the information was also used to get a deeper level of insight into the actual village structure.

2.4.2 Ethnographic or semi-structured interviews

The easiest way to gain information directly was by doing interviews while sitting on the floor inside or outside their houses. Ethnographic interviews are meant to draw out categories of perceptions, meanings, eliciting what people think, and how one person’s perceptions compare with others. The purpose was to map out shared values in the community, and more specifically, values that influence actual behaviour. One of the strengths of doing interviews was that the information received was often very detailed and based on life stories, which became very valuable information for the results of this research. It also gave a great opportunity to visit people at their homes and to observe parts of their lives, while cooking and taking care of their children. The difficulties were that some of the women, especially the younger mothers, were very shy and found it difficult to talk and to share their ideas. Some of these young mothers said that they have no ideas to share and that we have to ask other people.

The other difficulty was the time limitations; some mothers were too busy with the work or already left to their fields. The best time to do the interviews was early in the morning or after dinner at night. We did several visits to the fields, to talk with the mothers, but this was very time consuming, because sometimes we needed to walk for more than one or two hours to find the mothers in the fields. At the same time, it was a great opportunity, because it gave a lot of inside information of daily life of the women through experiences by ourselves. Firstly, the interviews were conducted by the researcher supported through translation by one of the staff. After on-the-job training, the female staff did also some
interviews herself, while the researcher was sitting next to her and got translation from one of the other staff. At the end we did total of 23 interviews, with 12 younger mothers with children younger than two years old and 11 older mothers.

2.4.3 Focus Group Discussion

Focus Group Discussions (FGD) are flexible, allowing in-depth exploration of different points related to the topic (Hardon et al. 2001:238). It has also a synergistic effect, where one person will build on what another person has said. Taking a cue from the work of Good (Good: 1977), a ‘semantic network’ was built upon the ideas and beliefs of mothers themselves: why do people eat what they eat? With these different points in mind I planned to conduct several FGD with the young women group and the older women group separately to discuss their shared notions of their own bodies, the concepts of necessary and luxurious food leading to a healthy well nourished body, categorising food, household food distribution, their ideas about food habits, food availability, and food taboos. The information gained from the FGD, I could use for the interviews and also to verify data.

I started during the first week of the research with two FGD, one for the younger mothers and one for the older women, but while I started to conduct a third one, none of the mothers showed up. I tried to discuss this with the women and later on with the village leader, and discovered that we were not allowed any longer to ask women questions in a group setting because the government’s policy had changed to say that one can only conduct research in the village, if you have an official written contract with the provincial government. It was too time-consuming to go into that process and at the same time, the village leader still allowed us to continue with the interviews and visiting the women at home. We decided not to conduct FGD’s anymore, but continue to focus on the individual interviews and participant observation. First of all, this was a great disappointment, but it was also recognised that it will be very hard to conduct these group’s discussions without knowing the local language and for the staff without having any experiences. A big learning experience was that if one would like to conduct FGD that it will be very important to have knowledge about the spoken language and to have knowledge and experiences about leading a FGD. The FGD’s which were conducted still gave very valuable information about the shared ideas of the women about food habits, food availability, food taboos and restriction, and also showed something about the different relationships between the women in the village. Total of 17 younger mothers including 25 children and total of 7 older mothers joined these FGD’s.
2.4.4 Participant observation and day-to-day conversations

Participant observation is an important complementary tool to other data collection techniques, especially to understand the context of what people say. During the research there was a continuous interplay between participant observation and other modes of data collection. Participant observation is a technique that involves systematically selecting, watching, and recording behaviour and characteristics of living being, objects or phenomena (Hardon et al 2001: 2071). Very valuable information was received through this mode of data collection, first of all through staying in the village and sleeping overnight in people’s houses. But also by bathing at the stream near the village, eating together with the people, walking through the villages and just sitting next to them asking informal questions while observing how they prepare a meal. I noticed many different kitchens, the way how they organised their houses and many different cooking styles. I also noticed the way how they interact with their husband and with their children. It was good to observe and experiences how people live in their village and in their fields and how they struggle to survive, but also just to see how they share their meals together as family. The strength of staying with them in the same house was to experience a little bit of their lives. The weakness will be always that I am a foreigner and I felt that people behave differently when I am around. Some people acted shy and some children started to cry as soon as they saw my face.

2.5 Interpretation and translations issues

All the data collection was done in the Tampuan language with translations into Khmer or sometimes into English. Most women interviewed could only speak Tampuan. The ones who could speak Khmer, the national language, felt it was easier to express their stories in their own mother-tongue language. I found it important that they expressed their ideas and life stories in their own language and I did encourage them doing so, because this was much easier for them and therefore we could go more into depth. Although I do have English and basic Khmer communications skills, I do not have any communications skills in their local Tampuan language. Therefore it became very time consuming to do all the translations into Khmer and later on into English. In addition to being time consuming, the multi-lingual aspect of the research increased the possibility of misinterpreting some of the data, or even neglecting to translate portions of some transcripts, as translation was overseen by different persons for different languages.
Careful explanations were essential to ensure communication. I felt sometimes that I needed to go back and forwards so that they understand what I meant and that I understand what they were trying to say. The communication difficulties did not only concern ordinary translation difficulties. Clear communication of concepts and terms proved essential including: malnutrition, necessary and luxurious food, weaning food and food taboos, concepts which were so normal for me to use, but so different for the staff and the people of Paór village. Even the word vitamin was used differently by the staff and I discovered that they used it to describe something that was delicious. To address these challenges, I made an effort to provide an initial explanation of these concepts to the staff, so that they could explain it in readily understood words and phrases to the women interviewed. Nevertheless, because of the limited time available, these translations issues do have consequences for the interpretation of the data of this research.

2.6 Ethical considerations
To protect the integrity of the informants, anonymity and confidentiality of the respondents will be maintained also in the discussion of the findings. Some of the women clearly showed or stated that they did not want to be interviewed. This was respected and the women were only interviewed on a voluntary basis. Prior to starting the research, permission was asked and the purpose of the research was explained through a village meeting. Although permission was given, the rules of the government changed during the research, which hampered the research somewhat. At the start of each interview, I explained the purpose of the research to the women and I asked if I was allowed to record the interview on a tape. None of the women found it a problem that we used the tape recorder and made notes during the interviews.

2.7 Data processing and analysis

From my diary: While I started to write-up my notes and to analyse the data, I suddenly realise that I never can put into words the real situation of the people in Paór village. It will be always my subjective observation and interpretation of the village. In other words, the findings can never be truly or completely their stories. At the end, what is six weeks of coming and going to a village? Nevertheless, in this thesis I would like to share some of my observations, experiences and stories I heard and interpreted from the people of Paór village. It will be an outsider’s impression of their life in their village.
During the research period, data processing and analysis was an ongoing process. All interviews were recorded on tape and also notes were taken to compare and verify the data. Two times the tape recordings failed, because once I deleted the records accidentally and in the other instance, the interview became too long to fit onto the tape. Furthermore, I tried to use a standard list of questions to fill in with the staff to evaluate each data collection technique, but I discovered that they found this very difficult to do and therefore I decided to have a more informal evaluation discussion session with the involved staff on a daily basis.

Translation and analysing started while collecting data. This was to enable questions that remain unanswered or new questions that arose, to be addressed before the data collection was over. I did listen to all the recorded interviews as much as possible together with the staff and making use of my own field and interview notes to add information missed or to ask the staff or translators to fill in the gaps. If necessary, we listened twice to the same tapes. Back in the Netherlands, I continue to process the data while listening to the tapes and making use of the written English translations. The data was coded by hand, and common ideas and major concepts were highlighted.

2.8 The impact of the fieldworker’s interference and confiding

From my diary: 'It is half past one in the afternoon, I am sitting in my hammock, perspiring, listening to the quietness outside, putting my laptop on my knees and thinking about the extreme differences and contradictions between my own life and the life of the people in this village. I have just come back from taking a 'shower' by a nearby stream and washing myself with a stone, trying to turn my feet from mud-stained to white again, while many children and a few men were watching me and laughed at how I was struggling with my 'sarong' to cover my body and at the same time to pour some water over my head, arms and legs and to feel a little bit refreshed'.

My own personality and physical appearance certainly colours the research. It affects the data and therefore the outcome of the research. The villagers told me that I am a tall, white, rich, blond and beautiful lady with lots of education. Moreover, I am also fat, which in my eyes is an insult to hear, but which is a compliment for them to say. I realise again that only because of my appearance I can never come into this kind of villages without being noticed

4 Sarong is a large sheet of fabric, often wrapped around the waist and worn as a skirt by men and women in Southeast Asia and Pacific Islands.
immediately. I was happy that we did not come with big 4-wheel drive vehicles into the village, but still coming as a foreigner on a motorbike was very obvious, where only a few villagers have a motorbike too. Sometimes I found this difficult and I wished that I could see the village as through a one-way mirror where the people would not notice you. But, at the same time, we can learn from each other by meeting each other, so I did learn a lot from the people of Paór village. I walked through the village nearly every morning, trying to observe life in the village and to see with my own eyes what is happening. Sometimes I found it difficult, because I love children so much, and most children were very afraid of me, crying and running away into their houses. Even some of the young women were very shy of my appearance. I felt like a real stranger. On one side I tried to build relationships with them, but on the other side I recognised that there is a big gap between them and me, two totally different worlds. How far will I ever or even never get to know them? I will be always an outsider and never truly or fully one of them.

The strength of being an outsider while doing research is that you look at a situation from a different viewpoint, and may have less bias than an ‘insider’. Being an outsider also makes it easier to have a more overall picture of the situation which can help to put the results into broader perspectives. Another advantage is that you don’t have any relationships with the villages, which means there are no existing negative relationships which could hamper the research.

The negative side of being an ‘outsider’ is that I am not one of them. Therefore, I needed to take plenty of time to build relationships, so that the women will entrust me with their stories. I do not speak their language and I found it difficult to understand their culture and way of thinking. This made it difficult to do a descriptive and qualitative study. To do this kind of research, it would be much better to take a longer time period. Also, I think that because most women looked different at me, as I already said in their eyes I am rich and beautiful, so that I can be a very disturbing factor in the research. Maybe there were women who were agreed to talk because they think they can earn something from it, probably there were women who told some facts that they think I would like to hear (rather than what is the ‘truth’), maybe there were women who were ashamed to tell the truth about their situation, and probably there were also women who were defensive in describing their lives.
Another point I would like to mention is the fact that while I worked with the same indigenous people group at an earlier time, I had not worked in the village where the research is conducted. I experienced in the past that people look quickly differently at you when they know you are working with a NGO and often they think that maybe you will bring something for them. Therefore, we did not share that we worked for a NGO, but that this research was just for study. Also we decided not to pay any informants to tell their stories. It is a big issue in the province whether or not to pay informants or villagers for sharing information, but based on my past experiences, I saw lots of negatives effects. At the same time, it was a benefit that I worked before in the same province, because I knew how to access the government and other NGO’s, and these resources supported the research in many different ways, such as arranging staff, housing, transportation and providing literature.

I also did not mention that I was a nurse. This was due to my past experience that very quickly people start asking you numerous questions to help them in their health needs and request medicines. No problems arose from these issues; however I found it difficult at times not to take action when finding children who were very sick. I did advise some people to go to a health centre for treatment.
PART 3: DESCRIPTION OF THE SITUATION

3. Cambodia
In this chapter a brief history background of Cambodia and especially Ratanakiri province are described to facilitate understanding of the context of the research village. The influences of foreigners and their organisations including aspects of globalisation are mentioned.

3.1 Historical and environmental context
Cambodia has a population of approximately 12 million people and is situated in South East Asia, bordering Thailand, Laos and Vietnam. Cambodia is under reconstruction after 25 years prior to 1991 of civil war, genocide, military invasion and occupation, and international isolation. Most of the physical and human resources infrastructure have been destroyed or severely impaired during the past two decades. The Pol Pot regime (Democratic Kampuchea, 1975-1979) marked the beginning of one of the most dramatic global tragedies; millions of people were killed and dislocated, especially educated and trained people, and others died from overwork and starvation. Following the demise of the Pol Pot regime, the People’s Republic of Kampuchea (1979-1989) created an era of isolation resulting in further degradation of the resource base of the country. The Paris Peace Agreement in 1991 marked the end of the civil war and the United Nations Transitional Authority in Cambodia (UNTAC) began the process of stabilising the country.

The Pol Pot regime presided over the destruction of Cambodia’s social and economic infrastructure in health, agriculture, education, economics, and culture in a vain attempt to restructure society along strict communist lines. With a centrally planned economy and the entire population subsisting on food rations and forced labour, malnutrition and illness were rampant and famine was widespread. Another unfortunate outcome of the civil war is the widespread presence of landmines, with an estimated of 10 million of landmines throughout the country. A particular characteristic of the Cambodia situation is the multi-faceted vulnerability created by civil conflict which is closely linked to poverty nowadays. Although there seems a little bit more future perspective for Cambodia and its people. The country is more stabilised, nevertheless the July 5-6, 1997 events, the coup, were a severe test for the coalition and the development of the country.

The silent emergency: ‘You are what you eat!’
Since the Paris Peace agreement in 1991, there is a huge presence of international organisations (e.g. UNICEF, UNDP, WHO) and non governmental organisations (NGO’s, such as CARE, ADRA, ICC, ZOA, OMF, HU, Concern, Helen Keller) within the country. Most of the organisations are working in the capital city, Phnom Penh, and some of them are spread throughout the country. The impact of these western organisations continues to be great, with some organisations ruling government hospitals, educations programmes and health departments as well as on national and provincial levels. Recently, the government is taking up more responsibilities and setting strict rules and guidelines for all NGO’s operating within the country, which makes it a little bit more difficult for the NGO’s to go their own ways. Next to the international organisations there are also the multinationals such as Shell and Heineken. Although their impact is growing, it still depends very much on the political stability of the country with opening new stations/fabrics or closing them down.

These multinationals and also the international NGO’s have a huge impact on the country. The big question remains if this impact is always positive or maybe more negative? Nevertheless, all these organisations contribute to the impact of globalisation effects within the country, meaning the increase of global interconnectedness between different countries. At the same time it continues to be dependant on the political situation within Cambodia. Over the past few years, there have been many changes, especially in the capital city of Phnom Penh, when one observes the street scene; pavement of the roads, street lights, traffic lights, increasing (expensive) cars and motorbikes, traffic jams and many food supermarkets, where only the white people and the rich Cambodians do their shopping. There are now some fast food restaurants like Lucky Burger, which is a local version of McDonalds. Global fast food chains such as McDonalds have not yet arrived in the country probably because of the instability of the political and economical situation of the country. Lucky Burger is a place where the foreigner can eat hamburgers, fish & chips and fried chicken, which is not a part of the daily menu of the Cambodians. A few years ago, one did not see any Cambodian going into these food stores, nowadays it is increasing.

There is also a big impact of NGO personnel driving around in their big white landcruisers with special blue numberplates and paying relatively high salaries to Cambodians, which are generally four times as much as an average government staff receives. During the last few years mobile phones have became very popular and also computers, cd-players, video’s and television. Most people can’t afford this kind of communication equipment, nevertheless more and more people own them. Whereas before, telephones were rare, many people are holding now a Nokia mobile phone in their pockets, with lights and special sounds. It seems
Cambodians are making a big step from owning none of this equipment, to owning the most luxurious and modern types. Also people are changing more and more their cultural traditions, for example moving from arranging marriages to choosing their own partners. All these changes, which often start in the capital city of Phnom Penh are gradually moving towards the small villages within the provinces and having its impact there too. It also gave people a certain status to have new modern equipment and materials, but at the same time most people do have hardly enough money to survive, while earning quite often low government salaries of 20 to 40 dollar per month. Such low salaries are also one of the reasons for corruption (civil servants need to earn money in different ways which will add to their salaries). Corruption is a part of people’s life in Cambodia, and not always seen as a bad thing, but more as a way to survive in a changing world.

Although there are many changes along with positive movements, the national health figures are still depressing, with mortality rates for under five years olds of 124/1000 live births, an infant mortality rate of 95/1000 live births and a maternal mortality rate of 473/100.000 live births. Life expectancy at birth is estimated to be 51 years. Cambodia has also one of the highest female illiteracy rates (42%) in South East Asia (Cambodia Demographic Health Survey 2000).

3.2 Ratanakiri province
The research village is situated in Ratanakiri province, which is located in the north-eastern corner of the country. Ratanakiri means the mountain of the precious stones, coming from the pali words: Ratana which means precious stone and Kiri which means mountain. In the past, Ratanakiri was called, pretjantanah, red land, because of the red land full of iron. Ratanakiri is a remote province of north-eastern Cambodia, bordered by Vietnam to the east and Laos to the north (see annex 3). Apart from Khmer, Vietnamese, Lao and Chinese, there are six main Indigenous People Groups: Tampuen, Kreung, Brav, Kavet, Kachok and Jarai, living in Ratanakiri. These groups are generically referred to as Highlanders, and sometimes as ‘minorities’. The reality is that collectively the Highlanders are the majority population of Ratanakiri province with more than 60% of the total population of 95.000 people. In this context the Khmer people, the dominant ethnic group in Cambodia themselves constitute a minority. Still the Highlanders are most of the time called ‘minorities’ and are extremely marginalised by language, culture, geography and economic factors in comparison to other Cambodians.
For centuries the Highlanders have been in contact with Khmer people and other foreigners. As early as in 1642 a Dutch explorer reported that Chinese merchants traded salt and iron for slaves, deerskin, beeswax, rhino horn and elephant tusks with people living to the north east (Colm 1996). French explorers in the 1850s refer to a tributary relationship between Cambodia royalty and the Jarai Kings of Fire and Water. The Khmer King sent tribute to the Jarai Kings of fire and water, who were powerful Jarai shamans. Since 1600 the Khmer kings sent regular gifts to the Jarai to ensure protection from invasion from the people to the north of the kingdom. Apart from the trading goods, Ratanakiri area was frequently raided by Khmers, Laos, and Thai to supply the slave trade. The Thai dominated the region as far east as Veunsai district until late into the nineteenth century. The French colonisers drove out the Khmers from this area and in 1893 the Thai signed a treaty with the French to hand over the area east of the Mekong River to the French colonial administration (White 1995). The Highlanders settled largely in their present areas in Ratanakiri with some resistance against the French, who introduced rubber plantations to make this area commercially viable for them.

During the Prince Sihanouk-led Sangkum Reastr Niyum era (1950s and 1960s), the government implemented a policy of integrating the Highlanders into Khmer mainstream culture. Khmer soldiers and their families were allotted plots of lands to settle in this area, the Highlanders were resettled along roads, the Khmer education system was introduced and the rubber plantations were expanded. At the same period, Ratanakiri province was carved out of the province of Stung Treng and administered through military command.

During the early sixties a number of Cambodian opposition leaders went into the Maquis. Originally the word referred to high ground in south eastern France and Corsica that was covered with scrub growth. This is the kind of terrain in which the first armed resistance groups hid. Members of those bands were called Maquisards. Eventually the term became an almost honorary term that meant armed resistance fighter in the dense jungles of Ratanakiri. This movement grew to what became known as the Khmer Rouge under the leadership of Saloth Sar, who became known as ‘Pol Pot’, Ieng Sary and others. This Maoist movement initially regarded the Highlanders as excellent role models for Cambodians to aspire to, as they were untainted by industrial life and foreign influences. Many Highlanders were drafted into this movement and gained cadre positions in the Khmer Rouge. It was in the final years of the Khmer Rouge reign of terror in the late seventies that the purges also turned on these Highlanders. An estimated 7% (9,000) of the population of the north-eastern zone (which consisted of the four provinces Ratanakiri, Mondulkiri, Stung Treng and Kratie) died during
the Khmer Rouge period (Sara Colm 1996). Compared with the overall numbers of casualties in Cambodia, this is a relatively low percentage, but it had an enormous impact on the culture and lives of the Highlanders. They were forbidden to wear their traditional dress; a custom that did not return after the demise of the Khmer Rouge. Other Khmer Rouge programmes such as forced resettlements and compulsory communal eating went against the social structure of the Highlanders.

Isolated as Ratanakiri province might be, it was at the heart of international conflict during the American-Vietnamese war. The Ho Chi Minh Trail ran through the province, and the north-east region was carpet bombed by the Americans during the Lon Nol period. These raids forced villagers to flee and hide in the jungle. Ironically, images of these bombers found their way into traditional art, meetings house has a wooden four propeller airplane hanging from the ceiling and a few family houses have images of wooden planes on the eaves.

Ratanakiri province is divided into nine districts with one provincial capital town, namely Ban Lung. The population in the capital town consists mainly of ethnic Khmer who have recently migrated from the lowlands, mainly form the provinces of Takeo, Kompong Cham and Kompong Thom. The rest of the province consists of the Highlanders. There is not so much of their history or origin recorded. There is speculation that the Kreung, Brav and Kavet languages originate from the north, having moved south, and the Tampuan, Kachok and Jarai came in from the south-east (White 1995). The arbitrary creation of the Cambodia – Vietnamese border by the French colonial administration separated the Jarai people from their relatives in Vietnam. Up to this day there remain strong ties between both groups. At the present the Tampuan are the biggest ethnic group with an estimated 24% of the population in Ratanakiri. The Jarai are the second largest group with 19%, the Kreung are around 17% and the Khmer 12 % of the population in Ratanakiri province (Noorlander 2003).

The past few years there are many things changing for the Highlanders; threats to their traditional livelihoods by rapid degradation of natural resources, deforestation, in-migration from lowland provinces and land confiscation. Labour in-migration, people moving from the lowlands to Ratanakiri province, is having a huge impact on the Highlanders life. Khmer people, foreigners in the eyes of the Highlanders, are seen to be earning lots of money, setting up businesses, owning logging companies, director of rubber plantations, building big houses and introducing new goods and equipment. Also the increasing volume of tourism.
has its impacts on people’s lives, tourists watching the way people live, buying traditional artifacts for huge amounts of money, taking pictures, renting motor taxis and leaving a lot of rubbish behind. Unfortunately, most of the time it is not the local people who earn money from the tourist, but more the middleman (often Khmer people) or other foreigners. When one observes the impact of globalisation in villages in Ratanakiri, it is not nearly as huge as in the capital city, but certainly there are influences already. Below some examples:

1. Most villages do have some people who own a television, video recorder or radio, which is often use communal, with other people paying money to watch or to listen too. Although, in the small villages in the province it is not possible to watch television, because of lack of electricity. Together with a generator, most of the time they use the television with a video recorder to watch movies.

2. For most people it is still difficult to go to the market in Ban Lung, because the distance is too far for walking. Some however do travel to the market. In recent years, more and more villagers are starting to own a motorbike, or pay some money to rent a motorbike to go to other places. At the market place, there is a variety of different products, with many local products coming from the Highlanders themselves, especially fruits and vegetables, but also many products coming from Phnom Penh, Vietnam or other countries. All these changes can have an enormous impact on people’s health and well-being. For example, the introduction of Monosodium Glutamate (MSG), coming from Vietnam during the Khmer Rouge period, has made a big impact on people’s diet, and is an important ingredient in every dish.

3. Another big impact on the environmental context is the introduction of plastic; everywhere you can find plastic bags or other materials made from plastic, while most Highlanders coming from the province still use their banana leaf and rattan baskets to wrap their goods.

4. There is an increasing economic problem. Until recently the Highlanders had a largely non-monetary system; barter and exchange were the mainstream of commerce. However the economy is becoming increasingly cash based. The sources of cash for the Highlanders are few. Some obtain money from tourists visiting the villages and partaking of festivals. Some sell excess products to the markets. This is labour intensive activity, as people, usually women, have to walk to the markets carrying the produce in a back basket. The journeys can be more than 10 kilometres each way. The basket full of products will not earn more than 4000 riel (approximately 1 dollar). The Arak (spirit healer) and other practitioners can charge up to 20,000 riel for advice and the traditional birth attendants are also beginning to charge cash for their services 5,000 to 10,000 riel.
Also the priorities where people spend their money on can be changing over time. If people found it important to use modern equipment it can be at the cost of their necessary daily food consumption.

4. Tampuan Indigenous People Group (Highlanders)

There is hardly any literature written about the history or traditions of the Tampuan; therefore my focus will be on the stories of the people themselves, stories told by different people as well as in the village where I did my research, but also with other people outside the village. In this chapter, some aspects of the historical background will be mentioned and more information about the religion and the way Tampuan live will be given.

4.1 Historical background

People were telling that it was a very long time ago that they started to live in Ratanakiri, nobody could remember what time, but most people were mentioning that it was long before Sihanouk became king.

The villagers told us that in the beginning there were many nationalities, such as Tampuan, Lao, Khmer, Vietnamese, and they were all one group of brothers. All people received their language from the boketeeh, the god who created the earth. The Khmer, Lao and Vietnamese people wrote the alphabet on paper and the Tampuan people wrote it on the skin of a buffalo. The Tampuan decided to write the alphabet on the skin, because if they wrote it on the paper it would be destroyed easily because the paper is too thin. But at that time they spend a lot of time drinking wine and while they were drinking they did not take care of the skin and did not notice a dog grab the skin and ate it. That’s the reason why the Tampuan do not have an alphabet in their language. Nowadays, they do have the alphabet again, because an NGO trained people from their own village to teach the people how to read and write in their own language and into Khmer, the national language.

The Tampuan are also called: Tampou, Tampuans, Tampoun, Campou, Tampuen, TiomPouen, Kha Tampuon, Proon/s. The population statistics estimates 25,690 people (National Census 1998). Their spoken language has been classified as Austro-Asiatic, Mon-Khmer family, Eastern Mon-Khmer subfamily, Banharic group. Central Banharic subgroup. The Tampuan are the oldest established group in the region and they were moved from the northeast of the province to their settlements due to demographic pressures from the Jarai, living in the Vietnamese provinces of Pleiku and Kontum (see annex 4).
Currently there are Tampuan villages in seven of the nine district of Ratanakiri province. The Tampuan tend to consider themselves as two different groups instead of only one: the north-east Tampuan (upper Tampuan) living near the Jarai and the south-west Tampuan (lower tampuan) living close the Kreung. It is also observed that Tampuan living near the Jarai are more adapted to the Jarai culture and traditions and the Tampuan living near the Kreung, more to the Kreung.

4.2 Worldview and Religion
The religious behaviour of the Tampuan depends somewhat on their geographical situation. Tampuan villages neighbouring Kreung communities have different spirit mediums than the Tampuan bordering Jarai communities. In this research, I focussed on the Tampuan living near the Jarai communities and their world view and religious beliefs because the research village is situated near the Jarai communities and did adapt their way of living.

The Tampuan believe in the creator, a god, boketeeh, who created the earth and everything will follow after this creation. In the beginning boketeeh created a dog and a woman. The dog and the woman lived together and had a child. The reason that the woman married the dog was because there was nobody else and you have to know that during that time the dog could speak while nowadays dogs cannot speak anymore. One of the village elders expressed: *'The dog is not a dog like we know nowadays, but just a kind of dog and maybe dogs in Europe can speak too'!* After awhile they took the child to another place away from the mother. The child became an adult and met his mother again. When they met, they decided to live together and had a child too. *'We believe that all the people on the earth are descendents from this child'*.

Also that time there were many Tangriji leaves, and boketeeh used that kind of leaf to create animals, all different kind of animals, such as birds, tigers and fish.

The Tampuan follow an associated belief system, which mean that according to their belief system, spirits inhabit the surrounding environment; the forest, earth, water sources, hills and rice fields, even the village itself, all have their own spirits. These spirits are believed to have the power to influence many aspects of people’s lives, from the quality of the rice harvest to the health and well-being of villagers. At particular stages of the agricultural cycle, in cases of human illness where supernatural interference is believed to be the cause, and at other opportune times during the year, these supra-human forces are propitiated with the sacrificial offering of animals and rice wine. These are used as a means of exchange to obtain other locally-prized objects: brass gongs which are played at sacrifices and feast to
please the spirits. The Tampuan believe in different kind of spirits and they make a
distinction between these spirits: the bra and the petruu. The bra is a spirit they cannot see
and the petruu is somebody’s soul after he died, which you can see often glossed as ‘ghost’.

There are two kinds of petruu, petruu tuitreh and petruu tuidah. When somebody is old and
he/she died than they call this petruu tuidah, but when somebody walk in the forest and fall
down, or is catch in a trap or fell down from a tree, than they call this petruu tuitreh.
Sometimes when they sleep and dream they see their ancestor or ghost, they don’t know if
they are alive or dead. They also see sometimes petruu’s who can talk with each other.
Throughout the whole region, the ‘ghost’ of someone who died a ‘bad death’ is dangerous
for the living. A ‘bad death’ would be dying in an accident, from violence of others, or a
woman dying in childbirth. The ‘ghost’ of someone who died of a disease is not generally
dangerous; thus they died a ‘good death’ if they died of a disease.

The name bra is used for spirit, but dependent on the surname of the bra, which specifies
what kind of spirit people are talking about. The bra is like a ‘power’, for example there is a
big tree in the forest and if people cut the tree without asking the bra through sacrificing,
than the bra will get angry and will make them sick or give them other problems. There are
many different kind of bra’s. The Tampuan people make a distinction between the good and
bad bra’s: bra dah and bra buik. Bra dah protects them and is always looking after them; so
that the people do have enough food to eat and that there is no sickness in their families.
Fighting and accidents are coming from bra buik. One of the bra buik’s is the bra from the
sky or also called bra of the thunder, which gave people thunder and lightening. It is very
important to respect the different bra’s and not to mix them together, otherwise you will
have a big problem with brajoid. For example if a tiger bites you, they call that brajoid,
because you mix yours and mine bra together: the tiger or snake will bite you. Another
example is that you can never mix the house spirit from one man with the house spirit from
another man. The name of the highest spirit is Bra sliesh, spirit from the sky and his name is
Bra Ling Plaing, he comes from the sky to the earth. If this spirit asks the people for a
buffalo, through lightening and thunder (strong sounds), you have to sacrifice it otherwise
he will destroy the trees and the land.

5 Bra’s: such as ‘bra penuom’ (mountain spirit), ‘bra brie’, ‘bra long’ (tree spirit) and ‘bra tjuep (water spirits), ‘bra
petroo (house spirit) and ‘bra hij’ (ghost – ancestors), ‘bra siah’ (intersection spirit (roads), farm spirits – ‘bra
meir’

The silent emergency: ‘You are what you eat!’ 36
The major sacrificial festivals are held during March and April to select and prepare the fields for the new planting season. But there are also many other ceremonies involving blood sacrifices, held at other events, such as getting a new house, sickness, death, some problem in the village, praying for rain and rebuilding the meeting hall. The blood sacrifices play a major role during sicknesses. ‘When we are sick, we will see the spirits, because the spirits can help us’. ‘Most of the time we do have to sacrifice and if this does not work than we go to somebody else’. First they have to find out which spirit causes the illness. If it is a mountain spirit, then they have to sacrifice along the road. If the people do not know which spirits causes the disease, they can go to a ‘teller’ or a message spirits, plai tjoo. The ‘teller’ will tell you which spirit is causing the disease and what kind of sacrificing is needed. Then the person involved conducts the sacrifice, following the instructions a chicken, a pig or buffalo in the right place. Ratjes is the place where they put the pork/blood of the pig and than they pray and sacrifice to ask the spirit for help. When they take out some pork with blood of the pig, especially the liver or stomach of the pig, they go the road and let the spirit walk away from them. After that when they lift up the spirit and finish with the sacrifice, following which they eat and drink together. People say that the plai tjoo sometimes lies, because sometimes people do not get better. There are two different plai, a plai who can determine the problem, what is wrong and right (rekue plai, male spirit) and a plai tjuu who can look with a flashlight everywhere (female spirit).

In the village where I did the research, I met the rekue plai, who can determine the problem. I did interview the man, but it was hard to understand his concepts and the method he used to work. The man is like a medium, who (blayse) divines by observing a piece of string on a special wooden stick. The medium places one end of this stick in the crook of his right arm, with the other end of it pointing downwards. The movement of the string at this pointed end enables a diagnosis to be made. This divining process is described as asking the stick with a close relative of the patient playing the role ‘asker’ while the medium’s powers allow communication with the spirits. In general the ‘diviner’ determines the answer to his question by measuring by hand spans, if the span ends up exactly, then the suggested answer is right, if it does not end up exact, then the suggested answer is wrong. When he knows what spirit is causing the problem, he tries to find out what kind of sacrifice needs to take place.
One of the other mediums is the *Kruu Barong* (also called *Kruu Khmer*), he is the one who can see the spirits. *Kruu Barong* is not available in every village, but one or more is normally known to be operating within the local area. The village where I did the research does not have a *Kruu Barong*, but he lived in one of the neighbouring villages, ‘Samlakong’ village. From White (1995,1996) we know with more detail how the process of mediation, negotiation and compensation work in everyday life: ‘Mediation is a crucial aspect of conflict resolution and there are defined systems for ensuring problems. The case is presented by the mediator and both parties and was given the opportunity to state their respective positions. Cases of intra-family disputes which cannot be resolved internally are also mediated at village level. In addition to mediators who are chosen to facilitate the process of conflict-resolution, there are also mediators for marriages. A folk tale relays the following story which shows the way how spirits are a part of people’s daily life and influence people’s life and decisions:

### Once upon a time, when a woman was pregnant and needed to deliver her baby, they cut the baby out from the stomach, the women died, and only the child was alive. There was one family and the woman was pregnant too. Her husband is very sorry about his wife, because she is very beautiful, and now she has to take out the child from her stomach. So he feels very sorry, that his wife will die, he has no idea how to decide and what to do? He went to the forest and slept near a tree. He slept near that tree with his knife and he put his knife in the tree. Then he lay down to sleep and in his dream the spirit comes. This spirit woman is pregnant too and delivers a baby. Then during midnight he heard a noise and saw a spirit. The spirit talked to another spirit to give birth, and the man just listens about getting a midwife and to push the baby (massage) out. The man just remembers what they are talking about, the spirit who just helps the women to give birth and he told his dreams to the elder of the village. He told him to boil the water and to put salt in it and gave it to the woman to drink. The man who sleeps under the tree always remembers. They told her to go back to her village. He remembered to act like the spirit in the same way with his wife and she did not die. After that suddenly the morning come and what he remembers from the night, he went home and went to see his wife. He does the same way with his wife as the spirit told him. Use the fire; so that his wife could sleep near the fire, we still do that nowadays. We still do the same way from the beginning. Now we are improving, now it is better, he got a child, but the mother did not die. When the baby got born, the spirit told them to make the fire for the woman, so that she can sleep close to the fire. Nowadays they stopped with cutting out the baby.'
The Tampuan believe that present times are nearing the end of the world, and that they will soon disappear: ‘We know this because we see around us that people become smaller and smaller’. 'Before we were very tall, like you in Europe, maybe the people who are still big are the original people, but most of us are very small'. ‘We also believe that some people are big, because the parents are big too, but they are just an exception’. The Tampuan women said that another reason of being very small is because most people married too quickly and that’s why they are so small and short or because they do not have enough food to eat. But many people were mentioning the same story that people get smaller and smaller because the earth will disappear. Several people expressed that they started to become small because otherwise they could not get the eggplant from the tree while they are small it is easier to climb into the eggplant tree. It is good to known that eggplants do not grow on trees, but probably the people who used the word eggplant meant ‘vegetables’ or food in general. I discovered this during the analysis of the research and could not confirm this statement anymore with the people themselves.

They expressed that they will become smaller and smaller until the world will be finished. 'God will turn the world upside down and will create new people again'. 'God will change the earth, so we are the last people and God wants to make the earth new and change the world'. The Tampuan believe that the world is round and moves too, they even said it is easier for God to turn the world, because the world is round. But they explained that it is not really turning the earth, but comparing with the new generation, the old generation will die, and the new generation will grow up and that’s the same with turning the earth. Another person said it is like turning people, not turning the earth, for example, like our grandmother and grandfather died, now we are growing up. Young generations row up and become old and the cycle continues over and over again. Most people express that they have no idea what will happen after they will die, but they know that it is not possible to become alive again. At the same time the Tampuan expressed that they would like to be bigger and stronger. But they also said that they cannot do anything about it, because God makes them like this. God make them the way they are, if they get born like this, like yellow/black skin, ‘God made you like this and you cannot change it’. In general I noticed that Tampuan people do look very negative to themselves, through saying that they are nothing, do not have any possibilities to grow, to develop or to improve their lives. Other people call them minorities, but they said that they feel like minorities, they are not important at all.
4.3 Clans

The Tampuan society is divided in many different clans (pongs)\(^6\) and for some of the pongs there are sub-clans\(^7\). The division of pongs started a long time ago. The story told by many people was that once upon a time, there was one village and there was an old woman living in this village. A very long time ago they wanted to move this village, to make a new village. All people brought their clothes to the new village, but the old woman stayed behind in the house, because she could not walk. The name of the old woman was Pong Tieng. She did not go to the other village yet, because she could not move, therefore villagers decided to get her later by ox-cart. So when the villagers got back to pick her up they saw nearby the old village the dog barking against a crocodile (Raya).. Other people went to run to see what was happening and discovered that it was a Raya. They were wondering why the dog was barking for a Raya. The dog was trying to bite the Raya and at the end the villagers killed the Raya, so they could eat it. When they open the stomach, they found old mats, pillow, and pots inside the stomach. The villagers found it very strange, because it was all kind of things they kept for their grandmother. One of the villagers went to go to see his grandmother in her house, but he could not find her. Then they thought maybe the grandmother became the Raya. At the same time some people were cutting the Raya and preparing the Raya for eating, others were shouting; please do not eat the Raya, because this Raya is our grandmother. That’s why they called these people after the name of their grandmother Pong Tieng. This was the creation of the first clan and after that they spread it out and other pongs were developed.

After awhile Pong Tieng became Pong Tieng kren, because of two people from the same Pong Tieng married each other and they became Tieng Kren. The elder of the Pong did not allow them to marry with each other within the same Pong and so he punished them (meaning in Tampuan language: kren). They pay a buffalo, or cow or pig to the villagers and that’s the way they became the first members of the Pong Tieng Kren. In this way many different pongs were created after different events. Such as Pong Kwais, which mean ‘take out’ and is called after the fact that they took out the wood from the fire for cooking the Raya meat and Pong Samlong, which mean ‘looking’ is called after the person who was looking to the other person who eat the Raya meat. The man who received the stomach of the Raya and holding the banana leave to wrap the Raya meat is called Pong Clown. Pong

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\(^6\) Pongs: Clown, Ramá, Ramaan, Tieng, Raatjam, Pauws, Kwais, Saui, Songlong, Kamel and Treuh

\(^7\) Clan Tieng: Tieng tor, Tieng kren, Tieng reng or Tieng auk, Tieng prais, Tieng krijn, Tieng riji, Tieng reang tong dauw, Tieng samriek, Tieng tapeung, Tieng hol and Tieng proek.
Clan Clown: Clown patul, Clown petruu, Clown trauw

*The silent emergency: ‘You are what you eat!’*
Kamel came from the person who was holding the ‘panel’ (board), Pong Ratjam the one who was pounding the Raya leg and Pong Ramaan the person who was eating and chewing the meat. Some creations are more complicated, but always related to a story and often combine with a certain taboos, which most of the time means that they cannot eat certain food, because if they eat they will die. The taboo protects the people from accident or during war time. If people do not follow the taboo, than they will not receive protection.

In addition to these stories there are two Pongs, who have many different sub-clans, because of dreams and taboos. The people believe that when they dream that they receive messages from gods or spirits, who tell them all about the different taboos. For example, Pong Tieng Tapeung, during that time there was a war, so tapeung (meaning bamboo) is helping the people to protect them through prayer. Nowadays people belong to this sub-clan do not eat bamboo. Pong Clown Petroew is created because one person in the family died and came back to life again. The story of Pong Tieng Taloomeng, is that they were fighting with Lao people and ran away. Only one person could escape from it, but there was no rice to eat, only sugarcane which broke the teeth of the person who ate it. Pong Tieng Tor, they were fighting with the Lao people too and the person ran away, and the child was crying loudly. They were afraid of Lao people, that’s why the child was not aloud to cry and they killed the child with a big tree. Pong Tieng Krijn, there was a person who went to take the young krijn (bird) from the tree. He climbs in the tree to get the child of the bird and made a promise with his wife that he will pound the rice to make flour. Suddenly the wife heard a noise and thought that this was a bird, but when she looked it was her husband who fell out of the tree and died.

4.4 Family and marriage
The Tampuan society is a matrilocal, monogamous and matrilineal marriage system, organised through a process of marriage bi-locality: a newly married couple first spends several years living and farming with the bride’s parents, then moves to the home of the groom’s parents, until settling in the bride’s village (the time lapse between moves and before settling varies and is negotiated between the two sets of parents). Therefore, one can say that the Tampuan are not strictly matrilocal since they do go to live with the groom’s family after the initial period with the bride’s family. But in general, family life is organised around the woman and her daughters. When a woman marries a man and has children, all the children will be from the same pong as the mother. Also the name giving goes through the matrilineal line. The Tampuan names centre on a limited number of dominant female
family names\(^8\), the husband keeps his original name and the children take the mother’s family name. People of the Tampuan Highlanders group cannot marry within the same pong, they have to marry outside their pongs, so-called exogamy. People within one pong are all called relatives from each other. Although, exceptions were made or some young couple’s just did not listen to the elders and married within their pong. The elders of the village gave the couple’s who did not want to listen a high fine and they need to repent that they did wrong, but you can continue with your married life. The advantage of exogamy is that it extends the social ties of cooperation and increases the alliances between different pongs. There were also many women who told us that they do not care if people marry with somebody from another Indigenous People Group, as long as they love each other. Till now it is very important for young people to marry, although because of the history of war, there are many older women who do not have a husband and did not marry again, but live as a widow with one of her relatives. When you talk with the women, they all indicated that their marriage was an arranged marriage by their parents. Nowadays there are a lot of parents who do not want to keep that tradition and found it more important that their daughter or son marries somebody they really want to marry. Parents still help and support the marriages, but with less pressure. In the past most girls married in their young teenager’s years, now some of them are older, when they can afford it not to marry or to go to school to study.

One other aspect that is important to mention were the different explanation of household, family groups and extended families. The term ‘household’ is related to the special ‘cooking’ or ‘fire’ place in the houses. Each ‘cooking’ or ‘fire’ place belongs to one specific nuclear family; parents, children and who ever lives together with that nuclear family at certain times. The membership of the household changes from time to time. For example; in some houses in Paôr village there were living three different households in one house. Family group as it is referred to here is the combined members of a family who either live together in the same house or live in direct proximity to each other in the village, with one family house as their focus. The extended family group are members of the same family who have different bases in the same village or even in different villages but will still join together for family and village communal activities.

\(^8\) e.g. RO cham, Kvas, Ting, Ro Mam
4.5 Gender issues
Women and girls living in highland communities, such as the Tampuan communities, have very distinctive tasks from men and boys. Both sexes perform agricultural work, men slightly more than women. The men go to collect food in the forest and go for fishing and hunting, while the women collect the plants and vegetables in the chamkars or near the streams. However, the daily tasks of cleaning the house, looking after the children, fetching and carrying the water, collecting firewood, cooking, are solely women’s duties. These activities take up a lot of women’s time and energy on top of their agricultural work. Women spend the whole day working in their chamkars and at home. Their leisure time is significantly less than that of their husbands and male family members (van de Berg 1998). In annex 5 it is very clearly seen that women work longer hours and have fewer resting hours including leisure time, as compared with men.

4.6 Making a living
The Tampuan are known as horticulturalist and swidden agriculture is the foundation of the indigenous people’s livelihood. The swidden agriculture is based on the slash and burn cultivation techniques. In slash and burn cultivation, a field is cleared by felling the trees and burning the brush. The burned vegetation is allowed to remain on the soil, which prevents its drying out from the sun. The resulting bed of ash acts as a fertilizer, returning nutrients to the soil. Fields are used only for three to five years and then allowed to lie fallow for a number of years so that the forest cover can be rebuild and fertility restored. This means that Tampuan people shift their chamkars every three to five years. Most Tampuan do not move their houses or the villages every time, but live during certain times of the year in their chamkars and other times they travel up and down between their chamkars and their house in the village, which is sometimes more than five kilometres. The boundaries of the individual chamkars are widely recognised between families and by neighbouring villagers. They can frequently be identified by reference to local forest, mountains and streams. At the same time, it is a communal informal recognition and most villagers do not have any official papers or contract of land ownership. Recently, some organisations are advocating for these land rights (official land deeds) to support the local people to protect their land, because more and more settlers moving into the area are trying to buy or take over their land.
It is important to note that the *chamkars* cannot provide for all the needs of swidden households, and forest resources such as fruits, wildlife, fish, traditional medicines and construction materials are indispensable to those practising swidden cultivation. Very few crops are grown inside the village as it is difficult to protect them from pigs, chickens and cattle which are usually allowed to roam freely. People work hard on their *chamkars* and all work on their own family *chamkars* together with their wife or husband and children. They do not hire labour from outside the villages, only sometimes there is an exchange of labour in the villages. For example, nowadays, the volunteer teachers who are villagers who have been asked to teach literacy classes, the students voluntarily compensate him by helping him in his fields.

Until a few years ago, the Tampuan society had only an exchange economy in goods and people did not have to deal with any currency at all. In the last few years, the economy has been changing, the money trade started and influences from outside come in. National Khmer business men are buying products and land from the Tampuan, while most of the time the Tampuan hardly know the value of their products and land. Often people are not fully aware of the effects of the changing economy and are indoctrinated by outsiders, sometimes authorities and other times businessmen who want to benefit from them. People are in a vulnerable position to fight for their own rights such as land ownerships. If people in the future do not have their own land anymore, it will have a big impact on their income and on the amount and quality of food available.

Other issues are the amount of cutting down the forest and the degradation of natural resources. Recently, it is official forbidden by the national government, but in practice it is still happening. Knowing that people live from the products of the forest, this illegal logging has tremendous impact of human food resources and therefore also on their nutritional status. In general it is known that Tampuan people do not have sufficient food available throughout the year and it is quite worrisome to observe the economic and environmental change, which may have even a bigger impact on the availability of food.

Given the harsh environment in which the Highlanders have survived for centuries, strong social support mechanisms have undoubtedly been necessary for this long-term survival to be possible. The strong social cohesion provided by extensive kinship networks is further enhanced by the villagers’ sense of membership to their particular village. Such allegiances are confirmed through the religious belief system: family groups have their own protective house spirits, while villages have village spirits who are offered a feast every year.
5. Paór village

In this chapter the historical background of Paór village is written down. This chapter is focusing on certain aspects of village life the way people told their stories including my own observations about village in various aspects, such as housing, food, livestock, water sources, education and hygiene. But before you can discover all these aspects you have to be adventurous and enjoying challenges as it is recorded in my diary below:

'We drive on our motorbikes through the forest, along small forest tracks, through the fields, not faster than 20 km per hour, there are many holes in the road and the road is so narrow that you have to be very careful, because you never know who will come from the opposite direction. Most of the time, there is hardly any traffic, but you never know, and there is not so much space left, thus if you cannot see further than a few meters in front of you, you have to use your horn, so that people can hear that you are coming. While you are riding on this path you will meet other people walking along these tracks, on their way home, to their farms, to fetch water, or to search for food, with a crossbow and arrow in their hands, in the hope of catching a small animal, such as a bird, rat, or a mouse to bring home for the family to eat. Also we meet many dogs, cows and pigs walking in the middle of the roads. The trip continues through the forest and the fields, beautiful, exciting and sometimes I just stop to listen to the quietness and the silence of the nature around, especially when the sunset is nearly there, beautiful red sky! Sometimes there is suddenly a small house, or some people, or another motorbike passing us, but for the most part there is only us on the road.

Totally it seems a very long way on a dusty sandy small forest track where you have to balance your motorbike through all the holes, so that you will not fall down. Most of the time, it looks like it is very foggy, because of all the dust on the roads. I enjoy driving here; enjoy the surroundings, the beautiful nature, the people I meet, but also the challenge with the motorbike, to find the right places to pass. To drive a motorbike on these roads is really an art in itself! Than at the end of the trip with all these holes and dust, what is left; a sore bottom, muscle pain in your arms, a body totally covered with dust, but you finished at the place where you want to be in a really short time compared with the people who are living in these places who can only go by foot so it takes them much longer. So, I travelled many times from my based station in Ban Lung, the capital town of Ratanakiri province to Paór village, which is approximately 1,5 hour (30 km)'.

The silent emergency: ‘You are what you eat!’
5.1 Historical background
The study was situated in a village in one of the largest of nine districts in Ratanakiri province, namely Paór village. Paór village is already many years old and people cannot remember when it was founded. What they could tell was that the village moved several times because of the war. They left the area before, because they were forced to leave during the Pol Pot period (1976-1979). The Khmer Rouge moved them to ‘Sepaam’, name of the field, where they needed to make paddy rice. After Pol Pot period, there were problems and fighting with the Vietnamese and they moved their village to live together with the people in Jem village, because the Vietnamese did not trust the villagers, they made one village from two separated villages. After that they moved for one year to another place called Senum, they called it later on Khum Jem (commune Jem), which was change at the end to Khum Long Khung. In 1994, they moved back to their original area where they are living to date, because the land in Long Khung village was not their own land. Most people expressed that they belong for generations to this village, in the past people moved only to another place because of marriage, but during the war, people did not have a choice, otherwise they would be killed. Nowadays more and more outsiders are coming to live in the village or villagers leave to another place where they hope they can be happy. Sickness is also one of the main reasons to move to another village, people get sick because of conflicts or problems with the spirits in the village. The only way to change the situation is to sacrifice to the spirits or to move to another place.

The period of Pol Pot was a very difficult time, because they were forced to work and did not have enough food to eat. It was also difficult because some people belonged to the Khmer Rouge and others to the Vietnamese; you never know who belongs to which party knowing that they were all Tampuan. Also after this war period it was difficult to know whom you can trust or not, because you were always mixed with the enemy and fighting against each other within the village.

5.2 Inhabitants
Total numbers of people living in Paór village were approximately 459 people in 94 families with a total of 249 females and 210 males including children. The village leader told us that there are 20 families in this village who are poor while most people in the villages were saying that there are only a few families who are rich and that most of them are poor. The village leader and the women had different criteria about the concepts of poor and rich. The women described families as poor, when they do not have enough food, cannot earn money,
do not have any ideas, no knowledge, no power, have no chicken or pigs and do not have a motorbike. Rich people are the ones who have good houses, buffalos, cows, have many goals and plans, good in keeping their money, work hard and enough food to eat.

Paór village has one formal village leader and he is married and has three children. He has been the village leader since 1986. He is elected by the people, after the government developed a new structure of having in each village a village leader in place. He received a salary from the government. The tasks of the village leader is to be responsible for sharing information from the government to the villagers, to control the village, to teach and share any knowledge, such as planting rice or how to do farming, to help solving any problems and conflicts, and to update the statistics.

Next to the village leader, the village has eight village elders, they are all wise and old men, they are appointed by the villagers as their elders. Amongst the Highlanders respect for the village elders is fundamental. These village elders steward religious ceremonies such as ceremonial feast in the fields, ceremonial offerings in the house for the ancestors or healing ceremonies for family members. It is their responsibility to manage these proceedings and begin ceremonies with an opening prayer to the spirits over rice wine jars and inviting them to the feast. These elders may also be called upon to mediate over intra-family disputes. They also play a role in reminding the family of obligations to the ancestors and for preserving the family oral history. Villagers described how within some families, the elders are careful that younger family members are taught the names of their recent ancestors in a chronological sequence which they learn by rote. It is also known that the different pongs in each village have their own elders, but these are not all necessarily represented amongst the elders of the village as a whole. There is no political organisation of pongs appears to exist beyond village level. The village elders are the leaders inside the village and the village leader is the assigned person to speak with outsiders including the government. Next to the structure of village leader, there are a few other structures organised. There is a division of groups in the village with a group leader for each group. Nobody could exactly say how many families are belonging to one group, but probably between 10 to 15 families. The task of the group leader is, to organise meetings, to collect money for funerals or other activities, and to encourage people to help each other. There is not a geographical division between the groups and it has also nothing to do with their pongs, but it is just known to which group you belong. Furthermore, there is a committee formed by a NGO, CARE organisation, but I did not discover any official Village Development Committee's which are official organised by the government or NGO's in many other villages throughout Cambodia. It seemed that
people in the village are much more involved with their own traditional structure than the structures implemented by outsiders. At the same time people wanted to be involved because of financial benefits.

Other people in the village who were important were the Traditional Birth Attendant (TBA’s). Paór village has two TBA’s. In general the villages do have high respect for these TBA’s, who are the ones who support to deliver all their babies. The TBA’s learned their skills from their mother and grandmother and some even got some teaching through dreams. The TBA’s do not do any antenatal or postnatal care for the mothers and are not involved in food related issues.

Another important individual is the older woman, who is the leader of the women’s group (krum neri). However, we discovered that the krum neri consists of only one woman, the leader. She is the one who cooks for people during community meetings, but she also joins meetings to share about the problems of the women in the village. Last, but not least, the traditional healers, one of them called plais lives in the village and one of them called Kruu Boran, lives in a neighbouring village. Both men support/treat the villagers when they are sick.

There were a lot of children in the village. They were numerous children with bald spots and white spots on their heads, which appeared to be scabies. I saw also one very sick child, with a greatly extended abdomen, pale, big eyes and breathing quickly. The mother of the child was sitting next to the child, along with other family members. They told me that the child is sick because of the water spirit. The child went that morning to the stream to take a bath, after which the problems started. The only way they know how to solve these problems is to sacrifice a chicken to restore their relationship with the water spirit.

5.3 Village life
The Tampuan villages have a different structure depending on the geographical situation of the village (White 1995). Most of those situated close to Kreung settlements, are built in a similar manner as the Kreung, whereas the Tampuan in the south-eastern areas, bordering on Jarai communities, construct family longhouses from bamboo, like their Jarai neighbours. This reveals the dynamic influence neighbouring groups have had on each other over time. Interestingly, in terms of their identity, both faces of the Tampuan consider themselves to be original Tampuan, although some of the Tampuan in the south-east describe the other Tampuan villages as ‘doing Kreung’, in other words following the Kreung social system. The
village where the research is done is situated near the Jarai tribal group, approximately 40 km from the border with Vietnam.

5.3.1 Housing
The village structure in Paór village is a rectangular structure and all houses are scattered in lines. The social organisation of the groups is characterised by their construction of vast longhouses constructed from heavy wood and bamboo, in which entire family groups live. All houses are on stilts, a meter or so off the ground, and the open area underneath is used of storing firewood, bicycles and as a living area for pigs and chickens. The houses are built on stilts to protect them from flooding, insects and wild animals. It also helps to circulate the air around the houses during hot and humid days. The material used for the roofs are leaves, grass or bamboo. The longhouses are very big and long from outside, but belongs always to several families, sometimes even to three or four families up to more than 20 people. The inner area of the longhouses is divided into living compartments for each household. All houses do have windows and doors, but most are open or sometimes shut by bamboo or a cloth. All the households have their own fireplace for cooking or to keep them warm during cold nights. It is not frequent, but during one or two weeks in December or January the cold wind from the northwest makes the temperatures fall to 5 or 10 degrees Celsius. The lack of blankets and warm clothes forces them to sleep beside the fire and sometimes to wake up early and stand around a large bonfire on the village grounds outside the houses. Older children and unmarried teenagers usually sleep together in a designated area. The floors are especially made with open spaces in between for people to spit right into it, a common habit among the Tampuan. These open spaces in the houses made the nights to be very cold and made us shivering and wakening up several times. While we were still lucky by having plenty of blankets and using the mosquito nets to prevent ourselves from the mosquitoes and other insects, but also to keep us warm.

At the time of this research, numerous house-building activities were going on in the village. Some people were building new wooden or bamboo houses, and others were reconstructing their houses. Lots of houses were looking very old and nearly falling apart. But one has to be carefully to judge too quickly, because there is a big difference in carrying a big and tall white person in a house made from bamboo and wood, or to carry a short and tiny Tampuan person. When I was walking over the bamboo floors, the sounds made me sometimes anxious about the possibility of breaking a part of their house. The style of these new wooden houses is more according the Khmer style of houses and that’s also the way Tampuan people view it: ‘We want to have houses like the Khmer people, but they are also
much more expensive'. The main family house has a far wider significance than just being 
the home of the heads of the family group and the base for family activities such as 
communal eating. It is only this nucleus of the family base which is believed to be inhabited 
by house spirits (arak hnam). These are considered to be the guardians of the family group, 
watching over them both in the village and outside it, and providing protection.

5.3.2 Food
Most Tampuan people plant upland rice and have some vegetables and fruit trees in their 
chamkars. During the period of 1950-1960 the first paddy rice fields, as opposed to dry rice, 
were introduced. These paddy fields yielded disappointing results. Some decades later the 
Khmer Rouge was more successful in cultivating wet land rice, because of improved 
irrigation techniques. Some of these fields are still used, but most Tampuan people plant 
upland dry rice, which is their staple diet. Many different varieties of this upland dry rice are 
cultivated. There is only one harvest every year and many times the harvest got lost due to 
flooding, drought, or insects. This means quite often that people do not have enough food 
for the whole family throughout the year. This food shortage differs yearly and also depends 
on the season. This staple diet of rice is regularly supplemented with different other food 
 sources, depending on the season, such as vegetables and fruits. Limited supplements 
locally available food sources are bought from the market, include, salt, packet noodles and 
MSG. Furthermore they eat meat by trying to catch wild life in the forest or fish from the 
rivers. There are a lot of hunting and fishing equipment constructed by men from rattan, 
bamboo, shorea and thnung tree to try to catch these wild life. Shorea is useful for 
aricultural implements such as ploughs, rakes, whilst thnung is used for much of the fishing 
tackle. Hunting and fishing traps are made from bamboo and rattan and can be of 
considerable size and complexity. Traditional hunting weapons such as crossbow with poison 
arrows and fishing gear are increasingly being replaced by factory made products such as 
AK45s and Nylon nets. Traditional gears are however still used and the skills to produce and 
use them are still very much alive (Emerson 1997:26).

There is one rice polishing machine in the village, which is used several times a day. People 
expressed that they were very happy with the rice polishing machine; it saves the women a 
lot of work during the day. At the same time people are also complaining about the noise 
and the price they have to pay. From a nutritional perspective, it is also worrying because 
the impact of the rice polishing machine can be huge: white rice will be eaten instead of 
brown rice, which can lead to vitamin B deficiency problems.
5.3.3 Livestock
In the village there are a lot of animals; chickens, dogs, pigs and piglets. In the morning and evening one can really observe how people take care of their animals. Most care-takers are women, who are very busy every morning to feeding their animals. The women mixed the leftovers from the rice and the vegetable together, add some water and made it into a kind of soup to feed the animals. There are also some villagers owning a few cows, but the cows did not come into the village, but stay in the fields. People do have their cattle for sacrificing, but in general they do not eat these animals and don’t consume the animal products. People do like to eat meat, but it is often only available after/during sacrificing ceremonies or when they were successful in catching wild animals from the forest or through fishing.

5.3.4 Water sources
People from the village get their water from a stream, approximately 350 meters walking from the village. They use the water to wash their clothes, to take a bath, and fill up the kloeks with drinking water. Within the stream, a system of bamboo pipes is constructed to control and filter the flow of water. The village have two wells, but the wells did not work, the wells were too shallow and therefore there was no water in it.

5.3.5 Education
The village has two schools; both are supported by NGO’s, one by CARE and the other school by SEILA⁹. Most women shared that they found it very important to send their children to school and most of the time they leave them behind in the villages with their grandmother, so that the child is able to attend school.

5.4 Village hygiene and sanitation
Cleanliness in the homes varies. One general rule is that shoes are removed before entering the house, but as both adults and children often do not wear shoes then this frequently becomes a redundant measure. The rainy season poses particular problems for ensuring cleanliness, both on a personal and domestic level. The village is often awash with mud and dirt and it is virtually impossible for villagers to stay clean and avoid bringing this dirt into the houses. Although houses are well designed for disposing of waste matter, which can be swept or washed through the gaps in the bamboo slats which form the floors of the houses, during the rainy season storms and strong winds often blow this dried mud back up into the houses.

⁹ SEILA is the governmental organisation which is also called Apiwat, meaning development.
Cooking and eating utensils are always cleaned with water after use, and sometimes using old rice wine husks or charcoal. Utensils are usually stored in an elevated place away from the attention of wandering dogs and chickens.

To use the kloeks to wash their hands is not a daily domestic behaviour. In fact washing hands after eating appears to be more common behaviour. Villagers usually take care to wash at least once a day, and it is not uncommon for people to wash several times a day, depending on their physical activity and their proximity to water sources. Scrub with water using leaves or a scrubbing brush suffices.

People use the bushes outside the village area to defecate and accompany young children to do the same. A long stick is used to clean them. Wandering pigs generally serve as a disposal system so there appears to be little danger of the spread of diseases through direct contact with faeces and bacteria on a daily basis.
PART 4: AN ETHNOGRAPHIC ACCOUNT OF THE TAMPUAN CULTURE OF FOOD

6. General food situation in the village

In this chapter the food availability in Paór village, women’s perceptions of their food variety and the household food distribution within the different families will be described.

6.1 Availability of food

On the question, if there is enough food available throughout the year, nearly all women answered that they do not have enough food to eat. At the same time, while we were asking these questions they were eating rice and vegetables. There seems to be a contradiction and later on during the research, it was discovered that all women made a distinction between rice and food. Rice is not mentioned when they talk about food, rice is something you eat and it is always there, it is just a fact and very normal that you eat rice daily. When women talk about food, they mean meat and that is very special to have and very limited available for most families in Paór village. The following paragraphs present a description of the women perspectives of the availability of rice, vegetables, fruit, meat, concentrators of energy and seasonings.

6.1.1 Rice

The main source of energy food is rice, which is the central or staple crop of the swidden system and in each chamkar total of 3-7 varieties of rice are usually grown (short, medium and long term). Rice seeds are mixed with other seeds such as sesame, cucurbits, legumes and sugarcane. In most cases, the men walk around with a long pole and poke holes in the ground and the women follow and deposit various seeds into the holes. The rice is planted from May to July and harvested from October through December. The amount of rice available to individual families will depend on how much land they have, the quality of land, the number of (male) people available to plant and harvest the rice and the necessity to sell rice if other expenses arise such as house repairs or health care cost both traditional and modern. The availability of rice is especially a big problem for the widows or divorced women, who do not have a man working on their land to plant and harvest rice. Some women were expressing that they have only rice for seven months, others longer and most women, who do have a husband to work on the field, have enough rice throughout the year, although some months they have less than other months. If the women do not have enough
rice available, they limited their meals to two times a day instead of three times a day. In the interviews there was a big difference between the young and old women. Most young women ate three times a day and most older women only two times a day. Older women said that this all depends on somebody, a male person, who takes care for them or not. Especially the months around the planting season and before the harvest are difficult times of the year. The women try to compensate for rice shortages in different ways. They gather roots and tubers in the forest and grow several varieties of potato. Some women said that they do not have enough rice, because their farm is too small. They shared that it has nothing to do with the spirits, only when you do not respect them, it can also destroy you. ‘But sometimes it is also from yourself, you always spend it and you don’t think about your family’.

6.1.2 Vegetables and fruits
Besides the staple food of rice people live also from plants, which they get from their chamkars and gather in the forest. The women expressed that if they go to collect the plants, they have enough vegetables throughout the year. Although there is a big difference in the availability and variation of plants during dry and raining season (see annex 6). During the rainy season there is a large variety of plants in the forest and in the chamkars. Most families live during rainy season on their chamkars, which are in the middle of the forest, therefore it is very easy to obtain vegetables for eating. During the dry season there is much less variety of plants and hardly any on the chamkars, most plants are only found near the streams or ponds and are more difficult to collect. There are no plants cultivated in the village. Forest vegetables are predominantly used for domestic consumption although certain types are sold by a limited number of villages. According to the NTFP study the availability of forest vegetables has not declined in recent years and they are readily available (Emerson 1997: 14).

Fruit is seasonal, except for bananas and the products of banana trees, which seem to grow all year and come in many varieties. The banana trees can provide many sources of food with the flowers and the stems being eaten and the leaves used as plates and packaging for cooked rice on hunting and gathering trips as well as for trips to the chamkar. The trees in the village are owned by individual families and are therefore available only to the owners of the individual trees who sell the products either to other families or in the markets. There seems to be a tolerance of children picking some fruit from trees that do not belong to their family to eat on the spot. Gathering in the forest continues all the year as there are very few foods that villagers conserve in any way except for fish which is often salted and preserved,
fermented fish, or also called *prohock*. Most fruits are ripening in the dry season period during the months of March, April and May. Therefore, fruits can probably play an important role in dietary requirements during dry season as forest fruits are usually collected by women and children in the same fashion as forest vegetables. Forest fruits seem to be abundant and availability does not appear to be a problem whilst demand is for family consumption only. Although most women do not eat fruit as they answered: ‘it seems we do live like monkeys, eating the same, we don’t like to eat vegetables and fruits’. Also when the women or children do eat fruit, they eat the fruits which are green and not ripe, because this is found most tasty.

6.1.3 Meat (= food)
People gather animals, such as wild pig, wild chicken, red muntjack (type of deer) for their sources of meat by buying at the market or hunting in the forest. Most women do not have the money to go to the market to buy meat and also the distances to the markets are very long, at least two hours walking along dirt roads and forest tracks. The women also expressed that hunting is a very difficult job, because nowadays there are limited animals in the forest because many animals died during Pol Pot period and also there are many more people hunting in the forest compared with several years ago while the forest is diminishing because of logging. Small animals (e.g. rats) and insects have to be hunted or trapped and in the case of oysters, snails, shrimps, crabs have to be caught. The quantity of these animals is very small and the meat available limited. Bee larvae are highly nutritious but are only available in the honey-collecting season, which runs from March through May. Women made a distinction between two different types of meat: *Khaicgh*¹⁰ and *Jam*¹¹ meat.

Nearly all families do have domestic animals, such as chickens, pigs, buffalos, near their houses, but all women expressed that they do not regard domestic animals as a source of food as they are only killed for religious purposes during sacrifices ceremonies. Although people do eat the meat after the sacrifices ceremonies, but that’s because of pleasing the spirits and has nothing to do with their daily meals. There is no systematic breeding of animals in the village.

¹⁰ *Khaicgh* meat is from all different kinds of land-water-small animals, such as *kaa* (fish), *kakū* (fish/frog), *pseim/trœel* (bird), *war* (mos), crab, *kras* (grey red squirrel), *Jer* (chicken), duck, and *songko* (small deer).
¹¹ ‘*Jam*’ meat are the land-big animals such as wild pig (*nr 1*), *skai* (pig), elephant, *childdwil/jwaai* (deer) and *kepouz* (buffalo).
Fishing is another option and Paór village which is situated close to a stream people do fish the whole year round. At the same time, commercial fishing using electric shock techniques is taking over and also over-fishing the streams and rivers, causing a shortage of stock for the local people. During the research period, I saw women throwing (natural) poison in the stream to catch the fish. The fish became unconscious from the poison and thereafter it was very easy to catch the fish to eat.

In general, there is meat available, but very limited and difficult to catch or to purchase on the market because of financial reasons. Furthermore, the domestic animals are only eaten during sacrificing ceremonies. Meat is not eaten on an every day basis and some women even expressed that they may eat only meat once a year or if somebody is sick in the family and they have to sacrifice one of their domestic animals.

6.1.4 Concentrators of energy
Concentrators of energy such as fats and oils are not freely available. Oil can only be bought in the market with cash and the animals eaten have little fat. Hardly any women are using concentrators of energy, because they are only available when people do have money to buy them. Coconuts which could provide energy sources, if the milk was extracted, were not done by the villagers.

6.1.5 Seasoning/flavouring
The main seasoning used by the women are MSG, salt, and chillies. MSG was first introduced during Pol Pot times, probably for its powers of enhancing flavour, to compensate for the scarcity of good food available. Nowadays, MSG is used a lot by all women because of its good taste and it makes the food delicious and it is even considered a vital element of a meal (White 1995: 12). When nothing else is available rice is eaten plain accompanied with chillies, salt and MSG. The women buy MSG at the market, O’churoen market, around two hours walking from the village or other markets which are further away. During the research the question arose: ‘what are the affects on the nutritional status of people when they are using half packets MSG every meal they eat’? ‘Does MSG change the food or does it change the people’? According other researches, MSG certainly affects people, although it differs per person (see annex 7). To really get to know more details about the affects of MSG on people’s nutritional status, more specific research should be done.
People also use salt from Vietnam. On the packets there is written that it contains iodine, but research shows that in most packets there is no iodine at all. Women also add chillies or lemongrass to make their food tastier. If people don’t have enough vegetables or meat to eat then most women will eat rice with only MSG, salt, lemongrass and chilli.

As a summary of this paragraph, it is good to mention that there are problems of food availability, but especially with the women who do not have a husband or male care-taker. According to the women, the main lack of food availability is meat. Wild animals are difficult to catch and limited available, while the domestic animals are not used for consumption and are only eaten during sacrificing ceremonies. Hardly any women used concentrators of energy, such as fats and oils, and these are also only available when people do have money to buy it. Most women used seasoning flavour for their food, especially MSG. It seemed the women do have the money to buy MSG abundantly. The effects of MSG on the people are not very clear and more research is needed, especially to find out how MSG influences the nutritional status of people.

6.2 Women’s perception of food variety

In the Western world a good nutritious meal is divided into three or four food groups; energy food, protective food and body building food. In Paór village, the women divide their food in different categories; food which makes you strong and food that does not make you strong. Food groups would appear to be a very foreign concept. The women did express the need of food variety and they are bored of the food they eat: ‘it is always the same, rice and plants, especially during dry season’.

The average daily food pattern of women in Paór village is two or three times rice with vegetables, mainly green vegetables. There is a difference between the younger women and the older women interviewed, total of 70% of the younger women eat three times a day and total of 30% of the older women. The reasons of the younger women were that they don’t have enough food and the older women said that the problem is related to their problem of having no husband or older male person to take care about them. The only meat I saw eaten, during the dry season, were rats, chickens, fish, snakes, ants, but this was not very common and one rat to divide for a family of 12 persons, gives you a very small part meat for each person. I saw children eating sweet potatoes, also called bloody potato, because it is purple inside. The children eat the sweet potatoes as a snack in-between the meals. Other snacks they eat are fruits, especially fruit that is unripe, and if they have money, they also eat sugarcane, noodles, cakes and candies. The women expressed that this kind of food is
very good to eat; it makes you strong and gives you energy. If people do not have any meat or vegetables to eat, they eat rice with MSG, chilli, lemongrass and salt. Nearly all women expressed that they eat the same food both noon and evening.

It seems that forest plants, vegetables, leaves, tubers and jams are very important in the diet of women. Vegetables and leaves provide important sources of proteins and minerals in a diet that contains a little meat. Vegetables provide the main protein and mineral sources in the diets of these women. At the same time this makes it difficult because most women expressed that they are bored by the vegetables and don’t like to eat them: ‘As we are minority people, we don’t have anything to eat beside these vegetables, which we don’t like to eat’. ‘But we eat what ever we have or can collect because if we don’t have or don’t collect, we can’t eat’. Other sources of protein can be beans, but I did not see people growing beans, they expressed that they do not like them, but at the same time I am not sure if they have ever eaten them. Tubers, especially yams and kduoch (a viney tuber) can give villagers an additional source of carbohydrates and are therefore important for food security (Emerson 1997: 12).

As consequences of the fact that the food availability is limited, the variety of daily food eaten is also very limited, especially during the dry season, and the food, such as vegetables and fruits, which is available, is not very much appreciated. The women do not see the value of eating vegetables and fruits and they are bored of them. Fruits are often eaten green, because people do not wait until it is ripe when it contains more vitamins. Other problems are the storage of food and the preserving of food, which is hardly done. Rice, which is stored in the houses at the chamkars are often eaten by rats. The food variety depends also on people’s energy to collect, the family/clan food taboos and religious activities.

6.3 Household food distribution
All women mentioned that they eat together as family and they share whatever they have, but they eat from separated plates. ‘If we stay together in the house, we eat together, but if somebody is not at home, we do not wait’. One woman said that sometimes her husband eats first because he is hungry and she not, than she will eat later. The children eat the same food as the adults, but they eat the food without chillies. It seems that there is an equitable household food distribution system and that they share whatever they have. I did not find any indication of gender discrimination between the calorie intake of women and men in Paår village. At the same time, it is a fact that women are busier with preparing the food and feel more responsible for making the meals than men, while women are sometimes
too tired to eat and therefore the quality and quantity of the food is often not sufficient. This has an impact on the health condition of the women, who already expressed many times during the interviews that they feel very tired and that the food does not provide them adequate energy and strength for them to do the work.

7. Food concepts and customs

The women interviewed divide their food in two different categories; food which make you strong and food which does not make you strong. According to the women, food which makes you strong are the different kinds of meat and food which does not make you strong are the plants, vegetables and fruits (see annex 8). In this chapter the emic view of women about categorising food and how the women look at good or bad food, healthy or unhealthy food for themselves and for their children during pregnancy, delivery and the weaning period will be described. This chapter will also summarise the different cooking styles, ways how mothers cooked their food. At the end of the chapter different customs and habits including smoking and drinking customs will be mentioned.

7.1 Emic view of women about categorising food

It was difficult to talk with women about their concepts of food and the way they categorised their food. They expressed that they just eat everything they have; 'it all depends on what we have' and 'we just get our food from the forest and we eat'. As researcher, I needed to ask the right questions, but therefore I needed to know some basic knowledge about their ideas of the food they eat.

The women do not divide their food into food groups as in the Western world, also they do not make a distinction between hot and cold concepts, but they do make a distinction between food that makes you strong and healthy and food that does not give you any strength and power. The food that makes you strong and healthy are the different kinds of meat and the food that do not give you any strength and power are plants, vegetables and fruit. The meat is healthy, because it is delicious, sweet and tasty. Most vegetables are not healthy, because it has a bad taste and it is not good and sometimes even it makes them sick.
One of the women said during the FGD: ‘It cannot be delicious because it is vegetables’. ‘If you only eat vegetables you do not get any vitamin and it will give you diarrhoea (pro anteroh) too’. ‘We need vitamins because when we work on the chamkar and eat vitamins, we will not get tired, and when we carry the basket it will be not so heavy’. ‘We need sonnum (energy) to work on the chamkars. ‘We need to eat healthy food because we need the power to walk and work’. Other women expressed that ‘If we do not have meat, we still do eat the vegetables, but it is not so delicious’. ‘If we have meat, than we do not want to eat vegetables’ and ‘If we do not have enough meat, then we can mix it with vegetables’.

The women found it very important to have delicious food; ‘if we do not have delicious food then we get fever, dizzy and headache’ and ‘if a person has delicious food to eat, then that person has a good health’. According the women a good and delicious meal contents lots of meat. The women do eat food because it is delicious, make mot (become healthy), ‘if we do not like to eat the food it makes us boring and if we eat food we can work without getting tired’.

Many women compared their food with other nationalities (e.g. Khmer and Lao people) and they think that other people have more delicious food than they have; ‘we as minority people do not have delicious food’. ‘It is every day the same and we do not have enough meat to eat’. ‘It is strange the Khmer people do not have animals, but they have a good meal to eat, we do have animals, but not enough to eat’. ‘Khmer and Lao people do not raise animals, but they have money to buy, we do not have money, therefore we sell the animals’. Other women expressed that delicious food in the body does not make any pain, it makes the body fat (Slong dâh solong paán = food good food delicious), but when the food is not delicious it cause you many problems and vegetables and fruits does not give you any energy. Nearly all women said that vegetables are unhealthy to eat, but they cannot explain the reasons behind their statements. There was only one young woman, who said that vegetables are important to eat too, but she could not explain the reasons either and she also mentioned that she gets bored by eating the same food day after day. The women expressed again and again that they need to eat meat to get enough vitamins and to be healthy and strong.

Beside the regular meals I noticed that they eat snacks in between the meals, such as num rerkeil (candies), ice-cream, cake, noodles, tubers, ants, bees, fruits (banana and mango) and tanseyn (sugarcane). Most women expressed that eating snacks that are sweet are very healthy, because it is delicious and you get energy from it and it will make you big, fat and tall, which is very healthy. ‘Sweet snacks have vitamins and that will make you strong’. Many women expressed that they feel much better after eating sweet snacks and sometimes they
feel at least we have something when we do not have enough food to eat. The women buy the sweet snacks at the market or when Khmer people are coming into their village to sell sweet snacks, such as candies and ice-cream. But at the same it is very expensive to buy sweet snacks and most women do not have the money to buy it, although the seller also allows the women to exchange cooked rice for sweet snacks. Only a few women shared problems regarding candies and sweet things, such as getting a hot body after eating sweet things, bad for your teeth’s, coughing and stomach ache. The women do not make a distinction between necessary and luxurious food, if they have some money they just buy some snacks, because they regard it as good and healthy to eat and will it also fill your stomach.

To summarise the main findings of women categorising their food, I would like to start with the expression of one of the women: 'we eat the same as the monkeys (food from the forest), which is not delicious (ooptań). People compared themselves a lot with other nationalities or people living in other villages, but even with the animals around them. It is clear that they do not have enough food available to receive the energy they feel they need to work and live, but at the same time, they also think that the food they eat is not very delicious and is always the same. Many women said that they are bored with the food, especially the vegetables which are not delicious, not healthy and does not give you any power or strength to work. The women divide their food in two categories, food that give you strength and power (meat) and food that does not give you strength and power (vegetables and fruits), which differ very strongly from the western concepts of food groups. This will be an important point for outsiders to acknowledge in their health and nutritional educations programmes. The women also mentioned that they get sick from vegetables, that they have a bad taste and that they do not contain any vitamins, which is important for them to give them strength and power to work. To increase the nutritional intake, it would be important to make a link between the vegetables, the vitamins, the taste and the strength and power concept. Other issues which need to be looked at are whether there is any relationship between the hygiene aspect of washing and cleaning the vegetables and the complaints women give of getting sick after eating vegetables. There is very clearly a link women made between the food they eat and their own healthy or sick bodies, but more discussion needs to take place with the women if these links are the correct links and what are the causes of the consequences of the action taken.
7.2 Cooking styles

The Tampuan women do have many different ways to cook their food. In the interviews the women mentioned 14 different cooking styles (see annex 9), whereby some cooking styles were mentioned very often, such as Sa Ort, Ong Tae and Brong, while other styles were only named by the older women. Some cooking styles are very similar to each other. At the same time it was very difficult to get the details of the different cooking styles, some of the young women do only use a few different styles and some of the older women found it difficult to explain by words. It is so normal for them to cook, it is a daily activity and to describe these in words is hard. Below a conversation with one of the women, to explain about the complexity of understanding the different cooking styles as an outsider.

<table>
<thead>
<tr>
<th>How do you cook ‘Om pun’?</th>
</tr>
</thead>
<tbody>
<tr>
<td>It is delicious because we put chilli, salt and MSG into it</td>
</tr>
<tr>
<td>How do you make it?</td>
</tr>
<tr>
<td>After it is cooked, we can eat it</td>
</tr>
<tr>
<td>No, I would like to know how do you cook ‘Om Pun’?</td>
</tr>
<tr>
<td>We want to eat ‘Om Pun’.</td>
</tr>
<tr>
<td>What do you do to get ‘Om Pun’?</td>
</tr>
<tr>
<td>Chop the fish put chilli, salt and MSG into it.</td>
</tr>
<tr>
<td>What kind of fish do you use to make ‘Om Pun’?</td>
</tr>
<tr>
<td>‘Sam On Yam’</td>
</tr>
</tbody>
</table>

The main question remains: ‘Are there cooking styles, which reduce the nutritious value of the food? It is also a question which is difficult to answer from just doing the interviews with the women alone, but experience from other countries indicates that it is very likely. Therefore, I tried to observe the different cooking styles of the women in Paör village. I noticed during the observation several things, which are stated below, and came into the conclusion that the nutritious value of food is influenced by the different cooking styles of women:

1. Many of the different cooking styles are rarely used, because of the limitation of ingredients, especially meat.
2. Most vegetables are cooked for a very long time, sometimes hours, which can reduce the nutritious value of food enormously and also the taste of food.
3. Hygiene issue. Many women were mentioned that they feel sick after eating vegetables, it is difficult to make final conclusions about this, just based on this research, but unhygienic conditions and using dirty water during cooking can play a very important role with respect to the health condition of people, which can influence the malnutrition rate.
7.3 Children en Food
The women do have different customs and habits during the period they breastfeed or wean their children. The women are very clear in what they believe is good or bad food for their children during the different phases in life.

7.3.1 Breastfeeding
There is not really a difference between the habits of young and older women regarding breastfeeding their children. Nearly all women wait for awhile to breastfeed their children; these vary from 1 night to 5 or even one woman 6 nights after birth. There were two older women who expressed that they started straight away after birth, because they wanted the baby to be big and beautiful and not to allow the baby to get any bad food. The other women shared that they wait until the breasts will produce milk and sometimes that takes 2 nights, but sometimes much longer. The problem is often teek tak olaid, which means there is just no milk coming out. The women gave different reasons why the milk does not come earlier: the women eat only rice, which is not delicious, the baby cannot suck, the first breastmilk is not so good for the child and we just do not have good food to eat. Many women expressed their ideas as mentioned below:

- 'I do not know why my breast does not produce enough milk, probably because my health is not good like the others'.
- 'I want my breasts to produce lots of milk, but they cannot, I am so frustrated'.
- 'I pity my children a lot, look at my child, he is now 12 months, but he does not grow up and cannot walk'.

Most women do not give anything to the child before they start to breastfeed their children. Although some women do give water with a spoon and two younger women gave water mixed with sugar to the child. One of the older women expressed that even when the baby cries, she just lets him cry and does not give anything until the breasts will start to produce milk. There were two younger women who told us that they gave water to the baby along with the breast milk, because the baby is thirsty. The women do not even try to check whether the breasts produce milk, they just wait until it happens and then they can start to breast the baby. The women start very late, but at the same time they continue a long time, some women even up to 4 years, but most women until two years or if another child is coming.
The main issues regarding breastfeeding are that women wait far too long to start breastfeeding their child, sometimes even more than 5 days. All women wait until the breast will produce milk by itself. There did not appear to be awareness about the fact that it is also possible to encourage the baby to suck directly after birth, and that this also has a positive effect on the delivery of the placenta. Another problem is that some of the mothers give the child extra water and sometimes even mixed with sugar, which can decrease the hunger feelings of the child and therefore even more difficult to suck the breastmilk, which contains lots of vitamins for the baby and is not available in sugar water. The positive result is that most mothers continue breastfeeding for a long time after they start. Also in this aspect women make a link between the food they eat and the availability of breastmilk for the baby. The biggest problem according the mothers is that they do not have enough good food to eat and if they eat, they eat only rice.

7.3.2 Weaning food
There was not so much difference between the times of starting weaning food when comparing the practice of the older and younger women. The time they start with weaning food varied from one month to more than one year. More than 50% of the younger and older women were mentioning that they start with weaning food when the child is around one year and can sit, have some teethes, or can swallow or can walk a little bit. Some women mentioned that they start earlier because the breast milk is not enough. ‘It also depends on the child, when he/she start vomiting when he/she start to eat food, than you stop again’ and ‘when the baby has fever, he/she can’t eat any food either’.

Nearly all younger and older women give the same food to their children that they eat themselves. Although half of them mentioned that they give it without chillies, because that is too hot for the babies, but they do not take any steps to make the food more appropriate for small children, like mashing or making it soft. Only a few women gave seoot food to their children whereby they put the food in the water to boil and make it soft or use the prong cooking style (see annex 8). Some of the women expressed that they chew (maan) the food or grind it before they gave it to the children, or mixed it with extra water. One of the older women said that she gave the baby only rice, no meat, because if the baby will eat meat it will get worms and get sick. There was only one of the older women who shared that she always gives the baby first and if we have a lot than the adults eat too. Another woman said that they cannot give any vegetables to her children because the baby does not have teeth yet, but she does give the water from the vegetables to the child to drink. Most women
expressed that it all depends on what they have: ‘if we have a lot, we can share a lot, but if we do not have, then there is also not so much food to share with the children’.

Around 50% of the older women interviewed said that they only give the child food, if the baby cry’s. If the baby does not cry, than he/she is not hungry and do not need any food. There were also a few younger women expressing the same kind of thoughts and only giving the child food if he/she asks for it. As well as the older and younger women said that they feed the child two or three times a day, only one older women gave her child 5 times and one 4 times a day. Besides the food given by the mothers, the children eat snacks in-between, such as fruits, ants or cakes. Especially when they go with their parents to their farms and when they are walking through the forest, they pick up some fruits by themselves and eat it.

The women start very early or very late with weaning food, both of which are a problem. When they start the introduction of weaning food, most women give the food they eat directly to their children, only without chillies. There are just a few women who mash or boil the food especially for their children, one of the results is that children get nausea and vomited often. Another problem is that most women only give their child food when the child cries or asks for it. Therefore it is easy to see that if the child is already apathetic, sick or malnourished, it will be very hard to recover since the child will not demand food. Young children need to grow a lot and need more meals a day than adults, nevertheless, most women do give the children only two to three times a day a meal, although children do eat snacks in between, which some of them have great nutritional value, such as fruits and ants and others can increase the problem, such as cakes and sugarcane.

7.4 Smoking and drinking customs
Smoking behaviour even in very small children is very common and socially wide-spread among the population. Women can carry pipes in their mouths everywhere they go but most of them only smoke socially. While smoking, it is common for the people to spit a lot and this can be seen as a form of socializing too. Spitting consists in pushing the saliva with the tongue and to let it fall. If the behaviour takes place inside the house, they are very careful that the saliva falls down to the ground floor through one of the small spaces between the bamboo sticks. This behaviour is completely silent and often is made in a social group and between other social behaviours such as talking, looking at the other and laughing. One of the women interviewed mentioned that there are probably only 4-5 women who don’t smoke in the village.
Most women were expressing that it is just a habit which they cannot stop. The older women do smoke more often than the younger women, but they all expressed that it is very hard not to smoke. The message in the village is: 'if you do not smoke as a man, you are not a real man, if you do not smoke as a woman you are not a real woman’. Some of the younger women interviewed shared that they just quit smoking recently, because it gave them a headache and they do not feel good while they are smoking. 'But it is very difficult to stop because all villagers smoke and you just have to follow'. 'All older women do smoke, and the mothers teach their children to smoke, if you smoke it makes you feel good'. Although one of the older women expressed that if you smoke, your study at school will be bad, you cannot remember anymore, but at the same time she said that people do not believe her. Smoking is a social activity for everybody and if you will be a part of the group, you do have to smoke.

It is a very common custom for Tampuan to drink rice wine as one of the social activities, such as during ceremonies and sacrificing for the spirits people. Most people make the rice wine by themselves and for one big jar, they need at least 4-5 kg of rice and for a small jar, they need 2-3 kg of rice. A jar is a stone pot used to make the rice wine and at the end people will also drink it from this pot. Nearly all families do have these kinds of jars in their homes. Total of 50% of the women interviewed do not drink wine, they do not like to drink wine and one of the women expressed that she hates people drinking wine, but there was only one of the older women who said not to drink wine, because she does not like it, only she said that she has to drink during ceremonies, sacrificing or parties, out of respect for others. 'When people ask me to drink with them, I just taste it, to avoid other people to get angry'. All women expressed if they are pregnant they do not drink wine, because they are afraid that the baby will get problems, the mother gets bleeding and that the baby get drunk too. Some women do not drink wine while giving breastfeeding, but most women, who do like to drink, drink wine when they are breastfeeding to their children.

Smoking and drinking is for nearly all women a social activity and very difficult not to follow, because then you are not one of the group. Most mothers teach their children very young how to smoke and drink, which have also effects on the health condition and development of the young children. Beside that it is also seen, if people do make a lot of rice wine, it will cost them a lot of rice too, which they can not use for regular meals, especially for the families which already do not have enough rice available throughout the year.
8. Food Taboos and Restrictions

In this chapter the different food taboos in the different phases of life, such as during daily life, pregnancy and delivery, and the consequences of these food taboos on women’s daily food patterns, will be described. Several stories behind these food taboos will be mentioned.

8.1 General food taboos and restrictions

There are many stories around food taboos, but it all depend on the pong people belong too. Most people feel that it is good to have taboos, because that’s the only reason why they are still alive until now: ‘If we do not have food taboos, we are afraid that something will go wrong, such as a sickness and then you cannot treat it and then people will die immediately’. ‘If your pong does have a food taboo, but you will not follow those restrictions and just eat the food, you will get sick and skinny, you will never have a good health if we will not listen to the food taboos’. It is just very important to listen to others, it is like pasaip, which means if somebody says to you do not touch something, and you still do, you will die. Most people are in agreement with the food taboos and accept the food taboos as a part of their life. Approximately 50% of the women, as well as young and old do have food taboos. Some women claimed that there are no real food taboos, but that there had been food taboos in the past but nowadays people no longer keep them unless something bad happened in the village, or it was forbidden by the Arak during an illness episode. The people rationalised the forbidden foods by saying they caused illnesses.

There is hardly any difference between the food taboos of younger and older women, but there is a difference about the explanation of the reasons behind the different food taboos. Older women could explain very clearly why their pong followed food taboos, while younger women said that they just follow the traditions/customs from generation to generation. Older women mentioned more different kinds of food taboos, than the younger women of the village. But at the same time it seems that the women in the village would be alright, if necessary, to abandon old customs as long as they experienced no ill effects that could be attributed to the food consumed. However if a family has had a bad experience with a particular food, they are highly likely to forbid its consumption within their own family. There was one of the younger women who expressed that she did not follow the food taboos anymore, because of taking medicines and another woman got advice from the government clinic that it would be better if she stopped following the food taboos.
There are many different food taboos within the different *pons* and families of the villages, below one of the food taboos stories are mentioned and other food taboos are written in annex 10. The food taboos story below is about the *Raya*, which is related to the division of *pons* a long time ago (paragraph 4.3).

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**Ra Raya (crocodile)**

There were different versions about the *Ra Raya* food taboo story, but nearly all the same at the end. The village where the people were living was not a good village, because there were always problems with sickness, so that they decided to move the village to another place. But there was one problem of moving the village because one of the old grandmothers could not walk to move easily. The question was raised how to help the old grandmother to move to the other place? At the end the villagers decided to leave her behind and first to make the new place ready. So that grandmother could come later and the villagers decided to pick her up later on. When the villagers came back to pick up the old grandmother, they could not find her anymore. While the villagers were walking around the place, the dogs started to barge and they met a *Raya*. The dogs got very upset about this Raya and finally the dogs killed the *Raya*. After the *Raya* was killed they fried the *Raya* on the fire; some people took out the stomach of the *Raya* and while they were cutting the *Raya* they saw the mats and blankets of the old grandmother in the stomach of the *Raya*. Suddenly they realised that the *Raya* had eaten their grandmother and they decided never to eat a *Raya* anymore: ‘If you do eat a *Raya* you become sick, swollen, teeth ache and muscle ache’. The taboo of the *Raya* is an old taboo from a long time ago: ‘If you get sick because of eating *Raya*, than you have to sacrifice a pig, so that you will get better again’. If you do not sacrifice a pig, you will never get better anymore. There were also women sharing that when the villagers came back to pick up the old grandmother that they only saw broken mats, broken pots and a *Raya*. Because the villagers did not see the old woman, they thought she became that water lizard. Since that time, they never eat a *Raya* anymore till now. Other stories were related to women who shared that because of our ancestors, who were born as a *Raya*, we do not eat *Raya’s* anymore or that if somebody eat a *Raya*, those people will born as a *Raya* for their next lives.

There are also some food taboos about mixing food. It is allowed to mix the meat with vegetables, but you cannot mix different meat with each other. The women shared that you never can mix fish with beef or pork, crab or bird. ‘*If you eat chicken, it is chicken, if it is pig, it is pig*’. ‘*If you do mix the food with each other you will make the spirit of the sky angry and you will get lightening and thunder from the sky*’. ‘*When somebody is sick, you can also not mix the food, if you do so, it is very dangerous*’.
8.2 Food taboos during pregnancy

Pregnancy is a time of major fear for women all over the world. Equally widespread are observation of rituals and the development of ‘old wives tales’ about what should be done and not be done during pregnancy. The women from the village mentioned many different stories around pregnancies and food taboos that they have to follow especially during the first pregnancy. Women shared that they are very much afraid that something will go wrong and it is also a fact that there is a high child morbidity rate so there is good reason for their fear. Many children die during the first year of life. It was also noticed that many younger women felt very unsure about their pregnancy and what will be good to do or not, some of them got advice from older women.

There was a difference between the younger and older women interviewed. Obviously older women followed more different kinds of food taboos during their pregnancies than younger women. Total of 70% of the older women mentioned different food taboos, while only 30% of the younger women mentioned this and others said that they do not have any food taboos.

There are many food taboos, especially during the 1ste pregnancy, such as papaya, jackfruit, mango, orange and pineapple. You are not allowed to eat these fruit when it is ripe during your first pregnancy, because of tepol. The women where to shy to explain this, but at the end they said, ‘you will get a difficult delivery and your baby will drop down from the body’. It was also mentioned that the women cannot eat sticky things such as eggs, eggplant, coconut, ripe chilli, birds, animals from traps, pork, chicken and vegetables, because they are afraid of trauws which means sickness. ‘Sometimes the sickness is bleeding or it will be very difficult to breastfeed your children, because you do not have any milk’. ‘It is also possible that you will get a very difficult delivery and that it will take a long time to deliver your baby’. The older women tried to explain the reasons behind these food taboos, but the younger women found it very difficult to explain, sometimes they just did not know why they cannot eat certain food, it is just a custom, but sometimes they also feel to shy to explain. All these food taboos, especially during the first pregnancy make it very difficult for women to eat anything, except rice and salt. This has obvious negative consequences because women need more food and good food especially during this phase of life. Nearly all women mentioned that these food taboos are only during the first pregnancies and they don’t have to follow the taboos anymore during other pregnancies.

The silent emergency: ‘You are what you eat!’
8.3 Food taboos after delivery

There are lots of restrictions regarding food during the time immediately following the delivery. After delivery the older women mentioned more food taboos than the younger women, although younger women mentioned more food taboos after delivery than during pregnancy. Total of 50% of the younger women do have food taboos after delivery, while 80% of the older women followed the food taboos.

In general as well as the older and younger women mentioned that the first day after delivery they can only eat rice and salt. The second day they can start to eat some meat from small animals, such as fish, squirrels, and rats. Than after one month you can start to eat vegetables and fruit again. Although there were also many women who shared that they have to keep the food taboos for one or even two or three months, so that they eat rice and salt only for one month or even longer. Some of the younger women mentioned that they can stop with the food taboos when they can walk again after delivery and when they have enough power, which take usually 3 to 4 months. *If you start earlier to eat other food, you will get sick, vomiting, bleeding, headache, swollen body, stomach ache, back ache, diarrhoea and loss of energy*.

To summarise this chapter it is seen that food taboos and restrictions are a part of people’s life and they rationalise these by the fact that otherwise they get a problem or get sick. The women do have many stories and explanations behind these food taboos. In general, it appears that most food taboos and restrictions do not have any negative effect on people’s health and well being. But this is different when we talk about women while they are pregnant or after the delivery of a baby. There are many food restrictions, especially during the first pregnancy and after the delivery of a baby sometimes even up to four months. During these phases of life, women are hardly allowed to eat anything except rice and salt, while this is a time when women even need more nutritious food for their bodies and for their babies to grow, but because of all these food taboos and restrictions, they get less than they usually would have. It is also seen that there is a high child morbidity rate, especially of children before they reach the first year. Some of the women expressed that half of their pregnancies end up with a miscarriage or the baby died shortly after birth. There seems to be a changing difference between the older and younger women, whereby younger women do not respect the food taboos and restrictions that strongly as the older women. Although all of them are very afraid if they do not follow these food taboos and restrictions that they will have a very difficult delivery or that they will die.
9. Relationship between food and being healthy and beautiful

The women shared a lot about their ideas of the importance of food and what they think is good or bad food to eat. The women shared that they need to eat food to grow up and they give food to their children to make them fat and strong. They also need food for having energy to work on the farm and they do not want to die. In this chapter the perspectives of women about the different concepts, such as health, unhealthy and being beautiful will be described. The emic view of women how they see the relationship between food and their own body will be mentioned. At the end of this chapter the way how women look to nutritional problems in Paór village will be described.

9.1 Concepts of health and unhealthy
The women interviewed shared many different ideas about their concepts of health and unhealthy. The main concepts and ideas can be divided into three categories:

1. The absence of something women need or not need in their lives. The women said that health is the absence of sickness, absence of problems in their bodies, not skinny, no germs in their body and without fever. Unhealthy is not having enough (delicious) food, not possible to find food, not possible to catch fish, shoot a pig or deer, no idea to find food, no money to buy medicines, no energy, not strong enough and no husband.

2. Owning possessions. The women shared that health is when they can buy a lot of food and have enough delicious food to eat, having meat to eat, good clothes, enough medicines, have a good husband who knows how to work on the farm, have children and looking very well after the children, have a good family in law for the children, possibility to make a farm and work everyday, possibility for children to go to school, and live a happily life. Unhealthy is when you have only vegetables to eat, when you have too many children to look after and when your children are always sick.

3. People’s own condition. Health is when you eat and sleep enough, when you are fat, big and strong and when you can work without getting tired. Unhealthy is when you have often sickness, such as diarrhoea, fever and skin problems, your body is skinny because of germs in your body, you are not strong and too weak and tired to do your work.
One of the difficulties in talking about health and unhealthy is the different concepts about health and unhealthy between the researcher and the women interviewed. For example it was very obvious that some of the children were very sick, big belly (worms), pale, skinny, slow in activities, but still the mother was very sure that her child was very healthy and does not have any problems. It seems that it is something which women get used too, there were many skinny children in the village with big bellies, or children who were two years old and still cannot walk, and the women do not regard this as unhealthy, but as a part of their life. Maybe there can also be a point of that women will feel ashamed to share about the condition of their children. This did not become very clear to me, but could be one of the reasons.

9.2 Concepts of being beautiful

The women found it very difficult to share about themselves if they are beautiful or not. There was lots of laughing around these questions and some women found it too difficult to answer or they were to shy and just said I do not know. During the FGD, it seemed easier for the women to talk with each other about this subject and they were talking a lot what it meant for them to be beautiful. In general the women said that they are beautiful when they are fat, tall, red/white face, very wide, good uterus and good baby, being young and full of blood, being single and the possibility to go anywhere you want, high knowledge, dressed up, using make-up, keeping long hair, wearing nice clothes and jewellery, enough money, gold, easier living lives, and when they do have a job for an organisation or at another place, so that they can earn money and do not have to work on the farm. For the husband it is important to be fat, tall, handsome, clever, smart, not lazy, good heart, doing lots of work, hard working person, who can make baskets, building houses and hunting animals. For the children is it important to be big, tall, healthy, handsome and having possibilities to study to get a job like others to earn money in the future.

Reasons why women cannot find themselves beautiful are:

1. You cannot be beautiful because of your parents who are also not beautiful and therefore your children cannot be beautiful because of yourselves. You become beautiful or not because of your parents: ‘Everybody wants to be beautiful, nobody wants to be ugly, black or short, but do we have a choice?’ ‘I really like my children to be beautiful, but this is just not possible, because I am not be beautiful, how can they ever be beautiful?’
2. Women cannot be beautiful, because of their black skin, working hard in the sun and on the farm, no jewellery, poor, no gold, many mosquito bites on their skin, too short, too skinny, not enough good food to eat, married too early, low knowledge and no good clothes to wear.

3. Most women compared themselves many times in different ways with other tribes and nationalities: 'Other people can be beautiful, but we are minority people who do not have good food to eat and do not have a good place to sleep, how can we be beautiful?'

4. You cannot say from yourself that you are beautiful, only others can tell and praise you the way you look.

5. 'If you are young, you can be beautiful, but if you are old, you never will be beautiful'. 'Maybe we can be beautiful compared to farmer’s people, but for sure not compared with the city people, who have nice clothes and jewels to wear'.

6. It is from God and He made us like that and we cannot do anything about that, some are short and some are tall, some are beautiful and others not. The women also assured that they will get smaller and smaller until they will disappear from the earth.

But there was also a women who said; 'beautiful or ugly, it does not matter for me, my children are my children and I am not suppose to discriminate them on the way how they look and even if I want to be big and tall to look beautiful, it is not to me to decide'. 'God decide how I look like, it all depends on God and I cannot decide anything'.

9.3 Relationship between food and their body
Talking with the women about food gave a clear picture of the link they make between food and their own body. The women saw the importance of food for their bodies to grow up, become fat, and to feel healthy, so that they can do their daily work and taking care of the children. The women made many relationships between the food they eat and their body.

9.3.1 Food and being healthy or unhealthy
Food contributes to make the body healthy, but the women expressed that if you have to work too hard it is not so healthy. 'Even if you eat delicious food, but you have to work too hard and sleep not so much, than it is not healthy either'. 'In general, after you eat good food your body will be nice and you feel good, when you eat delicious food that will make everybody to be fat and healthy'. It is very important for people to have enough good and delicious food which means enough meat to eat to become healthy and to have enough energy to work on the farm. Most women want to be fat and big, so that they have the
energy and power to do their work. Now they feel that it is very difficult to go anywhere, they cannot work, because they do not have the energy to work because they do not have enough good and delicious food. The problem is that most families do not have enough good and delicious food because they do not have the money to buy it on the market, they do not have the energy to catch it in the forest or some of the older women do not have a husband to provide food. Most women stated that food can protect their body and healthy food makes them fat and strong which make them very healthy. At the same time the women mentioned also that wrong food and not delicious food can make them sick.

The women mentioned the relationship between sickness and food in the following ways:

1. Sickness comes from eating vegetables; small children get it from their mothers, because the mother eats vegetables and the child get sick and die because the child will receive it from the mother through the breast milk. The women do not like to eat vegetables because they do not give you any strength and are said to be unhealthy to eat.

2. Sickness is cause by eating something wrong which contains germs.

3. Diarrhoea is caused by eating unclean food: ‘The white blood cells will eat the red blood cells and when I eat something wrong my baby will get diarrhoea too’.

4. The women made also a connection between people who are sick and the food they can or cannot eat. ‘If you are sick you do not want to eat, but if you are a little bit hot, you can eat, but if you are real hot, you cannot give any food to the person to eat’.

5. The person who is sick cannot eat any meat of the animal that is sacrificed for the sick person, only the people who sacrificed can eat the meat’.

9.3.2 Food and being beautiful

There are lots of similarities between a healthy body and being beautiful, if you are fat and tall you are healthy, but you also will be beautiful. Nevertheless there are also differences. The women expressed that children become beautiful because of their parents and because of God. ‘If you are not beautiful, then you can never change your life to become beautiful’.

All women mentioned about being tall and fat as a part of being beautiful, but none of them mentioned directly about the influence of food in relationship of being beautiful. Only when you talk about being beautiful because of being fat, women shared that people can become fat because of eating good and delicious food. There seems an antithesis in their answers when the women talk about being beautiful and being fat. ‘Being beautiful is just a fact,
while being fat can develop because of the good and delicious food you eat’. ‘When you are fat, you are beautiful’. Certainly, indirectly there is a link between the food people eat and being beautiful, but the women do not mention this link and see being beautiful more as a fact that is there or not given by your parents or God.

9.4 Nutritional problems

To talk with women about nutritional problems, the same problem arise as talking about what is healthy or unhealthy, based on the different concepts of the women themselves and the researcher. The concept of malnutrition or nutritional problems is an etic concept and very difficult for the mothers to understand. When you talk directly about food with the women, then they have a lot to share, but when you try to talk about malnutrition or under-nutrition, even when you explain in your own words, they found it very difficult to understand. Nevertheless some women said that there are children in the village who are fat and there are children in the village who are skinny. The women expressed that the ones who are skinny are that way because they do not have enough and good food to eat, because of sickness and because of eating vegetables. But other women shared that their children do not have any problems and are not skinny, while they were according to my own observation, malnourished or did have problems with worms in their bellies. One child who was over one year and in our eyes stunted, but the mother told us that the child was healthy and there was no need to feed the child something else than breastmilk. There were also many women who said that they do not have any idea about the health of the children in the villages; ‘that’s family business and we do not look at that, we look only at our own children and cannot care for the children of others’: The women who did understand the questions said that they can see if children have nutritional problems; their indicators included being skinny, tired, no strength, eat just a little and have many diseases.

To summarise this chapter, I discovered that the women of Paór village do have their own concepts of what they think is healthy, unhealthy, being beautiful or their ideas about nutritional problems in the village. Their understandings of these concepts however, differ widely from Western concepts. For instance, we as outsiders think being fat is often not healthy and not beautiful, but this is totally the other way around from the women in Paór village. Furthermore, I saw many children in Paór village, which are according my own concepts unhealthy, sick and malnourished, while their mothers were saying that these children were healthy. It seems it is just something they got used too and is a part of their life, they cannot compare with others and all the children in the village look the same, maybe only a few exceptions they made for children who were very skinny. Maybe they are
also ashamed about their condition, but this did not become very clear to me. I think it will be very important not to stress these differences in concepts and to focus on the problems, but to start from their point of few and use the children who are healthy and acting well as an example (theory of positive deviance\textsuperscript{12}).

The Tampuan mothers interviewed demonstrated a much different perspective on beauty than is normative in the west. They believe that beauty is essentially inherited and there is nothing that can be done to enhance it. At the same time, the mothers do make a link between the food they eat and their own health. They also mentioned that the food protects their bodies and that wrong food (germs and unclean food) can cause sickness. The women think that vegetables are a part of their wrong food, which caused them many problems in their bodies. It will be good to do more research about these vegetables and the problems which cause the sickness and if they are related to the vegetables themselves or the way the vegetables are treated. The way women ideas about being healthy and being beautiful and its relationship with the intake of food will be very important concepts to use during any health education sessions about food issues.

\textsuperscript{12} The theory of amplifying the positive deviance is founded by Sternin when he arrived the first time in Vietnam. In every community, organisation, or social group, there are individuals whose exceptional behaviours or practices enable them to get better results than their neighbours with the exact same resources. Without realising it, these ‘positive deviants’ have discovered the path to success for the entire group, that is, if their secrets can be analysed, isolated and then shared with the rest of the group.
PART 5: REFLECTIONS AND RECOMMENDATIONS

10. Reflections on theoretical perspectives and other researches

This research is based on the theoretical model of Jerome, Kandel and Pelto (Goodman, Dufour, Pelto 2002:2); ecological model based on a bio cultural perspective with taking social and cultural factors into account. Therefore, in this chapter I would go into some of the concepts of the ecological model and will describe some of my own reflections of this model and at the end the value of the model while applying it during the research.

10.1 The ecological model
Jerome, Kandel, and Pelto published in 1980 an essay on nutritional anthropology in which they presented an ecological model of food and nutrition. This model identifies the main social and environmental sectors in a holistic analysis of the factors that affect the nutrition of a population. An ecological model is a model which integrates biological, psychological, social, cultural and economic factors. See figure 1 for this ecological model (Goodman, Dufour, Pelto 2000: 2).

![Ecological Model Diagram]

- Figure 1: an ecological model for food and nutrition –
Jerome and colleagues (1980:15) define the sectors in the model as follows:

- The physical environment includes climate, water resources, soil characteristics, naturally occurring flora and fauna, and other features that establish the conditions for food procurement and production.
- The social environment refers to the larger, external environment (other societies, regions, and communities) whose food production and distribution behavior can have profound effects on the society or social group in question.
- Social organisation encompasses a large set of social institutions and arrangements, from the structure and organisation of the household (family structure) to the political and economic structures that relate to the production, distribution, division of labor, and consumption of food.
- Technology includes the entire range of tools and techniques that are utilized for production, distribution, acquisition, storage, and preparation of food.
- Culture (idea systems, ideology) refers to ideas and concepts related to food, such as food preferences, and restrictions, the use of food in social interactions, religious beliefs involving food, and ideas about food and health.

The arrows in the diagram are intended to indicate the dynamic, interactive nature of the model. Only some of the interrelationships are shown because the diagram would be difficult to decipher if all the sectors were connected to each other with two-way arrows. In theory, however, there are multiple ways in which these sectors are linked, and changes and developments in each affect all of the others. This is also called the principle of 'interconnectedness', no sector in the ecological model is unaffected by a major change in one of the other sectors.

10.1.1 Reflections on the ecological model

Based on this ecological model described by Jerome and his colleagues, I want to make a few remarks. The model does not mention about the cognitive and symbolic aspects of the culture, which is very important if we discuss about the culture of food and its affect on malnutrition. Another aspect which I would like to add is the interaction between care-giver and his/her children. This interaction could be fit into social environment or social organisation, although Jerome explains in his article that both aspects are much more focused on the larger external environment and its structures and not so much on interactions between people. Probably it is even better to connect the interaction between care-giver and his/her children to the culture and idea systems. During the research, I
planned to observe the interaction between care-giver and his/her children, but discovered that this is very complex and difficult to do in a short period of time. Therefore, I still tried to observe some parts, but it was too difficult to acknowledge any ideas about any impact on these relationships and the high malnutrition rate amongst children. It would be probably very interesting to discover, but much longer research time is needed and it would be also very important to understand the local language and customs.

Furthermore, it was not possible and it would be far beyond the scope of this research and its objectives to use the ecological model with all the different aspects within a holistic approach. The full model can only be used if the research period is much longer than six weeks. Still, it was possible to use some aspects of this model, namely social organisation and culture systems. During the research I did discover that I went also into other aspects, such as the physical environment, social environment, economic issues and technology. It became clear to me, that all these aspects are strongly linked within people’s life and cannot be separated as it is describe in this model. This is also the weakness of every model that somebody want to use, that he/she forgets about the ‘interconnectedness’ of all the different aspects of life.

10.1.2 Value of the ecological model
The use of this model is of great value, especially during the problem analysis phase of the research. To use the model as a problem analysis technique was of great help to discover many problems, which are connected to the main problem of malnutrition, but also to discover many causes of the problem (see annex 11). It can be also a great participatory technique to discuss the problems with the people themselves, whereby people can be strongly involved to discover their own problems and to use this as a start to search for their own solutions. Also to have a broader picture of the problem, it is easier to select or prioritise the issues you want to tackle and the ones which are already done or still needed to be done in the future. I did use the model as a tool to describe and formalise the objectives and research questions of this research, and it provided a useful framework for data analysis.

10.1.3 Adaptation of the ecological model
It is always important to adapt a model to its environment and to be creative in this adaptation. Many aspects of this model can be used, but it all depends on the people, their circumstances, background and the scope of the research, but also the background and knowledge of the researcher themselves. I did adapt the model especially because of the
small scope of the research. I also wanted to focus on the cultural systems because of the knowledge that hardly any research is done in this area compared with other areas. It is important to adapt the model to your research objectives and situation.

10.2 Reflections on other researches
As mentioned in the beginning of this report, a lot of research has already been done about the problem of malnutrition amongst children in Ratanakiri. Most research was very much based on the bio-medical approach and only some included cultural beliefs and customs. It is my own conclusion that implementing research solely from a bio medical perspective will never break the downward spiral of malnutrition. In any research regarding nutrition, it would be very important to include the following aspects: people’s world view, cultural customs and habits, the social interaction between care-giver and her/his children and the economic situation of the people. As Douglas (1984) mentioned it would be important to take into account the individual social and cultural environment and as Sen mentioned: ‘starvation is the characteristic of some people not having enough food to eat and not the characteristic of there being not enough food to eat’ (Boykoff 2003). He expressed that famine cannot be explained by a simple relation between food supply and population, but that it is related to the working of the economic system in allocating the ability of people to acquire goods.

As mentioned in the Ratanakiri Health Survey (2002), cultural beliefs and food taboos restrict infant and child feeding diet options. Beliefs and practices about breastfeeding are another problem that negatively impacts child health after birth. Still another problem is the food taboos related to the diet of the mother during pregnancy and immediately after delivery. And the food patterns of children are also a problem, which is not only based on cultural beliefs and habits. It is also not that simple, as Dettwyler (1994) write about the problem of ignorance and inappropriate cultural beliefs and practices to solve these problems with giving education. At the same time, I recognise strongly what Dettwyler write about the fact that people do not recognise the problem, simply because people get use to the way children look, normal is what you are used too. I can only conclude that all these theories have something in it, but it is just a part of the whole picture, which gave very strong limitation to really solve the problem about the high rate of malnutrition in Ratanakiri. When one will really tackle this problem, one has to use the broader perspectives, such as the ecological model.
11. Discussions and recommendations

In this chapter I would like to discuss the major findings of this exploratory, descriptive and qualitative study to discover the emic views of the mothers about their culture of food and its impact on their lives, which may influence the nutritional status of the mothers and their young children. The first part will discuss the major findings and the second part, based on the findings, will give recommendations to NGO’s and local authorities who might want to address the malnutrition problem amongst women and children in rural areas of Ratanakiri province, Cambodia.

11.1 Major findings and discussions

11.1.1 The Tampuan concept of a healthy well nourished body

The major findings which we discovered related to the concept of a healthy well nourished body were the following subjects: women’s concepts of health/unhealthy and being beautiful. According to the women interviewed, somebody is healthy when he/she is fat, tall, can work without getting tired and does not have any illness. Someone is beautiful when he/she is tall and fat too, but at the same time they explained that you can be healthy even if your parents are not healthy, but you can never be beautiful if your parents are not beautiful. Being healthy is something that is possible to have some control over, although also difficult, but you can influence your health by the food you eat and the way you live. This is in contrast to being beautiful which is just a fact given by God and your parents. Furthermore, it is also one of their folktales that Tampuan people will become shorter and shorter until they disappear, therefore it will be even harder to ever become healthy and beautiful. Nevertheless, being beautiful and healthy are very important issues for the women in Paór village, it all add to having a healthy well nourished body and to have an easier life in the village without getting tired all the time. Most women really focus on the future of their children, to support them to go to school and get a good job, so that they don’t have the same problems as their parents suffer from.

Clearly, the women of Paór village do have their own concepts of healthy, unhealthy and beautiful and these are sometimes in direct opposition to Western concepts. One example of the difference is that children with a big belly are seen by their mothers as being very healthy and having a well nourished body. Therefore the mother would not think any sort of intervention for the child is necessary. In fact, the child’s belly may very well be full of worms and it is quite possible that the child is not healthy at all. It seems also that the
mothers have a very negative future perspective, they already feel tired and not well, they believe that being health is related to being fat and tall, but at the same time they will never reached that and even think that they will disappear in the future when God will turn the world up side down.

11.1.2 The relationship between a healthy well nourished body and food patterns and taboos
It became clear that not all women have enough food available to receive the energy they feel they need to work and live throughout the year. Although the food availability depends very strongly on the season, especially the months between August and October are very difficult for some of the women. The women deal with the scarcity of rice by eating twice a day instead of three times. It is also good to mention that the women make a distinction between the rice they eat and food. Food for them is only meat and vegetables. If you ask the women what food they eat, they will never mention the rice that is a part of their life and they will focus on the meat and vegetables they eat. For the women themselves, the availability of meat is the biggest problem. They mentioned that it is very difficult to hunt the animals in the forest, due to the fact that there is a decrease of wild animals in the forest and it is also difficult to buy the meat on the market places, because of the distance and limited financial resources. At the same time, the domestic animals are not used for consumption, but are only eaten during sacrificing ceremonies. The availability of vegetables and fruits doesn’t seem to be problem, although there is a strong seasonal difference with low availability of variation of vegetables and fruits during dry season. But most women do not appreciate vegetables and fruits, saying that it is not delicious, they do not like to eat it, it does not give any strength and they are bored of it. When fruits are eaten it is often eaten unripe, because people do not wait until it is ripe when it contains more vitamins. It seems that the food that women do like to eat is not really available and the food that is available, they do not like to eat it! Also the variations, especially during dry season in very limited. Furthermore the women do not have the money to buy concentrators of energy, such as fats and oils; but the coconuts which are ready available, they do not use. At the same time most women use MSG, as a seasoning flavour for their food, which they buy on the market, and it costs them a lot of money. The opinions about the effects of MSG vary by different researchers, but at the same time, some of the researchers mentioned a lot of side effects by using MSG in the food. I can imagine, that the amount of MSG women use that there are certainly effects which influence a healthy well nourished body in negative sense. While eating MSG in my own food, I always felt very sleepy and headache afterwards. More in-depth research is needed to find out how MSG influences the nutritional status of people. Also the issues of food storage and preserving food need to be looked at into more depth
too, because it can decrease even the food which is available, such as rats eating the rice stored in the chamkars. Food preservation methods can negatively or positively affect the nutritional composition of the food too.

The food available is positive effected by the social and cultural tradition of sacrificing when there is a problem in the village or when somebody is sick, because then people do have meat to eat after the sacrificing. The negative result is that the patient who is sick and probably need most to have a good meal, can’t eat the food sacrificed. Also most people do not eat domestic animals, because they are needed to use for sacrificing. It will be good to search for alternatives that people do eat also domestic animals, so that this sources can be used too for a nutritional meal. One of the main questions will be how women can prepare a meal with the food available, which is nutritious, but at the same time delicious and with enough variation throughout the year, but especially during dry seasons? Maybe even without the use of MSG? Another aspect is how the women will look towards the introduction of new food and eating domestic animals for consumption without disrespect for cultural values?

Food taboos and restrictions are a part of people’s life and they rationalise these by the fact that otherwise they get a problem or get sick. The women do have many stories and explanations behind these food taboos. The research concludes that general food taboos don’t influence a healthy well nourished body. This is different when we talk about women while they are pregnant or after the delivery of a baby. There are many food restrictions, especially during the first pregnancy and after the delivery of a baby sometimes even up to four months after delivery. During these critical phases of maternal and infant life, women are hardly aloud to eat anything except rice and salt, yet this is a time when women even need more nutritious food for their bodies and for their babies to grow, but because of all these food taboos and restrictions, they get less than usually. It is also seen that there is a high child morbidity rate, especially of children before they reach the first year. Some of the women expressed that half of their pregnancies end up with a miscarriage or the baby died shortly after birth. The food taboos during pregnancy and after delivery strongly affect women’s health and it is hard for them to recover from the effects of their pregnancy. The women do still follow these food taboos, because they are afraid that otherwise something bad will happen to them and her child. It seems like a vicious circle, whereby the women choose for them the best way, just to follow these food taboos, which is in my own western eyes the bad way.
The women divide their food in two categories, food which give you strength and power and food which doesn’t give you strength and power. The food that gives you strength is the meat and food what does not give you strengths is the vegetables and fruits. The way women categorise their food differs strongly from the western concepts of food groups. It will be an important point for outsiders to acknowledge the way women categorise their food and to focus in their health and nutritional educations programmes on their food groups and not on the western concepts. For example, to increase the nutritional intake, it would be important to make a link between the vegetables, the vitamins, the taste and the strength and power concept. Other issues are if there is any relationship between the hygiene aspect of washing and cleaning the vegetables and the complaints women give of getting sick after eating vegetables.

The women do make a very clear link between the food they eat and their own healthy or sick bodies. The women mentioned that the food protects their bodies and that wrong food (germs and unclean food) can cause sickness. But it would be important to discuss the link women make between food and their own bodies further and to discover what the consequences of the action taken are and how to deal with it, so that it will benefit the women and their children.

11.1.3 Nutritional problems

It is very hard to discover the nutritional problems in the village, it was also very hard to talk about it with the women, because they do ’o understand the concept of (mal)nutrition and the meanings attach to it. Beside the fact of explaining the concept, there is also a very big difference in observation and background knowledge. In my opinion, I saw many children in Paór village who are sick and malnourished, while their mothers were saying that these children were healthy. It seems it is something they got used to and is a part of their life, they cannot compare with other children in other villages or countries. Also most children in the village look the same, maybe only a few exceptions they made for children who were very skinny. That’s why I call it a silent emergency because malnutrition problems are often not seen or recognised, but at the same time it will have a big impact and huge consequences. Maybe they are also ashamed about their condition. It will be very important not to stress these differences in concepts and to focus on the problems, but to start from their viewpoint and use the children who are healthy and acting well as an example. It will be good to use the theory of the positive deviance, to start with the children who are healthy and without any sickness and see how they came to be this way. Then the lessons learned
can be applied to others in the village, as presumably all families have similar access to the resources which enabled some of the children to be healthy.

Breastfeeding
The biggest problem with breastfeeding is that most women start very late with giving breastmilk to their small baby, even up to 5 days after delivery. All women wait until the breast will produce milk by itself; there is not a practice of encouraging the baby to suck directly after birth, which has also other positive effects regarding the delivery of the placenta and the fact that the colostrum is very rich of Vitamin A. Another problem is that some of the mothers give the child extra water and sometimes even mixed with sugar, which can decrease the hunger feelings of the child and therefore make it even more difficult for the child to suck breastmilk, which contains lots of vitamins. The women explained that one of the main reasons is that they cannot start with early breastfeeding, because the milk is not coming out, they don't have milk, because the women do not have enough food to eat. It will be good to discuss this issue with the women to acknowledge their food taboos during pregnancy and after delivery, but to search for alternatives and to give them advices how the breast can produce milk for the babies from a much earlier point.

Weaning food
Most women start also very late with weaning food and give the children most of the time the same as the adults, so that the children also only eat twice or three times a day. The women only mentioned practical reasons for this food pattern, but do not seem to have any knowledge about the effects on the children. Other problem is that most women only give their child food, when they cry or if they ask for. If the child is already apathetic, sick or malnourished, it will be very hard to recover.

Cooking styles
The nutritious value of food is influences by the different cooking styles of women. A lot of food is cooked for a long time and therefore it can lose its vitamin content and decrease its overall nutritional value. At the same time prolonged cooking can also destroy the taste of the different kinds of food. It will be good to acknowledge and appreciate the various and different cooking styles, even to use them to create different meals and variation, because the lack of variation and the fact that they get bored of the food is also one of the issues women mentioned. If the women are aware of the impact of their cooking styles and the taste of food, it can help at the same time to improve the nutritional value of the food taken.
Smoking and drinking

Smoking and drinking is for nearly all women a social activity and very difficult not to follow, because than you are not one of the group. Most mothers teach their children very young how to smoke and drink, which have also effects on the health condition and development of the young children. Beside the fact that if people do make a lot of rice wine, it will cost them a lot of rice too, which they cannot use for regular meals, especially for the families which already don’t have enough rice available throughout the year.

11.1.4 The differences between the mothers interviewed

This paragraphs focussed on the major findings between the differences of the women interviewed based on female headed households, poor and rich families and generations differences.

Female headed households

There were only a few differences between the mothers interviewed. It was observed that the women who don’t have a husband or another male person to take care about them have a far more difficulties to survive. Especially the food availability throughout the year is one of the main problems, because they do not have somebody to work on their chamkars or somebody who can go to the forest to hunt some animals. Most women deal with it by living with one of their children, or by eating two meals per day instead of three. They just eat whatever is there.

Poor and rich families

The discussion about who is poor and who is rich is very complicated, and different people see this different and everybody found themselves very poor too. Therefore I decided not to make any distinction between poor and rich families. In my western concepts they are all poor, maybe a few exception of less poor than others. The only differences I noticed were the food availability between the different families.

Generational differences

There is a difference between the older and younger women, whereby younger women do not respect the food taboos and restrictions as strongly as the older women, although both younger and older said that they are very afraid if they do not follow these food taboos and restrictions that they will get a very difficult delivery or they may even die. But most of the younger women could not tell the total story anymore. The other difference was that younger women were to shy to talk and it was much easier to talk with the older women to
hear their stories. At the same time, younger women seems more open to other ideas or to change their food habits if that influences their children in a negative way. Because of the respect younger women have for their elders, you would need to involve both elder and younger in discussions.

11.2 Recommendations
Based on the major findings of the research, I would like to make some recommendations which organisations or government can use to set up health education or nutritional interventions. It is always important for every development programme to involve the people themselves and not to introduce anything which they do not understand or do not want to follow; as a general recommendation, it is important that programmes make use of the participatory principles of health education. As another general recommendation, it is clear that more research is needed to provide more in-depth insight into all the complexity of factors around the nutritional status of the mothers and their children.

1. To know general knowledge about the culture and the language to understand the people where they live before any activities or education is initiated.

2. To do more research about people’s economic situation and the ability to allocate food.

3. To understand the different concepts and expressions local people use and to use the same concepts and expressions within the educational nutritional programmes. For example: being healthy is being fat, but what about the big bellies of the children full of worms?

4. To acknowledge the lack of availability of certain food. For example the lack of availability of meat and to search for alternatives, such as using domestic animals for general consumption. Introducing new food, but be careful how and acknowledge people’s food taboos and customs.

5. Discuss with the women about the value of vegetables and fruits and go into issues related to the problems the women raise why do not they like to eat vegetables and fruits. Focus on the vegetables and fruit women eat and think they are delicious and healthy. Introduce new vegetables, which are delicious, by trial and error. For example, people can make a small garden on stilts near their houses, but then it is also important that they have water available on short distances. Discuss issues about hygiene and
cleaning the vegetables. Acknowledge that the women found the sweet taste and the umami taste delicious, discuss the alternatives of sweet snacks and MSG.

6. More research is needed around the use of MSG and the impact of MSG on people’s health and well being.

7. It will be good to do more research about the issues of food storage and food preserving, so that the food that is available can really be use for eating.

8. Snacks, especially sweet snacks are valued very positively, at the same time it will have negative consequences for women and children’s nutritional status. It is important to do more research about this upcoming issue of eating sweet snacks and to take this issue into account in any nutritional related activity or programme.

9. Issues of food taboos during two important phases of women’s life, pregnancy and just after delivery need to discuss more in-depth with the women. Start with the older women, because they are respected in the villages, but involve the younger women, who are much more open to try and change their ideas for the better.

10. Use the two food group’s according women’s concept; food that gave you strength and food what doesn’t give you strength instead of using the western concepts of three or four different food groups. Make a distinction between these foods and that it is important to use food from both food groups and that the best way is to mix these foods with each other.

11. Use the theory of the positive deviance, whereby it is important to start from what is good and healthy already and to use this as an example instead of starting from the negative points. It is important to encourage women and stimulate them positively.

12. Issues of breastfeeding and weaning food need to be discussed, also starting with the older women and involving the younger women. The women need to start much earlier breastfeeding their newborn child (but at the same time, it would be important to discuss the issues of the food taboos during the same period) and the women need to start earlier with giving weaning food to their children too. The weaning food needs to be given at least four times or even more per day. It is good to focus on the need of the child and not only when the child starts crying to give the child something to eat.
13. To enhance the taste of food women eat. For example, women like to use different cooking styles, it will be good to make use of that knowledge and to encourage them to try not to cook the food for a too long period, whereby all the nutritional value and taste is gone.

14. The problem of smoking and drinking is probably very difficult to change, because it is so much a social activity of the group. It is questionable to go into these issues at this stage.

15. To acknowledge the vulnerable group of female headed households without any adult men in the house who can support them to work on the *chamkars* or to hunt in the forest.

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# List of Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>FGD</td>
<td>Focus Group Discussion</td>
</tr>
<tr>
<td>HKI</td>
<td>Helen Keller International</td>
</tr>
<tr>
<td>HU</td>
<td>Health Unlimited</td>
</tr>
<tr>
<td>MSG</td>
<td>Monosodium Glutamate</td>
</tr>
<tr>
<td>NGO</td>
<td>Non Governmental Organisation</td>
</tr>
<tr>
<td>TBA</td>
<td>Traditional Birth Attendant</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organisation</td>
</tr>
</tbody>
</table>
**Glossary of Tampuan words**

<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arak</td>
<td>Spirit</td>
</tr>
<tr>
<td>Arak Hnam</td>
<td>House spirit</td>
</tr>
<tr>
<td>Boketeel</td>
<td>God, who created the earth</td>
</tr>
<tr>
<td>Bra</td>
<td>General word for God, which you can’t see</td>
</tr>
<tr>
<td>Chamkar</td>
<td>Field</td>
</tr>
<tr>
<td>Chot</td>
<td>Taste</td>
</tr>
<tr>
<td>Dalukouponlai</td>
<td>Feel healthy</td>
</tr>
<tr>
<td>Eiwat troh</td>
<td>Diarrhoea</td>
</tr>
<tr>
<td>Gongs</td>
<td>Music instruments played at sacrifices and feast to please the spirits</td>
</tr>
<tr>
<td>Jam</td>
<td>Meat from different kind of land-big animals</td>
</tr>
<tr>
<td>Kaphas</td>
<td>Baskets made from bamboo or rattan</td>
</tr>
<tr>
<td>Khaicgh</td>
<td>Meat from different kind of land-water-small animals</td>
</tr>
<tr>
<td>Kloeks</td>
<td>Gourds, used as water jars</td>
</tr>
<tr>
<td>Kiri</td>
<td>Mountain</td>
</tr>
<tr>
<td>Kreng</td>
<td>People who married within the same clan</td>
</tr>
<tr>
<td>Krijn</td>
<td>Bird</td>
</tr>
<tr>
<td>Krum Neri</td>
<td>Women group</td>
</tr>
<tr>
<td>Krung</td>
<td>Cold (rongnieng kluen)</td>
</tr>
<tr>
<td>Kruu Barong</td>
<td>Diviner, can see the spirits</td>
</tr>
<tr>
<td>Maan</td>
<td>Chew</td>
</tr>
<tr>
<td>Num rerkel</td>
<td>Candies</td>
</tr>
<tr>
<td>Pasaip</td>
<td>Somebody says to you don’t touch something, and you still do, you will die</td>
</tr>
<tr>
<td>Petruuu</td>
<td>Somebody soul after he/she died, a spirit which you can see</td>
</tr>
<tr>
<td>Plai Tjoo</td>
<td>Diviner</td>
</tr>
<tr>
<td>Plai Tjuu</td>
<td>A female spirit, who look with a flash light</td>
</tr>
<tr>
<td>Pong</td>
<td>Clan</td>
</tr>
<tr>
<td>Praungn</td>
<td>Bamboo and boil it</td>
</tr>
<tr>
<td>Pretjantanah</td>
<td>Red Land</td>
</tr>
<tr>
<td>Pro anteroh</td>
<td>Diarrhoea</td>
</tr>
<tr>
<td>Ratana</td>
<td>Precious stone</td>
</tr>
</tbody>
</table>

*The silent emergency: 'You are what you eat!'*
<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ratjies</td>
<td>The place where they put the pork/blood of the pig for praying during sacrifices</td>
</tr>
<tr>
<td>Raya</td>
<td>Crocodile</td>
</tr>
<tr>
<td>Rekue Plai</td>
<td>A male spirit, who measure the problem</td>
</tr>
<tr>
<td>Rongwaal</td>
<td>Grill/fried</td>
</tr>
<tr>
<td>Samlop</td>
<td>Unconscious</td>
</tr>
<tr>
<td>Sarnoksewat</td>
<td>Hello</td>
</tr>
<tr>
<td>Sentok</td>
<td>Boil</td>
</tr>
<tr>
<td>Seoot</td>
<td>Boiling food with lot of water</td>
</tr>
<tr>
<td>Slong dáh solong paán</td>
<td>Food good food delicious</td>
</tr>
<tr>
<td>Sonnum</td>
<td>Energy</td>
</tr>
<tr>
<td>Swaar</td>
<td>Worms</td>
</tr>
<tr>
<td>Tangrijl</td>
<td>Leaves used by God to create animals</td>
</tr>
<tr>
<td>Tanseyn</td>
<td>Sugarcane</td>
</tr>
<tr>
<td>Tapeung</td>
<td>Bamboo</td>
</tr>
<tr>
<td>Teek tak olaid</td>
<td>No milk coming out</td>
</tr>
<tr>
<td>Tepol</td>
<td>You will get a difficult delivery and your baby will drop down from the body</td>
</tr>
<tr>
<td>Toh</td>
<td>Hot (kdaw kluen)</td>
</tr>
<tr>
<td>Trauws</td>
<td>Sickness</td>
</tr>
</tbody>
</table>
# Glossary of Tampuan words regarding food

<table>
<thead>
<tr>
<th>Tampuan Word</th>
<th>English Translation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ambong poen plieng</td>
<td>Leaf of potato (long potato)</td>
</tr>
<tr>
<td>Amhauid</td>
<td>Ants</td>
</tr>
<tr>
<td>An’hor</td>
<td>Jackfruit</td>
</tr>
<tr>
<td>Chill</td>
<td>Small deer</td>
</tr>
<tr>
<td>Daoung</td>
<td>Coconut</td>
</tr>
<tr>
<td>Jer</td>
<td>Chicken</td>
</tr>
<tr>
<td>Kaa</td>
<td>Fish</td>
</tr>
<tr>
<td>Kapau</td>
<td>Buffalo</td>
</tr>
<tr>
<td>Kiét</td>
<td>Gourd</td>
</tr>
<tr>
<td>Kraai</td>
<td>Grey/red squirrel</td>
</tr>
<tr>
<td>Kut</td>
<td>Frog</td>
</tr>
<tr>
<td>Lahong</td>
<td>Papaya</td>
</tr>
<tr>
<td>Makaai</td>
<td>Melon</td>
</tr>
<tr>
<td>Nok</td>
<td>White vegetable from the pond</td>
</tr>
<tr>
<td>Onhamtrouws hang</td>
<td>Root of the tree (traditional medicines)</td>
</tr>
<tr>
<td>Patoek</td>
<td>Green vegetables (like tree, similar as <em>trauw</em>)</td>
</tr>
<tr>
<td>Piá</td>
<td>Cucumber</td>
</tr>
<tr>
<td>Prais</td>
<td>Kind of herb, the root of the herb</td>
</tr>
<tr>
<td>Preseing</td>
<td>Green vegetables</td>
</tr>
<tr>
<td>Prohok</td>
<td>Fish</td>
</tr>
<tr>
<td>Prok</td>
<td>Red squirrel</td>
</tr>
<tr>
<td>Proo</td>
<td>Eggplant</td>
</tr>
<tr>
<td>Prowies</td>
<td>Green vegetables (young is red and old it is green)</td>
</tr>
<tr>
<td>Rak</td>
<td>Cow</td>
</tr>
<tr>
<td>Repiéh/trei</td>
<td>Pumpkin</td>
</tr>
<tr>
<td>Saim</td>
<td>Bird</td>
</tr>
<tr>
<td>Sambar</td>
<td>Vine, green vegetables, purple/red colour too</td>
</tr>
<tr>
<td>Sandeik</td>
<td>Beans</td>
</tr>
<tr>
<td>Sekei</td>
<td>Pig</td>
</tr>
<tr>
<td>Sengkooi</td>
<td>Similar than a small deer</td>
</tr>
<tr>
<td>Swaay</td>
<td>Mango</td>
</tr>
<tr>
<td>Takrang</td>
<td>Green vegetables (when it grows up it is grey, ripe it is green)</td>
</tr>
<tr>
<td>Tangreel</td>
<td>Seeds of a plant (nuts)</td>
</tr>
<tr>
<td>Tapung</td>
<td>Bamboo shoot</td>
</tr>
<tr>
<td>----------</td>
<td>--------------</td>
</tr>
<tr>
<td>Tjatoek</td>
<td>Green vegetables</td>
</tr>
<tr>
<td>Tjwei</td>
<td>Big deer</td>
</tr>
<tr>
<td>Vang</td>
<td>Rabbits</td>
</tr>
<tr>
<td>War</td>
<td>Rat</td>
</tr>
</tbody>
</table>

The silent emergency: 'You are what you eat!'  

98
Annex 1: Geographical situation of the research site: Paór village
Figure 2: Lung Khung Commune
Annex 2: Women Village Mapping of Paór village

- Women making their own village map -

- Result of the village mapping –
Annex 3: Geographical situation of Ratanakiri province

Figure 1: Cambodia
Figure 2: Ratanakiri Province
Annex 4: Indigenous People Groups of North-eastern Cambodia

Source: Colm 1997
Annex 5: The different tasks between men and women and their working/resting hours

<table>
<thead>
<tr>
<th>Time</th>
<th>Activities</th>
<th>Time</th>
<th>Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>4-6</td>
<td>Get up, pound rice</td>
<td>5:30 -6:30</td>
<td>Get up, wash face and eat breakfast</td>
</tr>
<tr>
<td>6-7</td>
<td>Fetch the water</td>
<td>6:30-7</td>
<td>Go to the chamkar</td>
</tr>
<tr>
<td>7-8</td>
<td>Cook lunch, feed animals</td>
<td>7-10</td>
<td>Check the trap, start weeding</td>
</tr>
<tr>
<td>8-8:30</td>
<td>Eat breakfast, prepare food to take to the chamkar</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8:30-9</td>
<td>Go to the chamkar</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9-9:30</td>
<td>Gather vegetables</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9:30-10</td>
<td>Cook soup</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10-11</td>
<td>Eat and rest</td>
<td>10-11</td>
<td>Eat and take a rest</td>
</tr>
<tr>
<td>11-16</td>
<td>Continue working, weeding, collecting firewood, and gather vegetables Go home</td>
<td>11-16:30</td>
<td>Continue weeding</td>
</tr>
<tr>
<td>16-16:30</td>
<td>Take a bath, wash clothes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16:30-17:00</td>
<td>Feed animals, cook</td>
<td>16:30-17</td>
<td>Go home</td>
</tr>
<tr>
<td>17-19</td>
<td>Eat, clean pans, and look after children</td>
<td>17-21</td>
<td>Take a bath, eat and chat</td>
</tr>
<tr>
<td>19-20</td>
<td>Rest and chat</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20-21</td>
<td>Sleep</td>
<td>21-5:30</td>
<td>Sleep</td>
</tr>
<tr>
<td>21-4</td>
<td></td>
<td>21-5:30</td>
<td></td>
</tr>
</tbody>
</table>

**Total resting hours**: 9,5

**Total working hours**: 14,5
Annex 6: Seasonal variation and availability of plants and other food

**Dry season:**
According the women there are only two kinds of vegetables available during the dry season:

1. Nearby stream/pond: such as *tukrang* (green), or *prowie* (red), *pantoh*, *tauwen* and *tauwes*
2. Forest vegetables, such as *preising and ka dev* leaves

**Rainy season:**
During rainy season there are many different kinds of vegetables, below the ones the women mentioned during the research:

Bamboo shot, eggplant (*brok/proo*), oklar/okra, melon, pumpkin (*teum pum/trae*), gourd, leaves (*kiet*), beans (*repiely*), *lakjet* (green vegetables), cucumber – *om bong pum/pya*, papaya, mango, cassava leave – *bong poen plieng*.

**Different kinds of food available:**

*Vegetables, cultivated food*: white potato, taro root, pumpkin, taro stalk, cucumber, cassava, *sang hom* herb, winter melon, sponge gourd, sweet potato, gourd, chilli, sugar cane, corn, cashew nuts, long bean, ginger, potato leaf, bean, mung bean, winged bean, water convolvulus, morning glory, morning grass, aubergine, eggplant, cassava leaves, sesame, *luffa* gourd leaf, cabbage, *kakek* bean, lettuce, *teng* bean, herbs, yam bean

*Vegetables collected food*: rom teng leaf, rang leaf, knkop leaf, katieve leaf, spring vegetable, ptaview leaf, prakieve, rattan leaf, pecka leaf, chava leaf, domlong, cassava, kordev leaf, horse radish leaves, kanthom that, ankeri dei, kteuch (cassava roots), all kinds of potato, bamboo shoots, cinnamon leaves, cassava leaves, mushrooms, toin leaf, bass leaf, vor pa, moving, pra prong leaf, domlong leaf, water lettuce, ag diek leaf, pop eng, tamarind leaf, roo, wild rhambuttan, benteng, tgon, bong kuoy, pong outt, sam on, speck touc, parkrei, pou moeuy, domrei, die tela potato, douang potato, smack leaves, bitter gourd leaf, prick leaf, kantuaong, chok

*Fruit trees* around the village: ripe banana, ripe papaya, banana flower, jack fruit, pomelo, coconut, pineapple, orange, green mango, mango, *ambong* banana, banana stalk, *vieng* papaya, tamarind, lotus
Animals collected food: fish, walking cat fish, eel, shrimp, oyster, rat, mice, akout animal, squirrel, monkey, dog, snake, crab, frog, snail, tortoise, wild chicken, small fish, big red ants, bees, red muntjac, tiger, sambar, newt, rabbit, pangolin (ant eater), kroch wild bird, other birds, wild chicken, turtle, civet, wild pig, fermented fish, honey, bee larvae, porcupine, bowl frog, cockroach, ksan fish and watery snake.
Annex 7: MSG facts (source: Internet)

MSG is a flavour enhancer and its principal component is an amino acid called glutamate. Glutamate is found naturally in protein-containing foods such as meat, vegetables, poultry and milk. The human body also produces glutamate naturally in large amounts. The muscles, brain and other body organs contain about four pounds of glutamate, and human milk is rich in glutamate. Glutamate is found in two forms: 'bound' glutamate and 'free' glutamate. Only 'free' glutamate is effective in enhancing the flavour of food. Foods often used for their flavouring qualities, such as tomatoes and mushrooms, have also high levels of naturally occurring 'free' glutamate. The 'free' form of MSG is made through a process of fermentation from corn, sugar beets and sugarcane, but it is also possible to get a 'free' form of MSG in a more chemical way through certain bacteria. MSG is added to food but has no direct nutritional value. It doesn’t affect the food it is in, and it doesn’t have any flavour. Rather, it produces its flavour enhancing effect by stimulating your taste buds. MSG excites the taste buds and causes adverse reactions. MSG is also called a neurotropic drug, a substance that affects the nervous system. The taste brought by MSG is called umani, also called the fifth taste after salt, sweet, sour and bitter.

The effects on human beings after eating MSG differ and varied per person. Reactions included skin rash, bloating, fatigue, joint pain, shortness of breath, headache, chest pain, severe gastric distress, diarrhoea, asthma type symptoms, irregular heart beat, atrial fibrillation, rapid heart beat, nausea and vomiting, anxiety attacks, depression, hyperactivity in children, mood swings, mouth lesions, flushing and tremors. It is very difficult to see if these effects are from MSG and not from something else, because it differs a great deal and also when the reactions take places after eating differs strongly. MSG gives has also an addictive effective on people, wanted to eat more of the same. At the same time the Food and Drug Administration (FDA) stated that MSG is a natural product and therefore no problem to use, but they never talk about the difference between what is natural already in certain food or a natural product which is made and added to the food. There are also studies that say that MSG may play a role in the overall health and nutrition of vulnerable people such as the elderly people. Because of aging, as well as a number of diseases and illnesses, decrease our ability to taste and smell. This decrease is a major contributor to poor nutritional status and adding MSG to certain foods has been successful in increasing the food intake in institutionalised elderly populations.
**Annex 8: Healthy and unhealthy food**

### Healthy and unhealthy food according the ‘old mothers’ FGD’s

<table>
<thead>
<tr>
<th>No.</th>
<th>Healthy/strong</th>
<th>A little bit healthy/strong</th>
<th>Not healthy/not strong</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Kaa (fish)</td>
<td>Danong - green vegetables (mix with meat)</td>
<td>Makiep</td>
</tr>
<tr>
<td>2</td>
<td>Melon (piamakei)</td>
<td>Repieh - vegetables (mix with meat)</td>
<td>Egg - kadapjer</td>
</tr>
<tr>
<td>3</td>
<td>Haarlong (fish)</td>
<td>Swaay (mango)</td>
<td>Lei kroit (orange)</td>
</tr>
<tr>
<td>4</td>
<td>Liver of chicken</td>
<td>Jackfruit (nhor)</td>
<td>Merem (vegetables)</td>
</tr>
<tr>
<td>5</td>
<td>Katna (vegetables)</td>
<td>Poenj (oklar)</td>
<td>Rapueh (pumpkin)</td>
</tr>
<tr>
<td>6</td>
<td>Takoen (green vegetables)</td>
<td>Poen pakat (white beet)</td>
<td>Bananafower (laiuwprei)</td>
</tr>
<tr>
<td>7</td>
<td>Petie (green vegetables)</td>
<td>Carrot</td>
<td>Luet</td>
</tr>
<tr>
<td>8</td>
<td>Liver of pig</td>
<td>Prauw (green vegetables)</td>
<td>Matamei (vegetables)</td>
</tr>
<tr>
<td>9</td>
<td>kiten</td>
<td>Huisome (green vegetables)</td>
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<td>10</td>
<td>Lehong (papaja)</td>
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<td>11</td>
<td></td>
<td>Sambar (green vegetables)</td>
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<td>12</td>
<td></td>
<td>Prek (banana)</td>
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<td>19</td>
<td></td>
<td>Tjoek (cambodia flower)</td>
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<td>Paupauk (green vegetables)</td>
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<td>Poen tjein (sweet potato)</td>
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<td>22</td>
<td></td>
<td>preisedong (green vegetables)</td>
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### Healthy and unhealthy food according the ‘young mothers’ FGD’s

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<thead>
<tr>
<th>No.</th>
<th>Healthy/strong</th>
<th>A little bit healthy/strong</th>
<th>Not healthy/not strong</th>
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<tr>
<td>1</td>
<td>Prei (banana)</td>
<td>Tatie (green vegetables)</td>
<td>Samei (green vegetables)</td>
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<tr>
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<td>Takoen (green vegetables - mix)</td>
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<td>Poen (sweet potato)</td>
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<td>3</td>
<td>Kiet</td>
<td>Kroit (orange)</td>
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<td>4</td>
<td>Tarauw</td>
<td>Danong</td>
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<td>Lehong</td>
<td>Kadei (green vegetables)</td>
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<td>Chicken</td>
<td>Marem</td>
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<td>Sambar (green vegetables)</td>
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<td>Ansom</td>
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<td>9</td>
<td>Pig</td>
<td>Banana flowers</td>
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<tr>
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<td>Healthy/strong</td>
<td>A little bit healthy/strong</td>
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<td>Rapieh</td>
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<td>Met taam klammei (green vegetables)</td>
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<td>Poenj (green cucumber)</td>
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<td>Egg</td>
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<td>13</td>
<td>Nhor (jackfruit)</td>
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<td>Rapieh (leaf of the pumpkin)</td>
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<td>Swaay (mange)</td>
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<td>16</td>
<td>Tiep</td>
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</tr>
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<td>17</td>
<td>Makaai (melon)</td>
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Annex 9: Cooking styles described by the women themselves:

1. Sa Ort
'We put MSG, salt, chilli, vegetables in the water and boil it for awhile. If we have meat, then we put also meat in the water. It is like a kind of soup, usually we give it especially for the small children or babies'.

2. Ong Tae
'We put rice in the water for a short time to soak and then we take the rice out of the water and pound it to become flour. At the same time we put vegetables, such as preseing (green vegetables) or papaya in a pot with water to boil mix with salt, chilli and MSG. At the end we put the rice flour also in the pot and we steer it together, cook for a little while and then it will be ready to eat'.

3. Brong
'We put preseing, eggplant and a little bit of water in a bamboo stick and lay it in a fire to fried. Then pound it together with salt, MSG and chilli and it will be ready to eat. Some women also mix it with lemongrass and chives.

4. Pa Yang
'We put a pot on the fire with snails in it. At the same time we fried the rice, burn it, and pound the rice. Then at the end we mix it together so that we can eat it. We also mix it with salt, chilli and MSG.

5. Ta Pong
We take the rice and soak it in water for 2 to 3 minutes and grind it to flour. When we finished the rice, we take a pot and fried the meat (pork), and then we mix the flour together with chilli, salt, MSG and pork and boil it.

6. Reloêt
We cut the meat in small pieces, mix with lemongrass, onion, salt, chilli, MSG, to make it sour. We eat this raw. Sometimes they use boiled water to pour it over the food for a short time and than we will get the food out and eat it. We don't put it in the fire anymore, so it is only a little bit soft.
It is also called: Pluéh (Pa la Plieh), this is the same as Reloût. There are two different ways regarding this cooking style: rahol, for big animals and hadch for small animals. If we have big animal meat, take only good meat, chop it, put salt, chilli, MSG, mint and lemon and soak it in hot water. If we don’t put enough mint, the smell will be bad

7. Om Pun

Om Pun is very delicious because we put chilli, salt and MSG into it. We wrapped the fish in a leave mix with salt, chilli and herbs. We lay the fish (Sam On Yam) into the fire to cook.

8. Rang ah val

We fried/grill a pig or deer and put oil first then vegetable, salt, chilli, MSG, after it’s fried we will enjoy it very much. If we don’t have oil, we can’t make rang ah val.

9. Samtok

We only boil the vegetables and we don’t put anything into it, but with lots of water.

10. Lung

We mash all the food together

11. Rampoer Tur

We mix rice with preseing, salt and MSG, wrap it in a leaf and put it in the fire.

12. Ta Louk

We mix the food together and put lots of salt into it, to keep it for many days or for more than one year.

13. Katoeung

We just fried the food.

14. Jamrooi

We dry the food in the sun, so that we can keep it for a long time
Annex 10: Food taboos and their stories behind

1. Cow
The taboo of cow is an old taboo from the old generation. When I asked one of the younger woman, if she knew any story related to the cow taboo, she looked at her mother and answered: ‘I do not know’. ‘It is a taboo from the old generation, since our ancestors and we are afraid to eat beef.’ ‘When we will eat beef we will have wounds and a swollen body’. People need to sacrifice a pig and then they will get better. They need to kill the pig, take out the liver of the pig, put it on the mouth of the jar and pray to the spirit and then finally eat the meat.
Other women knew the story behind the taboo of a cow. Once upon a time, there were two sisters and they were drying some cotton clothe (prieh) in the sun outside the house. The older sister leaves the younger sister to wait to watch the cotton clothe so that it will not disappear, but when the older sister came back, she did not see the cotton clothe anymore and she accused her young sister for disappearing the cotton clothe. Sisters were fighting together, the older sister got very upset and pushed her younger sister away and she left the house to another village. The younger sister did not take the cotton clothe away, but the older sister did not believe her. Later on, the younger sister cut the cow to eat and saw the cotton clothe in the stomach of the cow and then finally she believed her younger sister and asked her to come back. But the younger sister did not want to come back anymore. That’s why they cannot eat cow anymore and if we will eat we will get sick right away.
The two sisters were from the pong Ratjam and that’s why all people from the pong Ratjam cannot eat the cow anymore.

2. Tarauw (Bamboo)
The story of the tarauw taboo is about two women, nang pluoen (the older sister, but the younger sister of Panjahn Klang King) and nang tasch (younger sister). Nang tasch and nang pluoen are not allowed to eat bamboo, because their brother, Panjahn Klang King, died during the war time, in the bamboo thorn. If you eat tarauw, you will die immediately. Also many other people died in the bamboo thorn, that’s why many people from different clans cannot eat tarauw.
Another story related to the food taboo of tarauw happened in the pong clown. There was one family, who did not have enough food. Two sisters went to the pond to cut wild tarauw (truw kiët, the taste of tarauw, make your mouth ’itching’) to cook and make food for themselves. They put the tarauw in a pot, while cooking the older sister decided to take a bath. The older sister asked the younger sister to look after the pot with tarauw. When the
older sister came back, she saw that the pot was not full anymore, and she accused her younger sister for eating from the pot. They were fighting together and the younger sister decided to leave the house. When the older sister was alone, she decides to cook again the *tarauw*. While cooking, she discovered that the *tarauw* was less after awhile too, maybe it was eaten by a cow. She felt pity on her younger sister and asked her to come back, but she did not agree with her older sister and did not come back, so after this conflict they lived separated. If the family now will eat *tarauw*, they get itching and will die. This *tarauw* taboo is for ever. If you do not eat *tarauw*, it will help you, the *tarauw* will protect you from the animals to come to your place.

3. **Tjoeng (bird)**

Once upon a time there were people living in a Lao village, who wanted to visit their relatives in the Tampuan village, which was for a long time their home town too. But these men did not know the way to the Tampuan village anymore and they asked the *Tjoeng*, if he knew the way to their hometown? The *Tjoeng* replied; *'if you do not kill me and never will eat me, I will show you the way'*: That time all the relatives promised not to eat the *Tjoeng* anymore till now.

Other women were also sharing the story behind the taboo of *Tjoeng*, a little bit different, but the meaning is the similar. There were two sisters who lost their way, they were very confused where to go and than they met a *Tjoeng* and he said that he knew the way, but I will only show to you if you promised never to eat me again. So they promised never to eat *Tjoeng* anymore and that’s where the taboo of *Tjoeng* started.

It a food taboo of old generations and for a long time now. If you will eat this bird your neck will be swollen and you will get problems with your eyes. This taboo I only found in *Pong Ratjam*.

4. **Sampeik (ferret; similar than squirrel, but much bigger)**

This taboo is a very old story for many generations and they do have a *sampeik* taboo, because their ancestors were born as a *sampeik*. If you do eat, you will get sick and you need to sacrifice a pig and chicken to get better.

5. **Klangtuip (hawk-bird)**

This story started after a man who escaped from Laos and hide in the forest for a long time. In that forest, he had only sugarcane to eat and unfortunately that sugar cane cut his whole mouth while he ate it. He did not know what to do. Then there was a bird, *klangtuip*, who came to sew his mouth. That’s why people cannot eat this bird anymore.
6. Preh (ginger)
The women can eat the root, but they cannot plant preh. If they plant preh, they will get a problem, such as sickness and die. Long time ago, there was a lady carrying her baby on her back, digging for preh and while doing this she hit with the handle of the digger the baby. The baby died immediately. Then she decided from that time onwards, I will stop planting and eating ginger anymore.

7. Sambar (leaf of a vine)
The woman who shared about the taboo of sambar does not know why they have this taboo. It is a taboo from old generations, but if they eat they will die by accident. The women are afraid of getting an accident while travelling and for problems while giving birth.

8. Muil Plah (Mushroom)
The muil plah taboo started because of a dream. People were making a new kitchen in their house. When they finished, they went to work on the farm and came back during the evening. When they come home they saw mushrooms growing everywhere in the kitchen and they were wondering where it came from. That night these people got a message in their dreams that then cannot eat muil plah.

10. Antuip (Dove)
The taboo of antuip is only for the Pong karmel. It started one day when the antuip was singing in from of the house and one woman tried to catch the antuip. While doing, suddenly the house broke down and hit the woman and she died. Since then the people of the Pong karmel do not eat antuip anymore.

11. Tieng Hol (Hot rice)
Some women were sharing that they cannot eat hot rice because of taboo, but could not explain the reasons behind this taboo.

12. Tieng Krijn (Bird)
There was one man who climbed into a tree and while doing that the tieng krijn make his eyes blind. That’s why they cannot eat tieng krijn.
Annex 11: Problem analysis

Problem analysis of the nutritional problems based on the ecological model of Jerome, Kandel and Pelto (Goodman, Dufour, Pelto 2000: 2)

Social environment:
- Land confiscation
- Deforestation
- Lack of landownership
- Poor infrastructure
- Poverty
- Lack of public services, such as safe drinking water, health services, education, family planning
- High illiteracy

Physical Environment:
- Change in slash and burn cultivation
- Soil infertility
- Food shortage throughout the year
- Lack of variety of food
- High incidence of malaria and diarrhoea and other diseases
- Many pregnancies
- High mortality and morbidity rates

More than half of the children are chronic malnourished (e.g. stunting) in Ratanakiri, Cambodia

Social Organisation:
- Gender differences
- Labour division
- Household distribution
- Responsibilities and power relationships
- Decision making processes
- During pregnancies most mothers are working hard and heavy labour
- Mother don’t have the time to search for food and firewood

Culture - Idea Systems:
(Cognitive and symbolic aspects)
- Mothers don’t give colostrum to newly born babies during the first few days (varied between 1-5 days)
- Start late with weaning food, sometimes after 1 or 1,5 year old
- Food taboos and restrictions
- World view
- Views regarding health, diseases, illness and death
- Religion

- Interaction between care-giver and his/her children -

Technology:
- Poor storage possibilities of the harvest
- Limited use and availability of technology; fertilizer, mechanical tools