BETAWI WOMEN'S PERCEPTIONS AND EXPERIENCES WITH LABOUR PAIN

"Kalo kagak sakit itu mah bukan beranak"
(Labour without pain is not labour)

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SUMMARY

During my experiences as a midwife in Jakarta, labour pain was very interesting since many phenomena could be observed. The key person who understands the nature of labour pain is the woman that has experienced it. She is the best informant who can give information about what she needs, what she expects and why she behaved the way she did.

Looking at the full range of traditions and ceremonies related to pregnancy and labour process in the Betawi community, there is no detailed information of what happens during the labour process. Furthermore, many studies that have been carried out on the Betawi community were only related to the local practices surrounding pregnancy and post partum; with little focus on labour and labour pain.

The objectives of this study are to gain an in-depth understanding on the perceptions and experiences of labour pain of Betawi woman, and to explore the roles of Betawi community’s norms and values on labour pain in the process of shaping those perceptions and experiences. Related to the context of the present Betawi Community, the possibility of a change in perceptions of labour pain from previous generations to the present generation is an important consideration in this study.

The study was based on in-depth interviews to post partum mothers, to explore their perceptions and experiences with labour pain. The community and religious leaders were important informants to learn the general norms and values in this Betawi community. Focus Group Discussions and informal conversations are other methods that have been used to explore the possibility of a change of perceptions on labour pain.

The study found that labour pain concepts in the Betawi Community where I did my fieldwork are not only related to the biological aspect. Labour pain concepts are related to and supported by others norms and values dealing with basic principles in the community, their general ideas of children and family, pain concepts in general, and especially the meaning of the labour process for this community. The ancestors and religious values have big influence to those norms and values in this community. Five Betawi mothers are the focus of this study. They admit the presence of pain in the labour process. They perceived this kind of pain as a “normal” and “natural” pain that accomplished the labour process. Through these experiences, a relationship of labour pain with some other aspects, such as the labour helper and the financial aspect became known. Related to the pain behaviour, these mothers preferred to keep quiet during the labour process. They also had the tendency to do some activity during the phase of labour pain.

I met Betawi women from three generations during my fieldwork. Labour pain concepts for these three generations seemed to be changing; in so far strategies to deal with labour pain are concerned, including elements that can influence the labour pain itself. But these changes do not affect their basic concept that pain is a natural phenomenon, which happens during the labour process.
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Thank God for your help and guidance, I cannot do anything without You
Lesson in life is started by understanding ourselves
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Chapter One
INTRODUCTION

1.1 Background of study

During my experiences as a midwife in Jakarta, labour pain was a very interesting subject to study, since many phenomena can be observed. One of these fascinating phenomena was a woman expressing extreme pain without any strong uterus contractions. The opposite case also did happen, where there was a woman who did not feel a high tension of pain although there was strong uterus contraction. There was a case where the pain was reduced or increased by the presence of someone that accompanied the labouring woman. In other occasions, I had seen a Couvades phenomenon. This phenomenon is a situation where the labouring woman does not feel any pain while on the contrary the husband feels it.

Another fascinating phenomenon has been experienced by my colleague. She had her first labour in a hospital far away from her home. While she was passing through her first stage of the labour process, she was not applying her midwifery’s knowledge to deal with labour pain (such as breathing techniques, positions, etc.). In contrast, she applied her values as a member of a particular community that had the tendency to scream and cry when they have some pain. These behaviours had an impact on her, because people who observed her labour process labelled her as a “weak” person, although in her ordinary life my friend was known as a tough person. The community in which my friend got labour, which had the tendency not to express labour pain, had felt that my friend should cope better with the labour pain because she is a midwife. After the hard labour processes, my friend told me that even though she knew about labour physiology and what she should have done, at the same time she felt that there

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1 “In many cultures, especially those where the ritual couvades is not practiced, men have often been reported as suffering from physical and/or psychological symptoms during their wife’s pregnancy, birth and post partum.” (Helman, 2001:126)

2 First stage is effacement and dilatations of the cervix; contractions are fundally dominant ...(Tiran, 2000:151-152)
were other things that pushed her harder than her knowledge. She said that her understanding about labour pain was different compared to what she had experienced.

In contrast to my friend’s case, there were also some cases where a labouring woman was struggling not to express the labour pain and to just keep it for herself. Even though I told them that it is allowed to express their pain, they usually refused and chose to keep quiet. They would just bite their pillow or grasp their bed. I recognized that the women who had this behaviour usually came from similar cultural ethnic backgrounds in Indonesia.

1.2 Problem statements

From a biomedical point of view labour pain, also known as HIS, is regarded as a normal labour sign which involves uterus contractions. However, there is evidence that some mother feel fear and anxiety with labour pain (Acta Obstet Gynecol Scand 2001; 80:315). The feeling of anxiety and fear related to labour pain are generating some considerations for health providers to give supports for labouring woman. However, for health providers, providing support to labouring woman is not a simple subject, because labour pain is invisible and cannot be grasped; neither can it be adequately measured despite technologies that measure the contraction of uterus (see also Scarry, 1985:4).

While managing clients, I sometimes observe different types of labour pain. Each labouring case – especially with regard to labour pain – is unique and never similar from one woman to another. Similar physiological processes of labouring have different intensity of pain. The response of the mothers to the pain is also different. Therefore, based on these observed experiences, labour pain may not necessarily be attributed to biological and physiological processes only, but may be due to the outcome of a complex of factors. Furthermore, labour pain may not only relate to the individuals, but may also be attached to other people, norms, and values that affect the mother. Similar behaviours displayed by women when dealing with labour pain may have different meanings in all of these labour pain phenomena.
To have better understanding of the labour pain phenomenon and the meaning behind it, a key person is needed. The key person who understands the nature of labour pain is the woman that has experienced it. She is the best informant, who can give information about what she needs, what she expects and why she behaved the way she did. In order to understand how labour pain systems work; we must learn to think like the labouring women (see also Benjamin Paul, 1955, in Good, 1994: 26). Knowledge about labour pain that has been perceived and experienced by women will help to understand the complexity of labour pain phenomena, and it will help to find better supporting approaches.

However, to understand the meaning of labour pain of a woman, we must realize that every woman has been raised within her family and within her community. The mother’s perceptions and experiences with labour pain will be influenced by the concepts and ideas of her family and her community. Sich (1981:69) considered that dealing with labour means dealing with the community. Every community has its concepts and ideas on looking at something. In order to comprehend a woman’s perceptions and experiences we also should understand the community’s concepts related to it.

A particular way to understand how a woman perceives labour pain is through research that is conducted in a certain community. Considering the background of the Indonesian context, the feasibility and the time limitation, this study will focus on a certain community in Indonesia, which is the Betawi community. The Betawi community is the indigenous community of Jakarta, the capital of Indonesia (Saidi, 1994:153). Looking at the whole of traditions and ceremonies related to pregnancy and post partum in the Betawi community (Gularso, in Swasono, 1998: 267-276), there is no detailed information of what happens during the labour process. These kinds of ceremonies imply that this community has certain expectations with regard to pregnancy and childbirth process, which I assume will also influence the meaning behind the labour process or the labour pain. Based on these evidences, it is important to focus this study on the labour process, especially on the labour pain theme. Furthermore, many studies that have been carried out on the Betawi community were only related to the local practices surrounding pregnancy, childbirth and post partum,
with little focus on labour pain. Therefore, in this study I want to do an in-depth research on Betawi women’s perceptions and experiences about labour pain and the roles of Betawi’s norms and values in shaping those perceptions and experiences.

1.3 Literature review

There are several explanations on labour pain (biology, psychology and anthropology); however, only the anthropological views will be used in this study. The focus on culture is related to the consideration that labour pain is not only a physical or individual pain but rather the result of complex elements, or, in other words, ‘culturally constructed’.

In order to explore labour pain from an anthropological point of view, relevant studies that relate to labour pain have been reviewed and shall be presented in three parts. In Part One I will review the concepts of pain and pain behaviour {see Morris, Kleinman, Good, Brodwin and Good (1992); Melzack and Wall (1982); Moerman (2002); Glassman (2000), Helman (2001, 2002); Morris (1991) and Scarry (1985)}. Part Two presents labour concepts from a cultural point of view {see Helman (2001), Jordan (1983); Ludovici (1937); Teijlingen, Lowis, McCaffrey and Porter (1999); and Abraham Van der Mark (1993)}. Part Three will present labour pain concepts from the cultural point of view {see Wall and Melzack (1984); Sheiner, Sheiner, Vardi, Moshe Mazor and Katz (1999)}.

1.3.1 The concepts of pain

The construction of pain

There are several views about the concept of pain: biological views (Melzack and Wall), psychological views (Glasmann), physiological and anthropological views (Morris, Kleinman, Good, Brodwin and Good; Helman; Moerman; and Zborowski). Each view leads to the concept that pain is constructed by complex systems.
Biological theory (Melzack and Wall, 1982: 227) views pain as a result of bio-neural mechanisms. Biological studies (Melzack and Wall, 1965 quoted by Moerman, 2002:101) explain that neural mechanisms work as a transportation system conveying messages from every cell in the body to the brain. This is controlled by a gate called the “Neural Gate”. The message of “pain” can reach the brain if it passes this gate. Anaesthesia field uses medicines or other substances to close this gate. However, this biological study also found that these neural gates are controlled by other systems that are related to something that has deep relations with the person in pain. These other systems can be important events or important persons or other elements that have important meaning for the person in pain (for example, a person who is in competition will not feel pain during the competition because he wants to win, and feels pain when the competition is over). Indeed, the bio-neural explanation for pain systems becomes problematic when it is applied to a case in which a person still experiences pain even though the neural gate is already closed, or when people really feel pain without any injuries.

Anthropological views provide explanations to these questions by showing that the human body is not only consisting of biological organs or systems. It is also comprised of meanings, experiences, knowledge and practices. When a person feels a pain sensation, this sensation is not a single process. Indeed, rather than being only a neurophysiologic event, pain is the result of many systems interactions, which are called social, psychological and cultural (Kleinman, Good, Brodwin, Good, 1992:1-8; Helman, 2001: 128). Supporting these concepts, according to Morris (1991:1) “pain is in the intersections between mind, body and cultures”.

Moerman (2002:100) shows that “the best biological system which displays impressive meaning responses is the body pain system”. Different people (between and within) any cultures have different expectations about life, including different pain experiences. These differences give different meanings about pain itself and make pain systems work differently, although biological processes have general explanations of how pain can occur.
Psychological explanations (Smith and Bond, 1999 in Glasmann, 2000:409-411) noticed the role of culture on shaping human perceptions. The differences of cultural concepts on pain explain why in some cultures specific events are experienced as “painful”, while in other cultures these are perceived as nothing. Culture, that is to say, “a set of shared meanings within a group”, clearly affects the individual in a particular society at looking at and perceiving pain. The shared meanings about the concepts of pain can build based from the society’s experience with pain.

An ethnography study (Zborowski, 1952, quoted in Helman, 2001:134-135) showed the differences of pain experiences among people from three different ethnic backgrounds. There are different experiences of pain in three groups of patients at Veteran hospital in New York City (Italian-Americans, Jewish-American, and Protestant Old American). The first two groups are more emotional in their reactions to pain, and experienced more pain sensations than the last group. Even though the first two groups have this similarity, they have different concerns on pain. The Italian-American is concerned about to pain sensation itself, while the Jewish patient’s concern is with the meaning and significance of the pain sensation. For the Italians, their occupation and economic background is leading them to these concerns; for the Jewish patients their pain concern is based on their concentration on the implications of pain in the future. In contrast, the last group (Protestant Old American) has the tendency to be less emotional when dealing with pain. This tendency is the results of their ideal paradigm of how American people should react to pain. These three groups showed that pain is experienced differently among the groups, and that pain has different meanings to them.

Related to studies conducted on pain, Smith and Bond, 1999 (in Glasmann, 2000:411) suggest being more aware when a researcher tries to observe and interpret the term “pain”. The word “pain” should be interpreted the same way as the people in a particular society interpret what it is. The ways of pain interpretations should be done within the cultural context where the study will be conducted.

Pugh (in Helman, 2001:130) has found that people in Northern India have many interpretations of the “pain” term. In order to express the “pain” term, they use some metaphors or words that come from their local images or their everyday life. When they
express the pain, they do not directly use the word "pain" but instead use another word. For them, pain is interpreted in terms of the situations related to the physical and the physiological aspect at the same time.

These entire descriptions show that pain is culturally constructed. Pain and culture cannot be separated. A study that will focus on pain should be understood through the cultural ideas, concepts and perceptions on pain.

**Pain behaviours**

Pain behaviours are the reactions, the expressions and the responses due to the pain (Engel, in Helman, 2001: 128). These behaviours could be appearing as facial expressions, grimaces, activity, sound and words. These behaviours lead the pain, which originally is invisible and cannot be grasped, to be recognized by the people surrounding the person in pain.

There are differences in the pain reactions for those who have a similar physical trauma (Glassman, 2001:75). These differences of the reactions and the behaviours due to pain are influenced by cultural background (Helman, 2001:58, 131; Zborowski, 1969 in Kleinman, Good, Brodwin and Good, 1992:1). Scarry (1985:5) implies that different cultures have different meanings of how pain must be dealt with. Some cultures have the tendency to express and verbalize the pain, while other cultures have the tendency to suppress the expression of pain. This means that pain is not only attached to the individual but is also related to society, which in turn is related to the meaning given to the pain. Similar to the distinction by Scarry in Helman (2001:128) distinguishes two kinds of reactions to pain sensations. The first reaction is the involuntary reaction that is "the instinctual reaction, such as pulling away from the sharp object"; this reaction can be called "private pain". This kind of behaviour is indicating that the person in pain does not want to show his/her pain to other people. The second reaction is a voluntary reaction, which is "removing the source of pain and taking action to treat the symptoms (by taking aspirin for example) or asking another person for help in relieving the symptoms". This reaction can be called "public pain".
Whether pain is considered as “private” or “public” depends on how a culture gives meaning to the pain. Helman (2001: 129) for instance, notices that the decision to make pain public or private is influenced by which pain is regarded as normal or abnormal. He gives the following example: in American context, it is considered normal for women to have dysmenorrhoea (pain during menstruations). Because it is considered a normal pain, the women express their dysmenorrhoea publicly. The notions of private and public pain are sometimes influenced by gender perceptions. For example, in some societies men are supposed not to express pain rather than women. Thus, Helman (Helman, 2001:128) concludes “Therefore an absence of pain behaviour does not necessarily mean the absence of private pain”. This concept of pain can be applied to labour pain: how women behave and react to labour pain depends on the meaning behind the pain, and it is shaped by the society in which the women live.

1.3.2 Labour concepts from cultural point of views

Many studies (Jordan; Kitzinger, Ludovici, Abraham Van der Mark) show that labour is an important event in human life. “Childbirth is an intimate and complex transaction whose topic is physiological and whose language is cultural“ (Jordan, 1983:1). Reactions of the woman during labour are influenced by social and cultural factors (Jordan, 1983:1-3). Every woman in the society has her interpretation about childbirth (Jordan 1983:1; Kitzinger, 1989 in Tejlinglen, Lowis, McCaffrey and Porter 1999:8). The interpretation of the labour events can be seen from the preference for helper during labour. Helman (2001:119-120) gives some examples: in Western society, the labouring mother is usually accompanied by one or more helpers; conversely, in other cultures women tend to give birth alone. In one culture, for instance, husbands are allowed to accompany their wives, while in another culture husbands are not allowed to do such things (such as in Chinese groups in which “the woman’s bodily product is dangerous and polluting for men”). Helman (2001:121) gives examples that “in the non-industrialized world, giving birth in the lithotomic or supine position is not at all common, or in other cultures, the women stand, squat or sit reclining against something or someone in the latter stages of labour”.

Ludovici (1937:8) and Abraham Van der Mark (1993:173) demonstrated that there are two schools of thought on the subject of childbirth. **First,** childbirth is an illness and a painful process. This theory assumes that “Pregnancy is essentially a state of disease lasting nine months, and that childbirth, with its sequel of a few weeks or a life time of invalidism, is the catastrophic climax of the disease” (Ludovici, 1937:8). These views will influence the society’s ways on treating the mother during pregnancy and labour. **Secondly,** childbirth is a natural process, painless and even pleasurable. Unlike the first theory, this second theory argues that “this abnormality is not essential and can even now be removed”. These views think that labour is the natural process for women. Breslin (2002) in his introduction wrote: “pleasurable experiences can be strong enough to blunt the fears of deprivation and death”. These two different views are related to the feeling of pain and death that frequently appear in the labour process. Thus, these views are influenced by the cultural background of the mother, and have different expectations and meaning given to the labour process.

1.3.3 Labour pain from cultural point of views

Related to labour pain, some studies show that for some ethnic groups childbirth is painless, and there are no complaints about labour pain (Behan, 1914; Dick-Read, 1933, 1953; Velovovski & associated 1950, reviewed by Bonica, in Wall and Melzack, 1984: 377). In contrast, other studies show different results which indicate that there were complaints of labour as painful events. The presence of labour pain is also found in the ancient inscriptions of Babylonians, Egyptians, Chinese, Hebrews and Greeks (Ford, 1945; Freedman & Ferguson, 1950; Jochelson 1910; Levy-Strauss 1956; Bonica, 1953 and 1967, cited by Bonica, in Wall and Melzack, 1984: 377). These different results show that culture has an important role in shaping the presence of labour pain and pain behaviour. These studies indicate that the meaning of labour pain is connected with the cultural views on labour and pain in general.

Studies which recognized labour pain showed that the intensity of labour pain is extremely higher than other pains, such as back pain, cancer pain, phantom limb, or post-herpetic neuralgia (Bonica in Wall and Melzack, 1984:378). Related to this
intensity of labour pain, primipara\textsuperscript{3} experienced labour as being more painful than multipara\textsuperscript{4}. Related to the primipara and multipara experiences, comparative studies have been done that were conducted in two different ethnicities (Jewish and Bedouin). In both ethnic groups, primipara mothers were reported to have more pain than multipara. The study which was conducted by Sheiner, Sheiner, Vardi, Moshe Mazor, and Katz (1999:299-305) shows that on one hand, Jewish women experienced in labouring feel more painful than Bedouin women, while on the other hand, the helper (who came from Jewish ethnic) reported that the Bedouin women seemed to have a more painful labouring process compared to the Jewish women. These different interpretations and responses can support the argument that pain is being influenced by cultural background.

There was one study, conducted in West Java, Indonesia (Malonda, et al), which found that the roles of culture on shaping fear and anxiety in pregnancy and labour can lead to labour complications. The study combines both qualitative and quantitative methods. The study found two compound factors that were shaped by social and cultural aspects. These compound factors affect the mother in pregnancy and labour. The first compound consisted of cultural expectations directed to the mother, cultural knowledge on the mother’s capability to take care of the baby, and the relationship quality between wife and husband. The second compound consisted of the mother’s views on pregnancy and labour as a critical phase, cultural knowledge in pregnancy and labour preparations, and the mother’s social friendships. This study showed the important meanings of the cultural roles that influence the mother during pregnancy and childbirth.

13.4 Brief profile of the Betawi society in Jakarta

The history records show that before Islamic values came, the people believed in animism and Hinduism. Thus, even though now most of the Betawi people believe in Islamic values, on the practical level, however, Animism (believe in the power of ancient spirits) and Hinduism influences are still unavoidable. \textsuperscript{3}The new ideas and

\textsuperscript{3}Primipara is the woman who have first labour
\textsuperscript{4}Multipara is the second labour, third and so on
thoughts began to divide the practice of Islam into ‘old’ and ‘new’ practices (Shahab, 1994:72). The former refers to the old practices which are highly influenced by Animism and Hinduism, whilst the second is the one which wants a reform, to purify Islam from Animism and Hinduism influences”.

Ethnographic study of the Betawi society shows that there is no kingdom in the Betawi society. Social hierarchy is absent. They live in simplicity and togetherness. They have the slogan of *gotong royong* (the activity to help each other in the community, and new people who come to the community). They do *gotong royong* for every kind of event, such as the building of a house, cleaning the village, arranging a wedding party, and the childbirth process. If there is death or natural disaster, they will be the most spontaneous people to help each other (Agoes, 1999:70-80).

Marriage concepts in the Betawi society is considered more as a family event rather than just an individual event, marriage is not seen as only an engagement of two individuals, but also as an engagement of two families. This means that every person in the Betawi society is influenced by his or her family and society, including decisions on important step in a person’s life. The experience of individual events as family or society events does not only concern marriage attachment, but also about other phases of the individual’s life. This society has many traditions and ceremonies in every phase, such as pregnancy, childbirth, circumcision, *akikah*\(^5\), school graduation, moving to a new house, important days, death ceremony and etc. (Saputra, Ardan, and Sjafi’ie, 2000:1-119).

The Betawi society is one of many societies in Indonesia that gives big concern and respect to the women who are pregnant or labour. They think that this process is very important in preparing for the new generation. Good preparations in pregnancy periods are important in order to prepare the baby to be a strong, healthy and good person (Saputra, Ardan and Sjafi’ie, 2000:86). One of the important points is taking good care of the pregnancy and praying to God. The pregnant women are forbidden to kill animals, to think badly or to do gossiping or to take a bad attitude. Some food, such as

\(^5\) *akikah* is a ceremony when the baby were just born by cutting the baby’s hair and killed a goat or sheep to be prepared as food.
meat from a sick chicken, pig, unhealthy fish, Ambon banana, pineapple, jackfruit and the content of an animal’s abdomen are forbidden (Saputra, Ardan and Sjaf’i, 2000:87). There are traditions for pregnant women to bring sharp things, such as small scissors or razor blades etc. The pregnant women put the sharp things behind their clothes with some pins. Sometimes they also bring the broom of a split coconut when they go out, to protect the baby from invisible things such as a “bad spirit”. (Saputra, Ardan and Sjaf’i, 2000: 87-88).

In the first two months of pregnancy, the pregnant woman may have a unique symptom which is called ngidam. Ngidam means a desire to eat some special food or something that is not common. The Betawi society believes that if these desires are not fulfilled, the baby will always have the slobber symptom (dribbling or running at the mouth). The person who has the responsibility to fulfil the desires is the husband of the pregnant woman. The society will blame the husband if there are any requests that cannot be fulfilled completely (Saputra, Ardan and Sjaf’i, 2000:86).

There are also some traditions and ceremonies during pregnancy, such as ngirag and nuju bulan. Ngirag is the ceremony in which traditional birth attendants will do reposition of the baby in the womb to the good position that they think will ease the labour process. In the ceremony, the TBA (traditional birth attendant) will do a massage to the entire body of the mother. This ceremony continues with the nuju bulan ceremony. A nuju bulan ceremony is performed when the pregnancy enters the seventh month. Interestingly, everything in that ceremony is related to the number seven. The performing dates usually are 7, 17 or 27 on the lunar calendar, and the food also consists of seven kinds, such as rujak (Saputra, Ardan and Sjaf’i, 2000:93; Gularso in Swasono, 1998:267).

After the labour process, the family of the post partum mother usually conducts selamatan. In this ceremony, the family will make nasi kuning (yellow rice). During selamatan they pray together and present food to the neighbours in a particular area.

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6 In Betawi society, slobber symptoms will happen to a person who has dream or expect something but she or he can not fulfill it. This symptom will be over if the dream comes true.
7 A Special food that consist of seven things such as fruits
8 Sticky rice which has yellow colour cause by the use of turmeric, with meat and chicken (Gularso in Swasono, 1998: 271)
This means that they feel happy for the baby who has just arrived to this world. (Gularso, in Swasono, 1998:271).

1.4 Research questions

The objectives of this study are to gain an in-depth understanding on the perceptions and experiences of labour pain of Betawi women, and to explore the roles of the Betawi community’s norms and values on labour pain in the process of shaping those perceptions and experiences. To obtain these objectives the following questions need to be answered:

a. How do Betawi women perceive and experience labour pain?
b. How do Betawi women express and communicate their labour pain to the family, health provider and others?
c. Which cultural values influence the Betawi women’s perceptions, behaviours and experiences on labour pain?
d. Are there any changes in the perceptions and the experiences of labour pain in the previous generation of the Betawi community compared to the present generation, and if any, how can these changes be explained from cultural point of views?

The following themes will be addressed through various questions and observations during the fieldwork.

a. Betawi women’s characteristics (personal situations): Age, education level, past experiences (parity)
b. Perceptions and experiences of labour pain
   - Betawi women’s perceptions of labour pain
   - Betawi women’s experiences with labour pain
   - Betawi women’s behaviours related to labour pain
c. Family and society factors
   Religion, norms and values in the Betawi community related to general norms and values related to pain in general, labour process and labour pain concepts
Chapter Two
RESEARCH METHODOLOGY

2.1 Type of study

This study uses qualitative approaches. It will attempt to explore how Betawi women in the fieldwork area perceive and experience labour pain. The role of norms, values and the influence of environmental changes to that perception and experiences also will be taken into consideration.

This small scale study has been carried out in six weeks (22nd of May 2005 until 30th of June 2005). This study does not represent the Betawi community population in Jakarta. It is only focusing on perceptions and experiences of a few post-partum mothers in one specific area in East Jakarta. Their husbands, close relatives and some community leaders were also included in the study, to get a general impression on the norms and values in that specific area.

2.2 Study site

The location of the fieldwork is in one of the sub-districts in East Jakarta. Based on a formal letter from The Governor of Jakarta Province No. 1227, from 1989, the width of that area is 190, 30 hectare squares. It consists of rice fields (7, 2 hectares), orchid gardens (2, 6 hectares), houses and police dormitory (5, 72 hectares) and others (public street, empty land, and so on). The Betawi people in that community called themselves orang Betawi pinggiran (outskirt Betawi people – my translation), because their area is near the border of Jakarta and West Java. This group has similar general norms and values compared to the Betawi people in the centre, but they have a different dialect in language.

The number of individuals registered in this sub district is approximately 14186, of which 7040 are male and 7146 are female (based on statistical data in February 2005). Based on the information from the sub-district government, the Betawi population is
more than seventy percents of the total population in the area. In that seventy percent composition, almost one hundred percent are Moslem.

<table>
<thead>
<tr>
<th>Religion</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Moslem</td>
<td>5167</td>
<td>6554</td>
</tr>
<tr>
<td>Protestant</td>
<td>423</td>
<td>432</td>
</tr>
<tr>
<td>Catholic</td>
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<tr>
<td>Hindu</td>
<td>48</td>
<td>53</td>
</tr>
<tr>
<td>Buddhist</td>
<td>331</td>
<td>441</td>
</tr>
</tbody>
</table>

The - sub-district where I did my study has fifty RTs and eight RWs (based on statistical data 2003). A RT or Rukun Tetangga is the smallest component in the Jakarta Government structure. In reality it is not included in the formal structure. This component usually consists of more than fifty households. There is no office- or work time schedule for people who are involved in the management in this area. A RW or Rukun Warga is a component above RT which consists of several RTs. This structure of RW is one level below the formal level of sub-district of governmental structure. The RW also still is considering as being an informal structure.

Looking at the composition of the Betawi people in the sub-district, I chose only one RW, with the biggest accessibility and possibility to conduct a six-week research. If I chose one RW, my study site will approximately have more than four hundred households. The population mobility and the area structures of the Betawi people in this RW are considered to be important in this study. I stayed in one part of the RT during my field work.

2.3 Research participants

During the fieldwork I had been interviewed some groups. The first group was the community leaders group. I did interviews with seven community leaders including

9 Note: the general information of all participants appear in the Appendix C
their wives. The purpose of these interviews was to explore the community’s norms and values, especially the norms and values related to labour pain. The second group was the religious leader group, especially the Islamic leaders in that area. Islamic values description was collected based on the explanation of three religious leaders in that area (two women and one man). The third group was the group of post partum mother, as the focus of this study. I met with four post partum mothers in one RT and another post partum mother in another RT. The brief stories of these five post partum mother related to their perceptions and experiences of labour pain present in the chapter four. The last group was the community members who attend the FGDs (Focus Group Discussion). Total of the audiences of the FGDs were twenty-four people which divided into four FGDs.

2.4 Data collections process

Below are the processes of data collection in the field work. In generally I used two methods, interview (both semi-structures and in-depth interviews) and focus group discussion. General and daily observation accomplished these two methods.

I spent almost three weeks to arrange legal permission before I could reach the participants. In the first week I was not allowed to do a lot of things. I used this time for general observations, and looked for some general information about the area. Luckily, I got the legal permission letter in the second week.

In the first level of my research, I met with almost all of the community leaders in the RW. Even though I already had the legal permission letter from the sub district office, I also needed informal permission from those community leaders, since it considered a problem if a stranger walks around in the area without the community recognizing the person. In Indonesia cultures this is known as “Ketok pintu” (knocking on the door). Considering on my security and my safeties (because I am a girl), one of community leader helped me to find a Betawi family who have extra room for me to stay during my fieldwork. When I was staying in this house, I tried to do close observation on daily activities of the community.
After the first level, I started to build relationships with those five post partum mothers. Sometimes I used informal conversation while following their daily activities, but I also did some formal interviews. During the formal interviews, two of them did not allow me to use a tape recorder. Although I gave explanations about the tape recorder, they still felt shy. I respected their decision and tried to follow their rules. For those who allowed me to use tape recorder, I tried to make the conversations as natural as possible so they would not be disturbed by the presence of the tape recorder.

During my interactions with these five post partum mothers, I also met with the mother and grandmother of the first post partum mother, a cousin of the second post partum mother, and the husband of the fourth and fifth post partum mother. Concerning the third post partum mother, I just met with her close neighbours. Beside these five post partum mothers, I also met with two pregnant women. Both of them were having their first pregnancy. I did not talk too much about my research to them, because I worried that they would be nervous. In fact there were some mothers in other RWs who wanted to share their experiences with me, but I could not meet with them because of the time limitation of my fieldwork study. I feel sorry about it. I hope someday I will have a chance to meet and to share with them.

Four times of Focus Group Discussions (FGD) were also held to get a general impression on how the Betawi women in a group look at labour pain. The FGDs held in June, 7, 12, 17, and 19, 2005. The questions about the possibility of changing perception were asked in those FGDs. The events that I chose for the FGD were community events such as pengajian\textsuperscript{10}, ngerumpi\textsuperscript{11} or paguyuban\textsuperscript{12}. Three FGDs were presented by a female, and one FGD was presented by a male. Through these events I could meet with Betawi women from several generations. I separated my participants among three generations: teenager, adult and old woman. Unfortunately, I could not participate in the labour process of a Betawi woman in that area, because no one did labour during the time of my fieldwork.

\textsuperscript{10} pengajian is a praying ceremony that is done in some periodic time, usually per week or per month. It depends on the agreement in the area. Males and females usually have separate events

\textsuperscript{11} ngerumpi is an informal discussion. It usually is done in the evening, after having finished housework

\textsuperscript{12} paguyuban is an event of sitting together and speak about one agreed topic.
In everyday conversations, I tried to use their daily language and tried to speak their dialect. They like jokes. I tried to make jokes but I did not succeed. One of my weaknesses is that I looked too serious, contrary to the jokes they made to me. Sometimes they laughed because I was using the wrong sentences to express something. For the first time, I felt shy and uncomfortable. I thought that my mistakes would not have a good impact on the relationship. But in fact I got some benefit from it. They explained everything to me, like parents who explain something to their daughter. My single status also brought me some advantages, because they thought that I do not know anything about labour, especially about labour pain. They tried to teach me how to deal with labour pain, for later when I have my own labour.

I experienced difficulty related to data collection. I had to sustain my awareness all the time, which required a lot of energy and concentration. This is because important data not covered by the interviews could come from ordinary daily conversations and activities. Another difficulty includes the documentation process. The low capacity of electricity in the area caused difficulties in using my laptop. I used a lot of papers to write down everything. Moreover, almost all of the pictures that I took with my camera failed. I only could keep a few pictures of the last week of my interactions.

During the data collection process I did not tell my original profession as a midwife. Instead I used my identity as a student. It made me feel more comfortable in doing the research, and minimized the bias of the data. I finished my interactions by doing data clarifications. I asked if there was any data that cannot be used in this research. Almost all of them allowed me to use all of the data obtained in the context of this research.

2.4 Processing and data analysis

I started to process the data on the same day that they were collected. First, I tried to make the transcript of the interview based on ordinary Betawi language. Then this Betawi language was translated into the English language. I realized that when I change the language, it will make the meaning a little less accurate. I tried to minimize this aspect optimally.
After I finished all of the data collection process, I continued to process the data by organizing and coding it, based on the research themes in the first chapter. The data was analyzed after the whole data had already been systemized. I focused on the five Betawi post partum mothers. I also used the clarifications from the people that are close to them, like their husband or their mother. I used the other information from the community leaders and other people. These findings helped me to broaden and to interpret the story. The analyzing process was based on all of the interviews and observations during the time of my fieldwork. I tried to minimize my subjective influence as a researcher on presenting the data, especially since I translated the local language to the English language.

2.5 Ethical consideration

Ethical rules were used in writing the proposal, during the fieldwork, presenting the fieldwork findings and writing the whole thesis. Their confidentiality is an important thing that needs to be guaranteed. I tried to approach all participants of this study with high respect. I tried my best to reduce research activities that can be harmful either physical or mentally to the participants. I tried to ensure each participant's security as an individual who has the right on privacy as a human being.

Informed consent was asked of all of the participants before the interviews started. The clarifying phase was done at the end of the field work, to ask whether they refused some statement to be used in this research or not. During this study, all of the information was fully explained both by verbal and writing techniques. Data collection was used only in the framework of this study. There are some data outside the framework of this study that has been used based on their permission. Finally, each participant has the right to withdraw from the study at any point, and the documentation related to the person then will be dismissed.
Chapter Three

GENERAL NORMS AND VALUES, AND THE SPECIFICATION OF THOSE NORMS AND VALUES RELATED TO PAIN, LABOUR AND LABOUR PAIN.

Note: I write this explanation based on several sources at the spot of the fieldwork area. The information sources are some community leaders, religious leaders and traditional Birth Attendants. Some results of focus group Discussions are included in this part. I also include my observation and my fieldwork notes.

For ethical consideration I used fake names.
Comlead = community leader (both formal and informal)
Reglead = Religious leader

3.1 General norms and values for the Betawi community in the fieldwork area

“A norm is an ideal cultural pattern that influences behaviour in a particular society” and “a value is culturally defined as an idea of what is true, right and beautiful” (Nanda and Warms, 2002:83).

By understanding some of the general norms and values that are present in this Betawi community, I wish they help to be a context for understanding the subject of this study, which are the post partum mothers. General norms and values that are described in this chapter are not the full collection of norms and values that are present in the Betawi community where I did my research. Because of some limitations, I only can grasp some of them, which I think have a close relationship with the concepts of pain, labour and labour pain in this community.

3.1.1 The basic values in the fieldwork area

The Betawi people usually give a name to their place based on the history or the basic life principle in that area (most members of the Betawi community in Jakarta usually have another name beside a formal name that is given by the government). This Betawi community also has this habit, and they named their area Kampung Malaka or Malaka Village. The oldest couple in the area (with ages of almost 110 years old) said that the name already existed when they were born. Some of the community leaders agree that historically “malaka” comes from the word of “melak” which means plant or invest. The meaning of the name is that everything happens based on our behaviour. “If we plant good seed, the result also will be good. If we plant bad seed, the results also will be bad” (statement of Comlead number two). They believe that life is like a “mirror”. 
"Everything will come back to us" (statement of Comlead number seven). This value is one of the basic important values for the Betawi community in this area.

The other basic value is the self concept as a "social human". The statement that I always heard during my research was thinking more about the other more than themselves as an individual. The Betawi people in that area use the word "kita" (referred to as "we" in English) to call her/himself. They use "we" as a representative of "I". When they behave, speak, or do something, they always think about what the other people may think about it. Sometimes they cancel their intention because of worries about what other people might be saying.

3.1.2 Tradition or religion

Beside the principle that is derived from the history of the area's name, the norms and values are also being represented by their daily life activities. In this Betawi community, norms and values were created based on ancestral and religious values (most of the Betawi people who live here are Moslem). Similar to the other Betawi community in another part of Jakarta, the Betawi people in this community mix their Islamic and their ancestors' values. They believe in the Islamic values, but these values are not fully appearing in their life activities. In some aspects they still have close relations with their ancestors' values. All of the community leaders that I interviewed realize that there are some ancestral values which differ from the Islamic believes, but they said they cannot leave these values because they have a strong root in the community.

During my field work I observed some of the Moslem families having pangkeng and doing a ritual offering. Some community leaders confessed that there are also other ceremonies being held to respect the ancestors. There are different opinions prevailing between the young and old generations. The young generation tries to leave those

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13 These values already existed a long time before the Islamic one
14 pangkeng refers to a place for putting rice or for doing special ceremonies for an ancestor. Sometimes they put sesaji. In the past every house had one room for pangkeng
traditions and to follow totally the Islamic religion, whereas the old generation wants to keep them.

Reglead I: "(...) I do not agree with them. But it is too difficult to argue with our family. There was an event when I gave a party for one of my children after he got circumcised. My family pushed me to make ritual offerings. I just followed them because I did not want to hurt their heart. I do not believe it but I cannot do anything".

This situation becomes an important issue because it relates to all aspects of their lives and how they put meaning on something. These combinations of values also attach to the process of labour and childbirth. On looking at labour or childbirth and how to deal with it, they also combine those values. More discussion on this issue will appear in the sub-part of this chapter which discusses norms and values related to labour and labour pain.

3.1.3 Family interaction and daily life

Other general norms and values related to labour and childbirth are how the Betawi people live and have interaction with each other. Their way of living will influence the way they deal with something. To give a general impression about their daily life, I describe how Betawi people in this community live close to each other. This system is being abandoned by the other Betawi community in another part of Jakarta, due to the land and economic problems. The position of the research area, which is near the border of Jakarta and West Java, gives the Betawi people in this community the capacity to minimize the process of demographic transitions that occur in most of the Jakarta area.

In this area, most of the Betawi families still live in big compounds. "If we stay close to each other we can know if our family has rice or not. If something happens, we can help them soon" (statement of Comlead one’s wife). There is a proverb in this community: "Makan enggak makan kita kumpul" (Eating or not eating, we must stay close to each other). A family compound can be observed from the composition of its houses. The children usually build their houses surrounding their parents’ house. The ranges of these houses are not really far. Sometimes the walls of their houses adhere to each other. They also have an open space in front or behind the house. In the past they
used to put bale-bale\textsuperscript{15} in the open space, now they use terraces and make it from floor tiles. This open space makes it possible for everybody to stay. Usually every afternoon, after they finish from their work, some Betawi women meet together in this open space, or sometimes in the poskamling\textsuperscript{16} near to their houses. In that place they share stories about everything. For the men, they do the same thing in the night while they do siskamling (local security system; they make shifts every night to guard the place). The house compositions and the interactions of the people create bigger possibilities to influence each other. This situation also means that there is high social control of each other.

For the Betawi in this community, the definition of "family" is broader than only blood relationship. Their family also include their neighbours, their close friends and the people who are kind to them. "If with other people we can behave like to our family, you can imagine how our relationship among our original family is" (statement from Comlead numbers seven). These impressions also come from the other community leaders in that area.

Related to the family themes, family structures follow the father line. But sometimes there is a case in which the structure follows the mother line. It depends on the situation of the couple. This aspect implies the relationship between husband and wife. Even though there is clear description of what are the husband's and wife's roles, it is not excluding the possibility of modification in reality. For decisions related to the primary family member, there is a big possibility to bargain among the family members.

### 3.1.4 The value of children and parent – children interaction

The presence of children will influence a mother's perception about the labour process. The relationship between children and parents in the Betawi community is also important. We could understand how the children formed their values from this meaningful relationship. These values will be used for the rest of their life. This is an important aspect, since each post partum mother is also a daughter of her parents.

\textsuperscript{15} bale-bale refers to a big long and wide chair made from bamboo
\textsuperscript{16} poskamling refers to a small public place. The place is also used for the men in the night, when they watch the security of the area in a shift system.
Another important value that likely is related to the labour and childbirth process is how parents put values on their children. Comlead number six said "(...) having children is valuable but it also is a big responsibility. It is a trusteeship or mandate from God". The parents-child relationship occurs as soon as the child is in the womb of their mother. This can be seen from ceremonies and traditions that already start in the first month of pregnancy. After a child is born; the parents give the child education. From the community leaders I learned about another role of the parents. Parents have obligations in fulfilling material and immaterial aspects to their children. For the parents in these areas, the education related to religion is the most important thing apart from ordinary school. I observed that every RT has a (small) mosque, and usually every RW has one big mosque. Also, the parents are the most important people to influence their children's perspectives. The parents will tell the children how to be a good member of the community. This relationship continues until the children become adults. Even once children have become adults and got married, parents continue to influence their children’s’ life. I observed that the Betawi people in the research area did not leave their parents’ house until they got married. I also observed some couples living together with their mother or their mother-in-law. The composition of more than one family living under the same roof brings a unique atmosphere into the community.

The Betawi people in the community have different values concerning a baby compared to other age levels. For them, a baby is pure from sin. That is why the baby needs a lot of protections and love. They also think that a baby is more vulnerable to being disturbed by an invisible thing, like a ghost. Thus, they give special protection to the baby, more than their protection to their other children.

In the past, Betawi people in this community had many children. Some of them had more than twelve children. One of the community leader in that area said that in 1960 or 1970 there was a proverb "banyak anak banyak rezeki" (more children brings more luckiness and livelihood). He explained that this proverb was appropriate in the past because most of the parents were farmers, but it is not in the case nowadays). In the past, the land needed many workers. Nowadays the average number of children owned by parents of 25-40 years old in the community is approximately three to four. Some
community leaders make a ‘big note’ to this situation. They say that although the number of children is less than before, it does not mean that the meaning of the children in the family is changing. “Life will not be complete without the presence of children” (statement of one comlead). They say that children are the key to continue their blood line. The children also can increase the family’s prestige in front of the community. The parents’ dignity depends on the children’s behaviour. “Life is very difficult without any children” (statement of one comlead). “I cannot imagine what would happen in my old age if I did not have any children” (statement of one comlead).

Related to the gender of the children, I did not find any value differences in looking at a boy or a girl. Both of them are not better compared to one another. I also observed some couples who felt ‘not complete’ because they only had a son or a daughter. They said they would be happier if they could have both, son and daughter. But I also saw that even though they have this desire, these couples did not talk too much about it. On one level, they feel already lucky to have a son or daughter. They said they were already happy, but they would be happier if they could have both son and daughter. Parents teach their daughter to become a good Moslem woman. They provide the same chance as with their son to have a proper education. For the daughter, they also provide the skills to become a good housewife. For the son, it is similar. They teach their son to be a good Moslem man. They also provide the same skills as with their daughter to help with housework, but the skill to be a good leader for his family in the future is more important.

Comlead 2: “(...) for the children, if the parents are angry to them, they must stay still and listen to their parents. For the parents, we have obligations to the children: give them proper teachings (including lesson on religion), good housing and food. When they are becoming adults, we must prepare for them the wedding ceremony, and make house for that new couple”.

For Betawi children in the community, parents are everything. The children pay high respect to their parents. They should obey every command that their parents ask them, without any objection. I rarely heard the word “no” from children. Even though sometimes they do not agree with their parents, they will hide their thoughts and not speak about it. These values are closely related to the values of their religion and their ancestors’ values who taught them to pay high respect to their parents.
3.1.5 General roles for the woman

My note on the roles of women in the Betawi community is based on my observations and interviews. In this part I discuss general roles for married adult woman in the community.

In my observation I found that almost eighty percent of the wives in the community did not work outside the house. They usually work as a housewife. Besides taking care of their house and children, they are active in community events such as *pengajian*\(^{17}\) or *arisan*\(^{18}\), and a few of them are also active in *senam*\(^{19}\). The wife of a community leader is also active in regular community meetings. Some of them that have a job other than housewife usually choose to do the work at home (home industry): "(...) we cannot leave the house for a long time because we are worried about our children. We do not have a house maid. Who will take care of them instead of me?" (Statement of one comlead's wife). Thus, besides taking care of the children, those wives who do not have extra work besides housework will have plenty of time to meet their neighbours and friends and have conversations among each other. In these informal conversations, usually they share every story including their experiences on labouring and childbirth. I made a summary about the roles of women in this community, during my fieldwork time. The summary goes as follows:

- a. Being a wife for her husband
- b. Being a mother for their children
- c. Being a daughter for their parents
- d. Being a woman as an individual
- e. Being a creature of the God

For them every role has consequences and roles are related to each other. Sometimes the roles cross each other and cannot be performed at the same time perfectly. There is a trade-off in certain points. Sometimes one role is more important than the other and

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\(^{17}\) Praying together and holding some religious events. These events usually occur in a period of times. It can be per week or per month. Male and female usually have separate events.

\(^{18}\) The regular social gathering in which members contribute to pay a certain amount of money, and take random turns to win the sum of all the collected money. If there are 12 members than there are 12 events that will distribute the collected money fairly.

\(^{19}\) Exercise or aerobics. Usually held in a public place.
receives higher priority. For example, the wife of community leader number four decides to stop from working when she got her first baby. She gave her role as a mother a higher priority than her desire to work. This system of elements is very important for analyzing the labour pain in the coming section, because this priority system is closely related to the idea of dealing with labour pain.

3.2 The norms and values related to pain in general for the Betawi community in the fieldwork

3.2.1 Perception on pain in general

The Betawi community in my fieldwork perceive pain as being related to sickness or something wrong in the body. One note that I got from my interaction with the community is the definition of "body". The concept of "body" for the community has a complex meaning. First, the "body" is not only related to themselves as individuals, but including all of the people who they care for and feel responsible for. For example, parents perceive their child as a part of their body. If there is something wrong with the child, the parents could feel some pain. For this kind of pain, they cannot show exactly the location. One of the Comleads said, "if my boy is sick, I feel dizzy and pain in my chest" (they perceive that the location of the heart is in the chest). Second, the "body" is related to both physical (visible) and non-physical (non-visible) aspects. Each of these elements needs different necessities. The physical element needs food, sleep and so on. The non-physical element also needs "food", such as religious speech, family care, and the presence of children and so on. Both of these elements are interrelated to each other. If they have a non-physical problem, their body will also feel it. If they have some injury, they will feel great pain in their mind.

Comlead 1: "(...) if we have some problems, we feel pain inside our head. But sometimes pain exists without a reason. It is a mystery. There are so many secrets related to it that we do not know it exactly. People usually relate stress to some condition of sickness in our head. If we say we are in a "stress" then it means we feel "dizzy". Most reasons usually come from economic problems".

Another important value of the concept of pain in general is related to the "priority of the pain". I noticed that sometimes a person in the community has more than one pain at the same time. Thus, they must choose among the existing pains to experience with.
Which pain do they prefer to have? Based on my observations and explanations from some Comleads, they will usually choose a kind of pain that has less meaning compared to the other pain. It can be derived from the statement of one of the comleads: “For my children’s future, I am willing to do everything, kepala jadi kaki, kaki jadi kepala (head becomes legs and legs become head\(^{20}\)”). He said that parents choose and are willing to have more pain for themselves, to prevent their children from pain in the future. Related to labour pain this element is an important aspect, because labouring will deliver a baby which has high meaning in this society.

Beside these concepts, I found that the Betawi in the community make some categorization related to pain in general. Based on the interview with the community leaders, all of them gave explanations saying that pain has two kinds of forms. They separate the pain definition based on the location from the pain occurrence. They are two kinds of pain: First is sakit lahir (physical pain). Sakit lahir is related with a biological aspect. It relates to ordinary or visible diseases. People can easily recognize it. However, there are some points to this kind of pain that need to be addressed. First, this physical pain can be caused by ordinary things (like germ, worm, etc) and non-ordinary things (magic, ghost). Second, not all kinds of physical pain can be showed or told to other people. There are certain physical pains that they felt shy to tell about. This form of pain usually is related to the invisible organs. The exception is made only for labour pain and for children (like in the circumcision event). Even though it is related to an invisible organ, they talk about it freely. Second is sakit batin (non-physical pain). Sakit batin is related to live pressures or live problems. This form of pain also is related to the concepts that a “body” is not just an individual body and can also be non-visible. The community leaders said that this kind of pain is usually being hidden by being cheerful. “No body know exactly if someone has this kind of pain”. They also do not clearly explain how they cure this kind of pain.

Both physical and non-physical pain are considered to be a normal pain if it is not caused by invisible things such as a ghost, magic, spell etc. But if it is caused by something invisible, it is considered to be an abnormal pain. Abnormal pain means

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\(^{20}\) A saying, which means “Whatever the cost, it will be paid. Even if our head becomes feet and feet become head.”
that the pain does not belong to the person who is in pain. This kind of pain comes from someone who sends the pain to that person.

Comlead 1: (…) there is something called guna-guna\textsuperscript{22}. When somebody hates or is jealous to someone, sometimes they will send guna-guna to that person. To cure it, the doctor is not enough. It needs another way of curing”.

There are different strategies to deal with normal and abnormal pain. For normal pain they have the alternatives of using medical help or local medicines. They said that for abnormal pain, a special healer is needed to cure it. Related to labouring and labour pain, they said that probably the dukun beranak\textsuperscript{22} has ‘white magic’ (good healing magic) in order to help the labouring woman. I do not know exactly, but I think the dukun beranak has something to make the labour easier (…)” (comlead 4).

3.2.2 The terms of pain

For the Betawi community in the research area, the local Betawi words to express the sensation of pain are not the same. I noticed that if there is something wrong with their body they use the phrase, “kagak enak badan” (My body does not feel good). Below is the list of words that I frequently heard during my fieldwork time:

<table>
<thead>
<tr>
<th>The term of pain</th>
<th>Frequency (from 10 informants)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mei-iang (feeling hot and cold at the same time)</td>
<td>Every informant said it</td>
</tr>
<tr>
<td>Masuk angin (the wind that enters our bodies and makes us weak or sick)</td>
<td>Every informant said it</td>
</tr>
<tr>
<td>Mades (stomach pain)</td>
<td>Every informant said it</td>
</tr>
<tr>
<td>Puyeng or pusing (dizzy)</td>
<td>Every informant said it</td>
</tr>
<tr>
<td>Perih (smarting caused by injuries /sensation when you feel hungry)</td>
<td>Every informant said it</td>
</tr>
<tr>
<td>Panas (hot)</td>
<td>Every informant said it</td>
</tr>
<tr>
<td>Ngilu (pain such as when we have a toothache)</td>
<td>Every informant said it</td>
</tr>
<tr>
<td>Pegel (stiff muscle)</td>
<td>Every informant said it</td>
</tr>
<tr>
<td>Badan dipesung (listless and weak)</td>
<td>Four informants said it</td>
</tr>
<tr>
<td>Ngerengkeng (stiff muscle)</td>
<td>Three informants said it</td>
</tr>
<tr>
<td>Bengkok (Swelling with hot sensation)</td>
<td>One informant said it</td>
</tr>
<tr>
<td>Enek (nausea)</td>
<td>One informant said it</td>
</tr>
</tbody>
</table>

\textsuperscript{21} ‘Black magic’, used to hurt other people.

\textsuperscript{22} Traditional Birth Attendant
Women who pain during labouring called the pain mules, but it had meant a certain kind of mules that is different from other types of mules.

Comlead 6: (...) labouring woman has many complaints, such as mules, dizziness, hot in the waist; always wanting to urinate, etc. Mules in labouring are not just pain. It is more than that. Mules are occurring when you eat hot chilli foods and you feel that you want to defecate but you can not make it go out. It is not just pain, but also hot, stiff in the muscles and ngitu23. It usually continues to exist, and the intensity becomes bigger and bigger until the baby comes out. For a male, we also have ordinary mules. But it is different. Our mules are related to defecation. The intense is also different”.

This concept of pain is expressed by Pugh in Helman (2001:130) by saying that every community its specific terms to express the pain. Sometimes some metaphors are used, or words that come from daily life. For the Betawi people in the community those kinds of pain sensations are physical and are considered to be a normal pain, and usually do not receive any special treatment. They took home medicines, such as jamu24 or a mix of leaves (as natural medicine), traditional massage, and kerokan25. Sometimes they also took general medical medicines which are sold without prescription in small shops and grocery stores. Betawi people will go to the doctor if they cannot cure the pain by themselves.

3.3 Norms and values related to labour for the Betawi community in the fieldwork

3.3.1 Perceptions about labour

All of the community leaders and their wives that I have interviewed stated that being a mother is an important role for a woman. Labour is a way to gain the role as a mother. One of the community leaders’ wives said: “I cannot imagine that I do not have children. What must I do during my life?” The significance of the labour process is related to the importance of the presence of children for the family. To show this importance of the labour process, a special term has been given to it, “beranak” (delivering a child) or “lahiran” (to born someone). Even though there is another way to gain this role besides by having a child, such as through an adopting procedure, they felt that the most appropriate way is through the labour process.

23 It is almost the same feeling as ‘small’ hurt caused by love. The western culture calls it ‘Butterfly in the stomach’
24 Herbal medicine
25 koin massage
Comlead 6: "(...) for women, labour is a holy fight. Labour will bring women to a new role as a mother. Labour also brings new humans in this world. It is also a flower of our marriage. Marriage will not be complete without the baby (...)".

Both by the husbands and the wives of the community leaders, similar emphasize has been stressed that labouring is a part of a woman's fate or destiny in this world.

Comlead 2: "(...) labouring is a natural process for delivering a baby. Why is it that having a baby should be through labouring and why is it the woman that must do the labouring? A human being can not answer these questions entirely. It is like our age. We can not know when we will die. We know science has already succeeded in answering many questions, but still there are many questions that we can not answer".

They felt that labour is the most natural process for having a baby. Their understanding of the labour process gives them strength to pass the process. They accept it without thinking of it as a problem. They perceive labouring and its consequences as a normal event in human life. This concept is based on religious and ancestral values.

The Betawi husbands that I met during my fieldwork said that they cannot play many roles in the labouring process because it happens inside the woman's body. Based on their explanation, I tried to make a list about the roles that they have during the labour process:

<table>
<thead>
<tr>
<th>Husband's Roles</th>
<th>Frequency 26 (from 13 husbands)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Take the wife to the best treatment that they can reach</td>
<td>Every husband said it</td>
</tr>
<tr>
<td>b. Praying to God, asking for help and easy labouring</td>
<td>Every husband said it</td>
</tr>
<tr>
<td>c. Helping with the housework</td>
<td>Nine husbands said it</td>
</tr>
<tr>
<td>d. Giving support. They said &quot;even though they just wait outside&quot;. More over, there are some people in the area who prefer to restrict the husband in accompanying the wife during labouring.</td>
<td>Six husband said it</td>
</tr>
</tbody>
</table>

It was also implied that labouring is not only an important process for a woman to gain the role as a mother, but also an important process for a man to gain a role as a father, beside his role as a husband. Interestingly, not only the father claims his role from the

26 Note: this result includes the outcomes from FGD
labouring process, but also the grandmothers and grandfathers. They feel proud if they have a chance to see their grandchild grow up during their lifetimes.

Beside these concepts about labouring, during the fieldwork I also grasped that there is an ambiguity coming from them. In one hand it is thought that labour is a natural process, but in other hand they think of it as a high-risk process (my own term, based on the statement that “labour is at the border of life and death”). It explains that labouring has two possible results: life or death, or health or deformity (my conclusion, from some statement). Since labour is an important process that includes some risk, the Betawi people in the community do some efforts in the pregnancy phase to prevent misfortune to happen in the labour process. They do some traditions and practices like the other Betawi society in another part of Jakarta. They celebrate the nuju bulan ceremony, which is celebrated for the first pregnancy. To substitute for the nuju bulan, they do the cuci tangan tradition for the second pregnancy, third one and so on. The key person to do this ceremony is the dukun beranak. The purpose of the cuci tangan tradition is to examine the pregnancy, as preparation for the labour process. The dukun beranak uses her hands and touches the belly of the pregnant women. By using her hands, she will know whether the position of the baby is good or not. All of the post partum women did not do this cuci tangan tradition anymore, but they were still getting massage after labour from the dukun beranak.

Except for some ceremonies, during my field work I also found some prohibitions during pregnancy. The purpose of these prohibitions is the same as with the ceremony: to prevent something bad from happening during the labour process. Nobody knows when these prohibitions came into use. They know that these prohibitions came from the experiences of their ancestors. They are being transferred from generation to generation until now. It is believed that there will be a misfortune if these prohibitions are not followed. All community leaders agree that if we believe in a prohibition, misfortune will come true if we do not follow it. Some of the community leaders’ wives said that they feel scared about it; even though they do not believe, they just follow it in order to prevent misfortune during labour. Below is the list of these prohibitions. I think

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27 This explanation has already been given in the first chapter
28 Local traditional birth attendant, usually a woman of the age of fifty years old or more.
that there are many more prohibitions present in this community, but I could not explore it because of the time limitation of study.

<table>
<thead>
<tr>
<th>Prohibitions for pregnant woman</th>
<th>Purposes</th>
<th>Frequency I heard</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Do not bring lemputong or scissors or other sharp things everywhere</td>
<td>a. To prevent bad evil</td>
<td>From every informant</td>
</tr>
<tr>
<td>b. Do not sit in front of the door</td>
<td>b. To prevent the <em>ari-ari</em> (placenta) gets stuck in the womb</td>
<td>From every informant</td>
</tr>
<tr>
<td>c. Do not eat from the big plate</td>
<td>c. To prevent the <em>ari-ari</em> becoming bigger</td>
<td>From every informant</td>
</tr>
<tr>
<td>d. Do not go out after 6 pm</td>
<td>d. To prevent curse from bad devil</td>
<td>From every informant</td>
</tr>
<tr>
<td>e. Do not use wet clothes</td>
<td>e. To prevent kembar complication</td>
<td>50 % informant</td>
</tr>
<tr>
<td>f. Move after you eat</td>
<td>f. The purpose is unclear</td>
<td>5 % informant</td>
</tr>
<tr>
<td>g. Do not tighten your hair</td>
<td>g. The purpose is unclear</td>
<td>5 % informant</td>
</tr>
<tr>
<td>h. Hide under the bed if the <em>gerhans</em> comes</td>
<td>h. To prevent the baby from having a black spot in the face</td>
<td>5 % informant</td>
</tr>
<tr>
<td>i. Do not cut fish gills</td>
<td>i. To prevent sumbing for the baby</td>
<td>5 % informant</td>
</tr>
<tr>
<td>j. Use cover material if you sit</td>
<td>j. The purpose is unclear</td>
<td>5 % informant</td>
</tr>
<tr>
<td>k. Do not eat gold fish, <em>lalap</em> such as <em>Miana</em> leaf, <em>kencur</em> leaf and so on, cucumber or banana’s heart</td>
<td>k. The purpose is unclear</td>
<td>5 % informant</td>
</tr>
</tbody>
</table>

This list of prohibitions applies to the mother only. But this does not mean that the father does not have any prohibitions. He also has them. The father has prohibitions such as the prevention of killing animals, or doing something that can hurt the life of any creature during the pregnancy of his wife. The father’s attitude when his wife is pregnant will affect the baby that will be laboured. For the father, the strategy to prevent this misfortune if he has done something that hurts the life of a creature is said to be ‘something special’.

Wife 2: “Right now, I heard of some cases that happened because these prohibitions were broken. For example, it is prohibited to kill animals during the pregnancy period. I know a case when a father of the baby killed a crab. After he killed that animal, he broke his arms. When his baby was born, the baby did not have arms. Another case happened to a father who liked going fishing very much during the pregnancy period. The newborn baby had some fish hook in her arms”.

The husband must always remember that he has a pregnant wife. More over, if he does or sees something strange, he must say some special sentences to prevent the misfortune for his baby. This concept of husband’s and wife’s attitudes has the same influences to the labour and the baby. It makes sense that both of them should share some responsibilities.

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26 Herb-like ginger
27 sun eclipse
31 “Water twins”, too much water comes out before the baby is born
32 Labio palatoschizis in the medical field
Wife 3: “(...) for the husbands, they say to themselves do ‘not make the baby unhealthy’ or sometimes we say ‘jangan seturut-turutnya’ do not follow those things (...”).

Beside the theme of prohibition, nowadays, the Betawi people in the community consider labouring as a primary family event (family that is tight through blood relationship); it means that the process of labouring is attended by only a few people. But we must remember and realize that the definition of family for them is different. Even though labour is considered to be a primary family event, the neighbours still can give suggestions to the primary family. The scope will be broader after the labour process has finished. In the post partum phase the neighbourhood women visit the mother who just had her baby. They bring gifts for the baby. After forty days they will celebrate the aqiqah\textsuperscript{33}, as it is common in the Betawi culture.

Comlead 2: “(...) now labouring is considered to be just a family event. Back in the past, it had a wider audience. When labour is done at home, many people are waiting outside during the process. Neighbours and relatives are working and praying together. The males stay outside and the women’s relatives are inside. Every night after the labouring process, our neighbours and relatives were visiting us for forty days”.

3.4 Norms and values related to labour pain for the Betawi people in the fieldwork

Norms and values related to labour pain in the Betawi community where I did my research have a close relationship with their view and perception on labouring itself. Because they think that labour is a normal and natural process, they perceive labour pain as a \textbf{normal condition}. “Labour pain is something natural; and it is not a disease” (my translation based on comlead number six). They perceive that this kind of pain is already present since the first labour happened in this world.

Comlead 1: “(...) labour pain always happens in normal labour or delivery. There is no woman having labour without experiencing any pain. It might be possible if the midwife or doctor gave something to the woman”.

Comlead 6: “(...) we feel pain in our stomach every morning, and we usually defecate. We feel happy because of ‘releasing’ that thing. Now, if we compare it to the labour process, the result is the baby. We feel pain to bring out the faeces, how we can not feel pain when we bring out the baby that is more valuable (...)

\textsuperscript{33} the process of aqiqah is already explained in the first chapter
The Betawi people in the community also perceive that the labour pain is a sign for the mother. Labour pain is seen as a sign from the baby inside the mother’s womb that he or she wants to come out. "(...) I recognized that the labour had started when my wife said that she had great pain in her womb" (statement from comlead number six). For the Betawi people in the area, the problem during labouring is not with the pain sensation. The problem is with the safeties of the mother and the baby. Instead, the problem is coming when there is no labour pain.

Comlead 6: "(...) a few days ago, I went to a funeral of a young mother. The baby survived but the mother died. For us, labour pain is not a big problem. The safeties of both mother and the baby are more important (...)".

Beside the community’s perception of the presence of labour pain, I also explored the perceived things that can increase the intense of labour pain. Based on the interview, I tried to grasp several factors that they think could influence the labouring to be easy and not painful. There are four points that I summarize from all of the explanations by the community leaders and their wives. Some of them mention all of these four points, and some of them just mention one thing.

Below are the things that were perceived that can influence the labour process. This includes the intensity of the labour pain. I ordered these four points based on the frequency of the answers, starting with the one most frequently mentioned: **First** is the labouring woman. If there is a Betawi woman who does not feel too much pain during labouring, they believe that it is because of her attitude before labour. The Betawi people in that area believe that everything we do will come back to the persons themselves. Every sin, although very small, eventually will return to that person, except if that person realizes it and asks for forgiveness to God and does not do it again. If the person is a good person, there is a big possibility that she will have easy labour. "She got labour complication and should have surgery because she hurt her mother when she was still alive" (statement of comlead number six). This concept is not only related to the relationship in the community, but also to the efforts of the pregnant woman to take care of the pregnancy (related to the physical aspect). **Second**, it is the baby inside.
They used the word *bawaan bayi*\(^{34}\) to explain this thing. They said that different babies will bring different pains. The nimble of the baby makes the intensity of the pain increase. They said that the pain is also influenced by the gender of the baby. The baby boy brings more pain than the baby girl. They can recognize the baby gender before it is born from these pain differences.

Comlead 6: “(...) Even if the baby is still inside the mother’s womb, it does not mean that the baby does not have a spirit. A mother has close relationship with her child. Sometimes even though you are far away and sick, your mother can feel it that you are sick (...)”.

**Third**, is depending on the person who helps the labouring woman. The Betawi people said that in the past, when labouring was helped by the *dukun beranak*, the *dukun* used spells and herbs to make the labour easy and less painful. They said that nowadays, midwife or doctors use tools or medicine for that purpose. “*It will be very powerful if medical tools or medicine is combined with the spells and herbs*” (statement of comlead number 4)

Comlead 2: “In the past, if there was a woman who did not feel too much pain during labouring, it was because of the woman herself and the *jampi*\(^{35}\) from the *dukun beranak*. Now, if there is a woman who does not feel too much pain during labour, it is because of the doctor or the midwife using medicines and tools”.

**Four**, is the role of the families, especially the husband. The labour process also relates to the husband’s attitude or behaviour. But the influence of the father to the labour process is less strong compared to the mother’s side. “*My neighbour had easy labour because her husband is a nice person and has good attitude*” (statement from comlead number 1). These elements make that the father also must have good behaviour.

Beside these perceptions about the presence of labour pain and the kind of things that can influence it, this study also is curious to know about how the Betawi people in the community perceive the behaviour of the mother. When I asked them, almost all of the community leaders said that there is no strict rule for mothers on how they should behave when they deal with the labour pain. They said that labour pain is considered to be a *normal pain*. Therefore, **to express this pain is also allowed**. They also realized that this kind of pain is among one of the most painful pains that are present in this

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\(^{34}\) Baby’s character, that has been carried even they are still in the mother’s womb

\(^{35}\) Magic spell
world. Thus, it is a natural behaviour to express labour pain. Scarry, 1985:5, implies that different cultures have different meanings on how to deal with the pain.

Comlead 1: “It is up to the women whether they want to scream or to cry. I know that labouring is very painful. Probably man cannot hold the pain”.

Related to the mother’s behaviour when they have labour pain, some of the community leaders said that every labour is not the same and every woman is also different. Although there are twins in this world, naturally they will have different characters. The parents’ education and their environment are very important in shaping the character.

Comlead 6: “(...) Women are different. (...) There is a woman who is kraha krihi. Krihi is the same as whining or whimpering. If we borrow the term for children, krihi means that a woman is overly sentimental. But I think woman has the capability to hold the pain in normal labour (...)”.

When I asked if there are any other things that influence the woman to express the labour pain, they answered that sometimes economic difficulties could make them get used to the pain. One of the community leaders said that the most important thing is the women themselves. There is a Betawi woman who is very rich, but she can hold the pain successfully. They said that the most influencing aspect is the activity of the woman. In the past, Betawi women worked in the rice fields. They did a lot of walking or some works that made their bodies move. Those activities made the muscle become flexible. These activities also created good blood circulation. They also ate natural food and a lot of leaves. It made their bodies healthier and the labour process easier.

3.5 The Islamic views on labour and labour pain that appeared during my fieldwork time

Note: This part is based on the explanations of three religious leaders in the fieldwork area (two women and one man)

Related to the pain theme in general, three religious leaders in the fieldwork area said that they do not know whether there are specific explanations on how Islam views the pain in general. To analyze the Islamic view on the presence of pain, they recognize that everything which is happening in this world occurs through the God’s permission and so does the pain. The presence of pain sensation in this world is not meaningless.
Even though it is not a pleasant experience, the presence of pain still has benefits for a human. "(...) Pain or sickness is a life test from God. There are important life lessons behind every event" (statement of reglead number one).

All of them give me an impression that the presence of pain makes the humans not forget that they are just God’s creatures. The strongest human in this world could not be free from pain sensation in life. Every human is vulnerable and needs help from other people. The religious leaders also told me that if we have some pain or are sick, we must give our best effort to treat it. Even though we have already done the optimal, we still must submit the result to the hand of God. During that process, Islam gives the suggestion to be patient and to always believe that God will help us all. "We must submit to our fate. (...) It will make our life easier by surrendering ourselves to the fate" (statement of reglead number one).

One religious leader said that the values of Islam view labour as a risky thing, and it requires a lot of energy from the woman to struggle with it. Another religious leader said that there is a chapter in the holy Qur’an that discusses specifically the labour process. She explains that God prepares a big reward for every breath that the mother gives to deal with the labour process. Moreover, she explains that God will give a higher degree to the woman who is *ikhlas* when passing the pregnancy and labour process.

Reglead 3: "(...) Labour is one form of *jihad* in Islam. If the woman dies during the labour process, and she already did her best effort to do it, she will die as a *syahid*. God guarantees heaven to a person who dies in *syahid*, without any *hisab* (...)"

Another religious leader (woman) said that “labour is a woman’s fight, and God gives the capability to women to pass it”. She also believes that a woman gives many sacrifices to pass pregnancy and labouring. She said that pregnancy and labouring is one of the many reasons why children must pay high respect to their parents, especially their mother. A hadist from the prophet Muhammad SAW, told by Imam Ahmad, says

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36 *Ikhlas* mean that we accept with a big heart everything that will happen in our life. To live or die through that process is our destiny
37 *Holy war*
38 the name of a person who dies in the jihad
39 Calculation of all our deeds and sin that we do in this world.
that: "heaven is under the mother's sole of the foot" (my translation, based on Indonesian version). It means that if you want to be granted heaven you must respect your mother and not hurt her heart. I make a list the beneficial of existence of labour pain based on the explanation of these three religious leaders. I categorize the meaning of labour pain from the Islamic point of view into four aspects:

a. Labour pain gives lesson to the mother in labour

Having labour pain will make the labouring woman apprehend her parents' efforts, especially her mother's. By realizing the difficulty of labour, the labouring woman will have more sensitive feeling and deeper love to her parents. By having labour pain, she can appreciate the utmost importance of the baby, because it is not easy to deliver him/her. The mother will think twice to neglect the child after that difficult process.

Reglead I (female): "(...) when I had labour pain, I do not know why, I started to remember every sin that I did to my mother. I felt guilty in my heart and sooner or later, I asked her to forgive me"

b. Labour pain gives lesson to the children

Knowing the pain that their mother experienced when she was delivering them could influence the children to pay more respect and honour to their mother. Related on how the children pay respect to their parents, it is said that the Moslem mother is supposed to have the highest position in the eyes of the children. When one of disciples asked the Prophet Muhammad, "Who should you respect the most in your life?" the prophet Muhammad SAW answered three times: "your mother, your mother, and your mother". Then finally at the fourth time, Prophet Muhammad said: "your father" (my translation from Indonesian version).

c. Labour pain gives lesson to the husband

Knowing that his wife had much pain during labour makes the husband realize more that pregnancy and labour are not easy. It will make the husband feel more thankful and respectful to his wife. He knows that to grow the children is difficult, and that his wife carried for nine months pregnancy and had to pass the labour process, which is really painful. The husband will think twice before he neglects his wife and child.
Reglead 3 (male): "(...) I more respected my wife after she laboured. I felt not only love, but also honour, proud and thankfulness".

d. Labour pain gives life lessons

Labour pain represents the life symbols of sadness and happiness. Life can never be sadness or happiness at all time. Everything is always made in couples. There are night and day, dark and light, earth and sky, and so on. Thus, before getting happiness we must do some effort first. This is not easy sometimes. Labour pain also reminds everybody that we are just human who have weaknesses.

One of the religious leaders said that when the labour is about to begin, the mother is suggested to pray. The praying is for asking help, easiness in the labour process and blessings for the baby. She mentioned some of the verses from the holy book, Al-Qur'an that discusses asking easiness during labour. This is stated in Surah Abasa: 20: "... and God makes the way easier..." (My translation, based on Indonesian version). Another article is a hadist from the prophet Muhammad SAW, told by Abu Dawud and Ibnu Hibban: "God, we ask for your mercy. Do not leave me although only for one second and please make my entire problem become easy. There is no God but you" (my translation based on Indonesian version).

Reglead 2: "(...) "It is enough for me to have God only, and God is the best protector" (Qur'an surah Ali Imran verses 173). It gives us enough power to face the labour process by making ourselves close to God".

The religious leader admits that labour is not an easy process, especially when related to the intensity of the pain. She said that religion also provides explanation on how to deal with it. The meaning behind the labour pain can help the Moslem woman to deal with their labour process. The Moslem woman in the community accepts that labour pain is something that has a deep meaning. God says: "Not without purposes and meaning did we create heaven and earth and all between" (Suraah Sad, 38: 27). To them, everything is made for a reason. That is why they always try to be optimistic, that behind pain there are good things.
Chapter Four

MOTHERS’ PERCEPTIONS AND EXPERIENCES WITH LABOUR PAIN AND PAIN BEHAVIOUR

This section describes the stories of five post partum mothers in the fieldwork area. These stories are based on their explanations as well as on the clarifications and stories of people around them. For ethical reasons, I use fake names to represent these five-post partum mothers.

Note: The fake names come from the Indonesian language and refer to numbers.

<table>
<thead>
<tr>
<th>Name</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Satu</td>
<td>one</td>
</tr>
<tr>
<td>Dua</td>
<td>two</td>
</tr>
<tr>
<td>Tiga</td>
<td>three</td>
</tr>
<tr>
<td>Empat</td>
<td>four</td>
</tr>
<tr>
<td>Lima</td>
<td>five</td>
</tr>
</tbody>
</table>

4.1 The five post partum mothers

4.1.1 Mrs. Satu’s stories

Mrs. Satu is a young mother who was born in 1981. She is the third child among four brothers and sisters. She got married at the age of 23. Her husband was born one year before her. He is the oldest among ten brothers and sisters. Both of them come from an Islamic family background. Before she married him, she had graduated from elementary school. Her husband graduated from senior high school. After their marriage they stayed in the house that belongs to Mrs. Satu’s parents. They live together with her mother. Her father died a few years ago. The brothers and sisters of Mrs. Satu did marry and moved to their own houses.

Her husband works as a driver from Monday to Friday, and as a trader in a local market on Saturday. Mrs. Satu tries to help her husband by running a small shop near her mother’s shop (her mother owns a small grocery store in front of their house since Mrs. Satu was a child). Different from her mother, who sells vegetables, she sells many kinds of local drinks such as coffee, tea (every day). She spends most of her time in the shop, from Monday to Saturday (her husband only can help her on Sunday). Her other

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40 In Indonesia language it is known as warung
responsibility is to take care for the baby and to do housework such as washing and cooking. Her mother helps her in taking care of the baby during the day while she also takes care of her shop.

At the first time I met her she was doing her daily job. She was preparing for cooking local Betawi food. She was doing her activities in front of her shop, near the bale-bale. While she did her activities, she placed her baby on the bale-bale. Her mother helped her to feed the baby (the age of the baby at that time was four weeks). I asked her and her mother to become my respondents, and they were eager to do it. Both of them agreed to become my respondent and they allowed me to come every time I wanted to buy something from their shop.

Mrs. Satu is a young mother with short hair. Her skin is brown. Her daily clothing consists of a t-shirt with a pair of cotton pants. It is different with her mother, who still uses a hair bun. The mother still uses a combination of styles, of modern clothes and traditional Betawi clothes. This in turn differs from her grandmother, who still lives and uses traditional Betawi clothes, as in the past. She, her mother and her grandmother do not use veils like common Indonesian Moslems. They only use veils when they visit the Mosque for pengajian.

Mrs. Satu always smiles when she speaks. She said that she feels shy with her educational background. She was sometimes also rather shy when she answered my questions. She worried that her attitude would not be appropriate and polite in my eyes. She always said “sorry” when she spoke local words that relate to “vagina”. Every time I met her, she tried to make me feel comfortable in her house. She rarely goes out, except to the market to buy their daily life groceries and stock for the shop. Her daily interactions mostly spend with the buyers and with her family. Her shop also serves as a place for informal conversation for some people in the neighbourhood. I observed that she rarely watches television.

For Mrs. Satu her labour process was her first experience of this kind. When she told her story about her labour experience, especially relate to the labour pain, she was. She

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41 Long chair that is made from bamboo
gave me big smiles and laughs when she spoke about her capability to pass that
difficult process. She was very happy and proud that she became a mother and got a
handsome and healthy baby.

“I feel glad now. I already have experienced how women labour. It is very painful. But I feel a complete
woman now, because I already have that experience and have my baby”.

On the day of the labour process, she felt mulas at 1am. She had it for a few hours.
When she realized that the pain was not only stomach pain, she told her husband. Her
husband felt panicky and asked his mother-in-law. At 3 o’clock in the morning they
went to the midwife clinic near the house, with some relatives. She got her first labour
at 11.30 am in the morning (for almost ten and a half hours she did feel pain). She
described that during the labour process she did not really focus on the pain, she was
more worried about her baby and possible complications during her labour process. She
said that she was glad that she felt labour pain. For her, labour pain is a good sign that
the labour will go well. She tried everything to make her labour easier and faster. She
hoped that she would not need an operation, because it is too expensive and she did not
have the money. One of her efforts to reduce the possibility of complications was by
keeping quiet and praying to the God.

“If we scream it is not good. It makes us feel difficult to breath. The good thing is to just keep calm,
breathing deeply. If we scream, first it increases the pain, and it is also shameful”.

Another reason why she kept quiet during that difficult process was because she felt
shy to scream. She worried about others’ opinion about her. She also said that during
pain she felt very guilty to her mother. She felt that she was not a good child and had
ignored her mother's commands to her. She said that she realized that labour pain made
her understand her mother's feelings.

Her grandma, who had accompanied her inside the room, used daun kapuk (Kapuk
Leaf) to make the labour more comfortable. She said that women, who had laboured

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42 Mulas refers to a slight stomach upset, pain in the stomach.
43 daun kapuk refers to a kind of special leaf which has a green colour. This leaf comes from a big tree
(kapok tree). The tree has a kind of fruit that is used to fill pillows or mattresses.
with *kembar darah*, had more pain compared to the normal labour. She needed herbs. The grandma pounded the leaf by using her hands. After that the water was filtered and then mixed with hot water. The grandma gave it to her grandchild to drink and she spread it on her grandchild’s abdomen. She said that this leaf makes the womb colder. Mrs. Satu said that she felt comfortable after she had this leaf. The sensation was painful, but it was colder than before. Below is a table which shows how Mrs. Satu perceived and experienced labour pain:

<table>
<thead>
<tr>
<th>Perceptions before the labour experience</th>
<th>Labour or childbirth experiences</th>
<th>Perceptions after the labour experience</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Labour or delivery is easy</td>
<td>a. She is experiencing <em>kembar darah</em>[^44]</td>
<td>“<em>I had nice imaginations about the labouring process. But now my opinion has changed because of my experience</em>”</td>
</tr>
<tr>
<td>b. Labour pain is not a problem</td>
<td>&quot;If we have labour with <em>kembar darah</em> the pain is unbearable and takes a long time&quot;</td>
<td>a. Her labour is difficult especially related to the pain.</td>
</tr>
<tr>
<td>c. Labour pain will reduce, regarding the number of labours.</td>
<td>b. She distinguishes three levels of labour pain, which are:</td>
<td>b. She felt a labouring woman must feel pain everywhere</td>
</tr>
<tr>
<td></td>
<td>First ; <em>Mulas</em> sensation. It is very painful. Within 2 cm of the <em>mulut rahim</em>[^45], the pain is not constant and always moves. It increases after 5 cm. The pain always moves. It is not in one place. She felt that all of her abdomen is painful. The tension of the pain is in the stomach, bottom and in the waist. The sensation during this process is painful, hot and stiff.</td>
<td>&quot;There is no labour without pain, except perhaps caesarean operations&quot;</td>
</tr>
<tr>
<td></td>
<td>Second; When the <em>ketuban</em>[^46] was broken the desire continued to push to make the baby head come out. The pain in this phase is the maximum pain compared to the first phase. She said that she pushed four times until the baby came out.</td>
<td>c. Labour pain has benefits:</td>
</tr>
<tr>
<td></td>
<td>Third; After the baby was born the <em>ari-ari</em>[^47] came out. This phase was without any pain at all.</td>
<td>- Labour is an important sign</td>
</tr>
<tr>
<td></td>
<td></td>
<td>&quot;It is an important sign that we will have labour&quot;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>- It reminded her of her mother</td>
</tr>
<tr>
<td></td>
<td></td>
<td>&quot;I feel guilty now. I just realize that my mother has passed a difficult labour process like this&quot;</td>
</tr>
<tr>
<td></td>
<td></td>
<td>d. Her suggestion:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>&quot;Don’t do everything that is prohibited or forbidden by taboo. By following that advice our labouring process will be easier, like that of our ancestors.&quot;</td>
</tr>
</tbody>
</table>

[^44]: *Kembar darah* refers to “twin blood”. It means (based on respondent’s opinion) that the stomach is slightly upset and really painful, while blood is coming out. The blood usually comes out before the baby comes out and it can not be held, like when urinating.

[^45]: *Mulut rahim* refers to the cervix.

[^46]: *Ketuban* refers to water inside the uterus; in the biomedical world the word “AMNION FLUID” is used.
When I left the fieldwork (after 7 weeks), the age of her baby was eleven weeks. To the end of my visit, during the clarification process, I saw her cutting her hair shorter than before. This new performance makes her look fresher than before. Before I ask forgiveness and say goodbye I spend a little bit of time to play with the baby.

For Mrs. Satu, her perceptions of labour pain before she had her first experience were based on information from people around her, especially her mother because she stayed with the mother since she was born. Her mother told stories that she just felt a desire similar to defecating. “Giving delivery of her (Mrs. Satu) was easiest, compared to her brothers and sisters” (her mother’s comment). Beside her mother’s stories, she also never heard that other women in her neighbourhood felt traumatic about the labour pain. Her nice perception on labour pain changed when she got her first labour experience. She believed that labour was not painful, but she was surprised when she experienced high tensions of pain during her labour process. The people surrounding her provided explanations why her labour was so difficult. First because it was her first labour, second the baby was a boy and the third she had the “kembar darah”\textsuperscript{48} complication. Based on these explanations she felt that her labour pain was an exception compared to other ordinary labour processes. She also added more rationale to why the tensions of her labour pain were high: because she did not follow all of the ancestors’ prohibitions. “Sometimes I was naughty; I did not follow everything that my mom suggested to me”. She said that if her first labour had not been a boy or she had not experienced “kembar darah” or she had followed her ancestors’ prohibitions, probably the pain would have been as less as that which her mother or grandmother did experience.

\textsuperscript{47} Atri-ari refers to the placenta

\textsuperscript{48} Related to “kembar darah” I could not find this kind of complication in the medical field. There is “Bloody show” sign, but this sign is a normal sign for labour. It is not related to the differences of pain tension. Kembar darah is also not “Placenta previa” or “solutio placenta”, because Mrs. Satu’s baby is healthy and he could come out from the vagina.
4.1.2 Mrs. Dua’s stories

Mrs. Dua is a housewife of thirty-eight years old. She is the first daughter of seven brothers and sisters. She married her husband at the age of 15. Her husband is seven years older than she is. They have a partly similar background: both of them were born in big families, both believe in the Islamic religion, and both graduated from elementary school. After their marriage, they stayed close to their parents’ houses. They have three children. The first child is a twenty-three years old boy. He is married and has one son. The second child is a fifteen years old girl. She studies at Junior High School. The last child is newborn, and is also a girl. Her husband fulfils their household demands; he works in a factory in Jakarta. Mrs. Dua stays at home to take care of their children and the house. Her daily activities are doing housework, like cleaning, washing, ironing, cooking. She wakes up every day at 5 am and finishes her work at 10 am. After that time she has plenty of time to play with her baby and make conversations to her neighbour. Every one week she follows pengajian in her neighbourhood.

Mrs. Dua is a beautiful lady with a beautiful yellow skin. She prefers to use modern clothes rather than the Betawi original clothes. At the first time I met her, she looked really friendly. Her big smile during the conversations indicated to me that she is a cheerful woman. During my interactions with Mrs. Dua, I frequently met her in her neighbour’s house. They always make conversations in one of the women’s houses. This interaction is very influential for her. They share their experiences about pregnancy and labour and they form a general opinion from it.

Related to her labour pain behaviour, she said that when she felt pain in her first labour process, she asked her mother first and than her husband. In that time they were still living in her mother’s house. She remembered that her mother told her that it is the sign that labour will start. The mother suggested her to continue the housework. Her age was sixteen years old at that time, and she just followed her mother’s suggestions. The mother called the TBA and the TBA also gave similar suggestions to her. Mrs. Dua tried to walk until she could not hold it anymore. She said it was very painful but she pushed herself to walk. Everybody said that walking would increase the pain and
because of that the baby would come faster. The *dukun beranak* was not just wiping her abdomen, but also had some *jampi-jampi*.

“(...) when I walked it was pain and not pain. I respected my parents; I followed everything that they suggested to me. The position that was the most comfortable to me was the sitting position. When I was sitting, usually my mother or the TBA wiped my stomach. It was very comfortable for me”.

Her second labour was not really different from her first one. The range of these labours was eight years. She felt that her second labour caused less pain tension compared to the first one. In that time she had already moved to her house. In her second labour, the person who knew her condition first was her husband. She laboured at home with a TBA. During the second process, like with the first, she tried to hold the pain to herself. In order to show briefly Mrs. Dua’s perceptions and experiences of labour pain, below is the summary of it:

<table>
<thead>
<tr>
<th>Perceptions before the labour experience</th>
<th>Labour or childbirth experiences</th>
<th>Perceptions after the labour experience</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Before first experience:</strong></td>
<td><strong>The first labour:</strong> with traditional birth attendant</td>
<td><strong>After first experience:</strong></td>
</tr>
<tr>
<td>a. Labour is painful but it is not a problem, because every woman has labour and can pass it</td>
<td>She felt <em>mules</em> for two and half hours (from 4 pm until 6.30 pm). The pain was like spinning to all directions (all of the abdomen, the waist and the hip). She felt stiff in her waist. The baby is a boy</td>
<td>“No pain in this world can be compared with labour pain. Labour pain is the most painful from all of natural pains in this world”</td>
</tr>
<tr>
<td>b. A little bit scared, but it is covered by her remembrances of her baby</td>
<td><strong>The second labour:</strong> with traditional birth attendant</td>
<td>To have easy labour, we must live close to the God and follow the ancestors’ suggestions.</td>
</tr>
<tr>
<td>c. Following the ancestors’ suggestions and prohibitions will make labour easy</td>
<td>It happened when she was fasting. She felt <em>mules</em> for two hours (from 11 am to 1 am). The pain was just in the abdomen or below the umbilical. The pain was not constant and intermittent. The baby is a girl</td>
<td><strong>After the second experience</strong></td>
</tr>
<tr>
<td>Her mother’s stories: “I never was concerned about the pain. I am only thinking about my baby. I am the last choice. My baby is the first choice”</td>
<td><strong>The third labour:</strong> with midwife</td>
<td>a. More believe in God and ancestors’ prohibitions</td>
</tr>
<tr>
<td></td>
<td>She slept and she woke at 2 am because she felt <em>mules</em>. The pain was in the entire abdomen. The pain focused below her umbilical. At 3 am, she went to the midwife with her husband. 30 minutes later she delivered a girl baby.</td>
<td>There is a different pain between boy and girl.</td>
</tr>
<tr>
<td></td>
<td>“I think I felt more comfortable in my third labour. Probably it is because I was sleeping first and I already had two experiences”</td>
<td>b. Labour pain is important. The problem is labour without pain. It means that complications can happen.</td>
</tr>
</tbody>
</table>

Note:

49 *jampi-jampi* probably closed to spell or incantation

50 *mules* is pain in the stomach
Compared to the first two experiences, for her the third labour was the easiest labour, and the pain tensions were also the least ones. She perceived that her labour was easy because she followed her ancestors’ prohibitions during her pregnancy. She also followed her mother’s suggestion during the labour process.

For Mrs. Dua, based on the three labour experiences, the highest tension of pain during labour was when she wanted to push the baby’s head. After the baby came out the pain reduced, giving labour to the *ari-ari* was not painful at all.

“For me I can hold it, and I try not to scream. My neighbours did not know that I had labour. They knew it after the process had finished. I read surah *al-fatihah* and asked God to help me and my baby. I submitted to my fate”.

Even though there is no prohibition to express the pain, she chose to keep quiet because she said it is better to keep quiet. Moreover she would feel very shy if somebody would hear her scream or cry due to labour pain.

For Mrs. Dua her age when she got her first labour, which was sixteen years old, did not imply that she was not ready to become a mother at that time. In this era, both biomedical and community norms view this age as a “teenager” which is not ready for pregnancy and labour. Both norms view the minimum age for a woman to become a mother to be more than twenty years old. Concerning the perceptions related to labour pain, Mrs. Dua’s perception is based on her mother’s stories, her neighbour’s stories and her experience. The coherence between her perceptions and experiences makes her believe more that labour is related to many things: her behaviour, the baby and God’s destiny. After having three times of labour, she found some pattern of labour pain that is similar to the knowledge that was already present in her community.

Another point related to her perceptions is that on the one hand she said that her labour was painful, while on the other hand she said that her labour was easy. This implies that her meaning of an “easy term of labour” is not related to the tension of the pain.

“During labour I felt *geregetan* to make the baby come out. I knew that if the pain increases it will make the baby come out faster. So I walked and walked”.

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51 the local name for the placenta
52 *geregetan* means something tense from restraining pent-up emotions.
She realized that when pain is appearing during labour, she cannot run from it. She said that “easy” for her depends on other aspects, which are the duration of the pain, the normal labour without complications, and the healthy baby. She accepted to face more pain in order to make the baby come out faster. She realized that the pain is gone once the baby did come out.

4.1.3 Mrs. Tiga’s stories

Mrs. Tiga has short curly hair. The way she cut her hair is different from the Betawi women in the past, who usually have long hair. Her performance shows that she follows the trendy fashion in Indonesia. She speaks with good Indonesia language, but her dialect still does show that her cultural background is from Betawi ethnic.

Mrs. Tiga was born in 1972. She is the youngest among three children. When she was a child, her parents divorced. Then after that, she stayed with her father and her stepmother. She married when she was 20 years old. Her husband is one year older than she is. Both of them graduated from Senior High School. Similar to her, her husband comes from a Moslem family. After they got married they built a house near to her husband’s family. For the first time, both of them have to work to fulfil their economic demand. Her husband works at the nutrition department at a hospital in East Jakarta, and she works as a clothes creditor.

In the first five years of their marriage, they did not have a baby. It brought new burden for Mrs. Tiga after her parents’ divorced. They already went to doctors and tried many efforts to have a baby. But they said that God still does not give them a baby. In the sixth year of their marriage they decided to do the pancing anak tradition, which is common in that Betawi society. She borrowed her brother’s baby. They took the baby since he was 8 months. The baby was already seven years old at the time of the research. This effort was successful. In the middle of 2004 she got pregnant. In April,

53 *pancing anak* means fishing the children. This community believes that if there is couple who does not have a baby after a few years of their marriage, they can do pancing anak. This tradition is to take care of or to borrow a baby from a relative or a poor person. This tradition is usually successful. After the success the adopted child usually is returned to its family.
2005 she delivered a beautiful baby girl. After she laboured she decided to stop and to just take care of the baby and the house. She decided to continue to take care of her first adopted son, even though she had her own baby now. “I love him as much as I love my baby. He brings luck to this family” (Mrs. Tiga’s comment).

My first interaction with her was when the age of the baby was three weeks. For them, that baby is their most valuable thing. Since they knew that Mrs. Tiga got pregnant, they were being careful. She was examining her pregnancy to a midwife regularly, and sometimes she also visited the obstetrician. During the pregnancy, she did the *nuju bulan* ceremony and she also tried every suggestion that her neighbourhood suggested to her.

“I did not really live close to my mother. My mother did not tell me anything before she died. My stepmother does not have children from my father. I know about pregnancy and the labour process from my friends and neighbours”.

Her first labour happened through a caesarean operation. Her husband took her to the hospital two hours after she felt pain for the first time. Their close neighbours accompanied them. She had planned to have labour with a midwife, but everybody suggested her to have labour by a caesarean operation. “They were scared; they thought something would happen if I took a normal delivery” (Mrs. Tiga’s statement). The reason was that the baby is *anak mahal*\(^\text{54}\) (expensive child).

Related to her perceptions and experiences of labour pain, she did not describe much. I also could not ask too much, because when I asked questions related to labour process she was always crying. I saw tears coming from her eyes when she told me the stories about her labour experience. She felt sorry about it. She just felt sad, remembering again her labour process. I felt very concerned about it. I just waited for her spontaneity to speak about her experience to me. Below is my note related to her perceptions and experiences with labour pain:

\(^{54}\) This baby was waited for twelve years
<table>
<thead>
<tr>
<th>Perceptions before the labour experience</th>
<th>Labour or childbirth experiences</th>
<th>Perceptions after the labour experience</th>
</tr>
</thead>
</table>
| a. Labour must be painful. This pain is one of the most incredible pains in the world | Six days before the time prediction of labour, she felt pain in the stomach since morning. “I accompanied my adopt child to his school. When I arrived at home, my stomach was painful. I thought I was hungry, because I did not have my breakfast yet. I ate bread and milk, but the pain was still there. I did not know, suddenly I wanted to cry. At that time, Mrs. A came to my house to pay her debt to me. She already had three children. When she saw me crying, she touched my abdomen. She said that it was labour pain”. Before the operation began she felt pain for four hours. The pain focused below her umbilical. “Mrs. A helped me to massage my back. She was wrong. The pain was not in my back but in my stomach”.
I did not feel any pain during the operation. I felt pain after I had my operation. But it was nothing, because it was covered by the presence of my baby. The baby is a girl. | “If you want to know how is the labour pain, you must experience it by yourself” |
| b. The pain will reduce when the baby has come out. | | |
| c. Very scared because she never experienced it for almost 12 years | | |

Concerning her labour pain behaviour, she felt she could hold the pain but she could not hold the tears. She did not want to scream, she just wanted to cry by herself.

“I know that with crying the pain will increase, but I don’t care. I am not crying because of the pain. I lost my parents. This is my first labour. I waited for this time almost 12 years, I also do not have parents anymore. Both of them already died. I wanted them to be with me in that time”.

“Almost 12 years that pain was just in my imagination. I wanted to have a baby, but I am scared about the pain. I just make my self sure that this is the most important moment in my life. If everybody can have power to pass this process, I do to. I did not scream or yell. I was only crying”.

After the surgery process, she stayed for three day in the hospital. When she came home, many neighbours came. She said: “Every body asked about the baby and my feelings. They also asked how many sews I got. No, they did not ask about pain at all. I thought because it is already common that having an operation means no labour pain”. During my fieldwork time, I could not meet with her frequently, because she was busy with her baby. I did not want to disturb her too much.
4.1.4 Mrs. Empat stories

She is the third of nine brothers and sisters. Her age is thirty-nine years old now. Her husband was born six years before her. Her husband and she come from Moslem families. She married at the age of 24. Both of them passed from the senior high school in that time. After marriage, they stayed in her husband’s house, which is part of a big compound of her husband’s family.

At the present, they have three children (including the newborn baby). Her first child is a girl (14 years old); her second child is also a girl (9 years old). Her third child, the newborn baby, is a boy. When I met her for the first time the age of her baby was almost four weeks. She said that her daily time is spent on doing housework and taking care of the children. Her husband and she wake up everyday at four o’clock in the morning. Together they pray in the morning. After that, her husband is busy with his preparation for his work, and she is busy to prepare everything for her children and for the breakfast. After her husband and her children have left the house, she does the other housework. She said that usually the work is finished at ten o’clock. But now after she got a new baby, sometimes she finishes at two o’clock. After that she usually takes a rest or brings her baby out for a walk around her house. Twice a month she follows pengajian near the house. Sometimes she also visits her parents and spends her time there while she waits for her children and her husband.

Concerning her perceptions and experience related to labour pain, she said that her last experience cannot be separated from her first two labour experiences. She said that since every woman will have labour, it means that every woman will experience labour pain. But every woman also will experience different kinds of pain. It depends on the woman and the baby. It also means that it depends on the effort of the mother before the pregnancy process. Related to this Mrs. Empat tried to follow every suggestion from her ancestors to do prohibitions; she was also trying to make closer relationship with the God. Related to her perceptions and experiences with labour pain, below is my summary of it:
<table>
<thead>
<tr>
<th>Perceptions before the labour experience</th>
<th>Labour or childbirth experiences</th>
<th>Perceptions after the labour experience</th>
</tr>
</thead>
</table>
| a. Labour pain is an ordinary pain in the process of labour  
"Labour is Kodrati\(^5\) from the God. We must be ready for that". | **First labour:** with traditional birth attendant  
She felt *mules* from 6 o’clock. The pain was intermittent. The baby comes out at 1 pm.  
She felt pain for 7 hour. The baby is a girl  
She felt safe with the TBA activity to wipe her abdomen. The TBA read some prayer to make the labour easy and faster.  
The other person who was staying in that room was her mother-in-law. Her husband was waiting outside. | **After first experience**  
a. Labour pain is more difficult that in first imagination. But it is not a problem  
| b. Labour is easy if you live close to God and follow the ancient prohibitions | **Second labour:** with midwife  
This second labour was almost the same as the first labour.  
She felt labour pains since 9 o’clock in the night. The baby was born at 1 o’clock in the morning. The baby is a girl  
She felt pain for four hours. The pain pattern is similar to the first labour | **After second experience**  
a. Her first perception is stronger  
b. Labour pains for girl and boy are different.  
"My prediction is correct. My third baby that was born with caesarean operation is a boy". |
| c. Did not feel scared because she saw that everybody can pass it easily | **Third labour:** with doctor (surgery because of indication)  
She examined the pregnancy to midwife. During her pregnancy there was no complication. The complication was detected when Mrs. Empat started to have labour.  
She described that she got bleedings without pain since 2.30 am in the morning.  
"I was confused, labour usually has mules, why not now, more over there came out so much blood"  
After she told her husband, he immediately brought her to the midwife. The midwife sent them to the hospital to have an operation. At 5.30 am, the baby was born in half an hour. The baby is a boy | **After third experience**  
a. Labour pain is important.  
"Without any pain, we do not know when we will have labour".  
b. She prefers to have labour pain rather than surgery  
"Pain is normal in labour and it is just for a few hours, and it is just one. If we have an operation we feel pain after the operation for more than one month" |

Related to her first experience she said that it happened in a normal process. It happened in 1991. The person who helped her was a Traditional Birth attendance. During that labour process the TBA gave her a lot of suggestions; one of them was related to the pain. Another suggestion was to walk, in order to make the labour faster. When she could not walk anymore she stayed in bed. The most comfortable position for her in that time was a sideways position.

\(^5\) *kodrati* means that labour pain is common and appears since we are born as a human. She explains that every woman has the same kodrat to become a mother. But the difference is that women choose to have that role as a mother or not.
“She said that if I feel pain, I don’t express the pain with the word ‘aduh’ (a Betawi expression of pain). She said that it is better to keep quite and to remember God. I followed her suggestions. I felt strong to pass the process. By saying ‘Istighfar’ I felt calm. I also felt shy if I would scream.”

Five years after her first labour she got her second labour. She noticed that labour pain in her first labour was almost similar with that of her second labour. She thought that was because both of them brought girls. She also said that the tension for the second labour was less than for the first. The difference was caused by a midwife who helped her with the second labour. These first two labours were different from her third labour because she had to take an operation because of complications related to her placenta. She felt that she had labour complications because she did not feel any pain at all.

“I must do an operation for this third labour. 5.30 In the morning the doctor gives me anaesthesia injections. I must have an operation because the placenta closes the way. In the night I feel that blood is coming out from my vagina. I am worried because the blood is coming out without any pain in my stomach. In my experience and my knowledge a normal labour must be with pain. But it did not feel pain at all”.

For Mrs. Empat, she felt she got many lesson from her labour experiences. She had been experienced both normal and abnormal, and also both TBA and health providers. She felt that labour pain in normal labour is nothing compare to the pain after the surgery.

4.1.5 Mrs Lima stories

Mrs. Lima was born in 1968, from Moslem parents. She is the oldest of five brothers and sisters. She is the only one who has finished senior high school in her family. For a woman, to gain Senior High School level in that time was very difficult, because of the economic situation and the accessibility of the school. She got married at the age of 19. After her marriage, her primary activities were taking care for the house and the child. Sometimes she teach traditional dance or aerobic in her neighbourhood. She also takes part in community activities in the area, such as women’s meetings, pengajian or arisan.

56 Doctors told her that she had “placenta previa”. It means that the placenta covers the way by which the baby will come out
Her husband was born in 1964. He is from a big family. He is a first child from seven. His family background is almost the same as that of Mrs Lima. His religion is also Islam. He finished his senior high school before he married with Mrs. Lima. For eighteen years he has been working as a non-governmental labourer. Now they have three children, including a newborn baby. Her first child was born in 1987, her second one in 1992, and the third is the newborn baby.

She described that her first and second experiences were easy, because she felt pain for not more than one day. She said that in her community there is the knowledge that usually labour pain is reduced with regard to the number of labour. But it was different with her third experience. She experienced pain for ten days. She remembers that there were also exceptions related to the third labour, as with some cases in the ancestors era that were difficult. The ancestors called these exceptions by the word “mendeking”. She said it means different from others, or more difficult, and it usually happens in the third labour.

At the first time she got labour pains, she tried not to push herself into panic. She usually waited for a while and made sure that it was really labour pain. She said that she tried to take care of herself. She told me that her husband is a person who felt scared by her labour. “He feels very sorry for me. He knows he cannot do anything to help me”. Because she did not want make her husband worried, she tried to keep it to herself until she could not hold on anymore. The maximum tension of labour pain for her was when the baby wanted to come out. For her, the capability to hold the labour pain is related to her activity to do housework. She believes that the more you activate your body, the better you can hold labour pain. Mrs. Lima said that both the dukun beranak and the midwife were warning her when they saw that she closed her eyes to hold the pain. Mrs. Lima understood this. She said that there is knowledge that if a woman closes the eyes during labour, the eyes will be red after labour, which is difficult to cure. Below is my summary about her experiences.
<table>
<thead>
<tr>
<th>Perceptions before</th>
<th>Labour or childbirth experiences</th>
<th>Perceptions after</th>
</tr>
</thead>
<tbody>
<tr>
<td>has labour experiences</td>
<td></td>
<td>has labour experiences</td>
</tr>
</tbody>
</table>
| **a.** Labour pain is normal | **First labour:** with traditional birth attendant  
She felt pain at 12 o’clock and the baby was born five hours later. The pain was intermittent, and in the whole abdomen. The baby is a girl | **After first experience**  
a. Labour pain is very painful but it is important for labour |
| **b.** Labour pain is the most painful in the world, but women have the capability to hold it | **Second labour:** with traditional birth attendant  
She tried to break the prohibitions, because she wanted to test it.  
“After eating, our parents usually said to change our position or to move to another place, I do not like that. I stayed in my position after I eating. I also eat from the big plate”.  
The result was unbelievable. Her second labour was difficult. She felt pain for one day. The baby is a boy. The placenta also did not come directly.  
‘Nenek’ must bring the placenta with her hand.” | **b.** Labour pain has benefit:  
- as a sign of the labour process  
- it helps the baby to come out  
- it reduces the possibility of having operation  
“Cesar operation is very expensive” |
| **c.** To have labour pain is a natural destiny for a woman. | **Third labour:** with midwife  
Her husband waits outside, because it is still rare for a husband inside the delivery room.  
Because she already has two experiences, she can recognize the kind of labour pain.  
She felt her third labour is rather strange.  
She felt pain for ten days. She tried to hold the pain, because she was sure that it is not the time yet.  
During the ten days, the tension of the pain was not too much so she could do her daily work  
At the day ten (in the morning) the tension of pain increased.  
“I was still cooking and doing other activities. In that time I was fasting. As I did more activity, the pain became more and more. I told my husband about that. He told his relative. Then, they brought me to the midwife clinic”  
The baby was born after having been three hours at the midwife clinic. The baby is a girl | **c.** Submitting to the pain makes that the pain is not really hard  
“God will help every human who tries as much as possible. If the result is different from our hope, it means that it is already her destiny or fate”. |
| **d.** A little bit worried and scared, but at the same time she feels brave because of the baby | **After second experience**  
d. Pains for baby boy and girl are different. | |
| **e.** Labour pain is not really intense if the helper is the TBA  
“The dukun beranak uses spell” | **After third labour**  
f. Her recommendation is to follow the ancestors’ prohibitions. It makes labour easy, and it is not really painful | |

37 For Mrs. Lima, *kodrat* means something that is closely related to our destiny. *Kodrat* is close to our task in this world as human beings. Every woman has a risk to have labour. The labour pain is already common in the woman’s ear.
4.2 Finding Interpretations and Discussion

Looking at the five postpartum mothers' stories, we can say that they are coming from similar generations. This conclusion is based on considerations of their age and from their similarities in the way they pass their daily life.

In order to interpret the stories, I classify these five postpartum mothers into two different groups. The first group consists of the mothers who had labour experience for the first time and only with a health provider (Mrs. Satu and Mrs. Tiga). The second group is formed by the mothers who had more than one labour pain experience (Mrs. Dua, Mrs. Empat and Mrs. Lima). This group has experienced labour as both a normal and abnormal process, and had different labour helpers (Traditional Birth Attendant and health providers).

4.2.1 Mothers' Perceptions and Experiences with Labour Pain

Concerning the mothers' perceptions on labour pain, both groups admit the presence of pain during the process of labour. Jordan (1983:36) mentions that “pain is recognized and expected as part of the birth process in almost all societies”. Both groups view labour pain as something “natural” or a “normal” phenomenon that appears in labour process. This pain is needed as a sign that the labour process is about to start. They believe that labour pain is coming from the baby, to give the mother a sign that the baby wants to go out. This sign is similar to the desire for food or water, which tells a person that the body is hungry or thirsty. Thus, their understanding attached to labour pain implies that labour pain is something that does not need to be removed.

Since the community considers labour as a special event, both groups view labour pain as something that accomplishes the labour process. Helman (2001:160-161) mentions that the labour process is more than just a biological event. The impressions that labour without pain is not labour^58 is implied by the second group. They said the presence of pain during labour made the labour process something unforgettable and labour is

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58 One of them used the word “af dol”. Af dol means the complete situation of something.
different from another ordinary occasion. They felt more satisfaction after the labour processes because they able to pass the hard process and faced with tremendous pain. Labour is a “transition event” from the social status of “woman” to that of “mother”. This transition event becomes more special due to the presence of pain. Pain as a “rite de passage” is mentioned in Jordan (1983:37): “Pain of childbirth and the social co-experience of that pain serve to mark birth as one of the significant occasions in the normal round of life cycle events”. Swasono (1998:226) explained about the need of “crisis rites/rites de passage” in every critical phase. “There are universal comprehensions of norms that labour is critical phase in women’s life” (Jordan, 1983:2)

If we found in the stories that the mother feels scared in relation to the labour process, I think it is not because they are scared for the pain. Honestly, it is correct that they feel rather nervous related to the pain, but the biggest element that shapes this feeling is related to their knowledge about the labour process itself. They know that labour is a high-risk event that can lead to complications and death for both baby and themselves.

If the mother feel scare with labour pain, the mothers’ hope to the baby can help them from their nervous and scare of the labour process or the labour pain. They put their awareness attached to pain below their awareness of the result of the labour. They are more thinking about the baby than themselves. Breslin (2002) in his introduction wrote: “pleasurable experience can be strong enough to blunt the fears of deprivation and death”. He said that the hoping for a baby can be strong enough to make the mother can be struggle with the labour pain. I think this is the reason why the women in this community looks like do not see labour pain as the problem even though they know that labour pain is a marvellous pain.

For these post partum mothers the difficulties of labour or high tension of labour pain are always perceived as a “normal” thing. If we compare each of the stories, we see that these five mothers experienced different and various processes related to labour pain. For example, the duration of the labour process is different from one another. There is a mother who experienced labour pain for two hours (Mrs Dua), and there are mothers who experienced labour pain for more than five hours until one or ten days (Mrs. Satu, Mrs. Empat and Mrs. Lima). Even though all of them experienced the tension of labour
pain to be higher than their first perception, one interesting subject is that I never found the word of “traumatic feeling” attached to the experience of labour pain. Even, there was no complaining from the mother who experienced really high tension and long duration of pain (Mrs. Lima). I have some assumptions related to these circumstances. My first assumption is that because of its basic meaning, labour pain is considered as being “normal” and “natural”. This “normality” causes the women to open their hearts as wide as possible and accept everything during the labour process, including the extreme tension of pain. The widely accepted attitude to submit to God’s fate supports this feeling. My second assumption relates to the role of the family. In the community I observed a good support system for the mother during the labour. Support not only comes from the husband, but also from the extended family. This support starts at the beginning of the pregnancy (with the ceremony), and continues during the labour process. If there is a lack of or an inappropriate support system, this will be a significant aspect that may influence the labour experience to become a “nightmare”. The third assumption is related with the community’s knowledge about labour pain phenomenon. If we review the stories, we find that the community provides an alternative explanation for the mother who experienced an unordinary case of labour pain. For example, consider Mrs. Satu’s case. She concluded that her pain was worse than the “ordinary pain” of labouring women in the community. For her, the explanation was because she got a labour complication called kembar darah. This was also her first labour and the baby was a boy. This alternative explanation is provided by the community through their general concepts of labour pain. Based on this alternative answer, Mrs. Satu views that her “abnormal pain” has became a “normal pain” for her case.

Related to the alternative explanation in the community, two others post partum mothers also had similar cases like that of Mrs. Satu. They are Mrs. Lima and Mrs. Empat. One of the general ideas in the community is the views that labour for the third child is easier compared to the first and second. In contrast, these two mothers had a different experience. Mrs. Empat had a Caesarean operation, and Mrs. Lima felt pain

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59 I do not know clearly what the kembar darah complication is. In case the blood comes first, before the baby, in the medical field this means something like placenta previa or solution placenta. But this complication brings a different pattern of pain, and the baby also cannot be born per-vaginam. There is “bloody show”, but this is usual in every labour.
for ten days long. To answer this situation, the community provided an explanation by offering the mendeking\textsuperscript{60} concept. Especially for Mrs. Lima, this was considered, because of her behaviour to break the prohibition. The community’s explanation is a big influence to the mother to experience their “abnormal pain” as a “normal pain”. This rationalization system in the community has a big influence in shaping the perception that labour pain always seems to be “normal” for each case. This “normality” concept can prevent the mother from having traumatic feelings.

Some imagination comes in my head: what about if I visit them during the labour process or at the first day after the labour process, will they provide me with different answers related to these traumatic feelings. I think that one important statement from Mrs. Empat answers my question. She implied that she never heard a woman in her community say that they do not want to have labour anymore due to the pain. She said that she believed that the mother instinct is stronger than these feelings of pain. She said that if I found a case of a mother with anger or traumatic feeling, it is not real answer. That answer is coming because the mother is too tired. She said that usually the labouring mother will forget about the pain when she sees the baby. She is really sure that if a mother accepts her pregnancy, she has enough capability to face the labour pain.

The meaning of labour pain of these five women is built in the long process of their interactions with the people in their community. Looking at these five post partum cases it follows that even though the women perceived that labour pain is the most painful in the world, they did not apply any strategy to make it disappear. They only tried to reduce it. Smith and Bond, 1999 in Glasmann (2000:409-411) explain the role of culture on shaping human perceptions. The meaning of labour pain is connected with the cultural views on labour and pain in general (Behan, 1914; Dick-Read, 1933, 1953 cited by Bonica, in Wall and Melzack, 1984:377). We can observe that what the women said, felt, and perceived, and how they behaved related to labour pain, is the reflection of the general ideas of norms and values present in their community. Thus, to

\textsuperscript{60} Mendeking is the situation where the third labour sometimes is more difficult compared to the others. They cannot explain the reason why these concepts are related to the third. They said their ancestors already had many experiences related to it.
give support for labouring mother in this community, they need supports more than physical supports, but also mental emotional, social and spiritual.

If there are varied experiences on the individual level, this will return to the community and they will try to look for an alternative explanation. The varied experiences in an individual case are viewed as a relativity situation of each individual separately, and it will enrich their knowledge about labour pain. The varied experiences add more knowledge to the community concepts of labour pain. "(...) people are reinstated as active agents in the reproduction as well as in the transformation of culture" (Sahlins, 1985 and Moore 1987 in Hastrup, 1995:79).

Mother’s perception about the presence of typical patterns of labour pain sensation

During my interactions with these five mothers, all of the mothers said that labour pain has special patterns for specific conditions. Even though they believed that every mother has different labour experiences, there is “general pattern” for labour pain. This theme specifically comes from the second group (Mrs. Dua, Mrs. Empat and Mrs. Lima).

Their opinion is based on their multiple labour experiences. They feel that their number of labour experiences is enough for them to make some comparisons about labour pain sensations. Their few experiences help them to make more preparations to control the labour process, and to be aware of details that may happen during labour. In addition, I also heard about these patterns from the others community members during all of the Focus Group Discussions. Below are some patterns that the mother perceives as happening due to the labour pain.

Their first perception of the labour pain pattern is that the tension and the location of labour pain depend on the gender of the baby. They perceive that a boy baby brings more pain sensation compared to a girl baby. For the baby boy the rhythm of the pain sensation is continuous, while for the girl baby it is intermittent. The location of the labour pain for the boy baby is in the entire abdomen, and especially around the waist. For the girl baby, the location of the pain is focussed below the umbilical. Considering
my understanding about the anatomy of the uterus and the biological process of labour, I cannot interpret this situation with a medical explanation. In the biomedical field it is known that the tension and the location of the uterus contraction are being influenced by such cases as twins, congenital defects, or the baby position, but not by the gender of the baby. Initially, I think this pattern is unlikely. Then I feel strange since these mothers are very confident. Mrs. Empat’s case made me think more about it. She believed that her third baby would be a boy due to the pain sensation. She got into a debate with the TBA who predicted that the baby would be a girl. Her prediction was correct. The baby was a boy. During my interview almost most of them admitted similar evidences. These evidence stories present in the community attracted me to think about the correctness of the theory which states that baby gender influences labour pain. My initial ideas related to this first pattern of labour pain dealt with the way people in the community characterize boys and girls. A boy is viewed to be more active than a girl. "(...) there is a proverb that a ‘woman has long hair but short steps’ and a ‘man has short hair but long steps” (statement from comlead 2). I think that this characterization of boys and girls leads to the gender-related experience of labour pain.

When I was thinking over my initial ideas attached to the first pattern of labour pain, I raised the question how it is possible that there are so many correct predictions. The mothers never had Ultrasonographic (USG) examination during their pregnancies. Another possibility that I think can answer this situation is related to the community’s view about the relationship between the mother and the baby inside the mother’s womb. The community believes there is internal communication that can only be recognized by the pregnant woman or labouring mother. I think this condition is like a telepathy process. These mothers declared that they can feel if something is wrong or if the children got sick or had an accident, even though they were in a different place. I think this tight relationship and invisible communication are being built during the nine months while the baby grows inside the mother’s womb. I had my own experience with this mother’s instinct. My mother felt that I got sick in Amsterdam, even though I did not tell her about my condition. My mother said that she felt that something was wrong with me and she called me soon afterwards. Her prediction was correct. This situation is similar to these five mother who have is quite sensitive instinct to feel their labour pain as a “communication way” from the baby to tell their gender.
The second perception of the mothers’ perception on labour pain pattern is related to their feeling that labour pain is reduced with an increase of the number of labours. Related to this view, the biomedical field provides a similar theory. From biomedical concepts it follows that labour for primipara in most of the cases takes longer than for multipara. The explanation for this is related to the elasticity of the biological organ involved in the labour process. Anthropological study, reviewed by Bonica in Wall and Melzack (1984:378), found that this pattern also is known in some other ethnic groups that labour pain is more severe for primipara than multipara. My ideas related to this pattern is that if you have more experience with pain; you will have more capacity to deal with it, because you start to get used to it. Even though the biological process is similar, you read it as different. Our body already has a memory related to this sensation, and the body reads it as something familiar. The meaning of “pain” can be different in this situation.

The third perception related to labour pain pattern is that the maximum tension of pain happens when the head of the baby is almost coming out of the vagina. This maximum tension goes together with a desire that is similar with the desire to defecate. The biomedical field has similar ideas about this pattern. There it was found that in general, for a normal labour, the maximum tension of labour pain happens at the end of the first phase of labour. Bonica in Wall and Melzack (1984:378) also review of different pain intensity in different stage of labour. Pain in the first stage of labour is happening predominantly due to dilatation of cervix. Pain in the late part of the first and second stage is happening due to the stimulation of pain sensitive structures in the pelvic cavity.

The fourth perception of labour pain pattern is that the labour pain disappears after the baby has just come out. This perception is rather different from the physiological point of view. This view explains that the uterus contractions still happen after the baby has been born. If there is no contraction the mother will have bleedings. I have some ideas

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61 First labour
62 Second labour and the next
63 Labour has three phases. The first phase is the full dilatation of the cervix. The second process is the expulsion of the baby and the third phase is the process of delivering placenta
why these five mothers did not feel any pain after their babies were born. The first idea is related to the sudden significant change of the tension of the pain. Even though the contraction of the uterus is still there, the mother does not feel it as pain. The next one is related to their happiness, looking at the baby. The pain is covered by their concentration on the baby.

These four perceptions are the patterns as perceived by these five mothers. Beside these patterns, I was interested in Mrs. Dua’s case. In every labour process, she experienced pain for less than two hours. In the biomedical field the normal labour is more than two hours. If the whole labour process happens in less than two hours, it is called a “precipitate labour”. The dangers of precipitate labour are haemorrhage, uterine inversion and foetus trauma (Tiran, 2000:152). If we consider Mrs. Dua’s case, we see that she passed normal labour and did not have any complication. My idea related to this is that the biological labour process was already happening when Mrs. Dua realized she had some pain. This is also probable because she slept. Initially she felt her sensation as an uncomfortable situation; she felt it as pain when the tension increased.

The experiences of these five Betawi women with labour pain would have been different if they had lived in a different community. Zborowski, 1952, quoted in Helman, 2001:134-135, shows by means of ethnography studies that different ethnic groups will have different pain experiences. These experiences are related to the concepts of the pain and labour concepts that lay in the community and how these concepts related with other general concepts in the community such as the gender concepts.

**Labour pain in connection to religious and ancestral values**

For these five mothers- labour pain is not only related to the biological process, but is also attached to other important values prevailing in the community. These values are of Islamic and ancestral nature. Both values are working together to give big consideration for the mothers to deal with labour pain.
Related to Islamic values, labour pain is viewed as destined by God. Some mothers use the word "KODRAT" to refer to this concept. The mothers believe that they cannot run from their obligation to have labour. They realize that only a woman who has labour automatically also has the labour pain. They believe that God already has prepared every woman with the capacity to deal with labour pain. I think that their attitude to submit to their fate makes their burden of labour painless. This attitude really helps them to cope with the labour pain.

These mothers believe that their God will not create something without any purpose. They believe there is an important lesson behind the presence of pain during labour. Study by McGuire in Helman, (2001:134) shows that "some Episcopalian communities see pain as a "positive" phenomenon, a type of lesson by which they can learn more about life and come closer to God". These mothers felt that labour pain reminded them that they are only humans who are very weak and mortal. This introspection made them keep their attitude to be a good person. Labour pain was also seen as a way to remove some of their sins.

The religious explanation helps them to control their feelings of fear before the labour process starts. First is their submission to the fact that eventually each human will die. This is related with the meaning of Islam as "total Submission to God’s will". Secondly, they believe that everything in this world is coming from God and God will help them to pass this process. God also gives each of them enough capability to cope with the pain. During my fieldwork, there is one hadist that always said by the religious leader during the pengajian to give optimistic feeling in their believers. This hadist comes from surrah Al-insyiraah versus: 6: “Actually, an easiness going together with a difficulty”. I thought this versus really inspiring the postpartum mother to keep going on and feel optimistic. Third factor is their observation that many women can pass this process with ease and without complication. Moreover, their mothers' nice stories also give big influences to them.

Related to the ancestors' values, the mothers believed that to have easy labour (including the low tension of labour pain) they needed to follow these values. We see that almost all of the five postpartum mothers gave the recommendation to follow the
ancestors’ prohibitions during pregnancy and childbirth. An example is Mrs. Dua. She perceived that her easy labour happened because she did follow the ancestors’ prohibitions. Another interesting case is Mrs. Lima. In her first pregnancy she followed every suggestion from her parents. She felt that she got easy labour, and she did not experience too much pain. During her second pregnancy, she tried to test the truth of the prohibitions. Her curiosity to test them related to her background education. Her knowledge is different from that of her parents. In that period she tried to break specific prohibitions related to the eating pattern. Breaking the prohibition on eating was considered to influence the duration of the labour pain as well as the placenta. In her second labour she got a longer duration of pain sensations, and also a placenta complication, in the medical field known as “retensio placenta”\textsuperscript{64}. This experience made her realize that there is some unknown power behind these ancestors’ prohibitions. She said: “now, I belief that breaking the prohibition is not good”. She shared this experience with her neighbourhood. I think that in this way the ancestral values related to labour pain are maintained.

These mothers’ perceptions and experiences with labour pain really reflect that life is like a “mirror”. This value is a basic value behind the general norms of the society and one of basic values in Islamic value that every situation that happens in a labour process, including the pain, is viewed as a reflection of previous attitudes before the labour process. This concept related to labour pain help the society to make sure every mother take care themselves and their pregnancy.

**The social meaning of labour pain**

Looking at these five stories, there is a social meaning attached to labour pain. This social meaning depends on the relationship of the labouring mother with the people that surround her, such as the mother, husband, neighbour and the community.

All of these mothers had the similar perception that labour pain brings them to the “introspection” feeling related to their roles as daughter. They said that through the pain

\textsuperscript{64} The placenta cannot labour by itself. To remove the placenta from the uterus a manual procedure is needed (Tiran, 1997:213)
they remembered that their mothers had to undergo the same efforts when they laboured them. Through this pain they each woman did realize her mother's sacrifice to bring her to this world. They felt very sorry for everything that they thought had hurt their mother's heart. Helman (2001:133) mentions that "pain may therefore be a signal to the individual that he or she is "bad”, and therefore should feel guilty; it may too become an important medium for the expiation of guilt". They imply that if every child would know his or hers mother's difficult labour, there would be no naughty children in this world. For me this situation reflexes that through labour pain the women felt two kinds of roles at the same time, first as a "daughter" and second as a "mother". In the same time these Betawi women felt their responsibility to be a mother for their baby, but they need the support from their mother (like in the Mrs. Tiga case)

Related with the husband, I reviewed all of the labour process of this five post partum mother was accompanying by the husband. Event though they did not wait inside the delivery room, they stayed until the process finished. All of these mothers do not push to have support from the husband. These women felt that their husband cannot do anything with the labour process because everything happening inside their body. During the fieldwork the husband gave respond that during their wife have labour and having labour pain, they also felt some pain. They felt more nervous during that process because they do not know what happen inside. They really worried if their wife and the baby cannot be safety. They also worried about the cost of labour process.

I did not find statements that support the presence of the couvades syndrome for the husband. It is said to be rare that the husband feels labour pain when the wife is in labour process. There is only one case that happened to be like that. This possibility to transfer the pain cannot happen naturally. It needs magic or spell to do it. The significant cases where the husband felt the same feeling as the wife is in the ngidam process during the first month of pregnancy. Many roles of the father during the pregnancy process make the possibility of the couvades syndrome to occur in the labour process become small.

Related with the neighbour, the way the mother expressed the pain by keeping quiet because they thought too much about what their neighbour will say to them. The
opinion that share in that community among the neighbourhoods create some image that good and strong women also will have easy labour and with not really painful. I found if there is a woman who has difficult labour or very painful labour without any complication the neighbourhood considerate that the mother has some fault to someone. In this case, I heard the neighbour also have roles to help the mother looking for the solution.

**Labour pain and the labour helper**

Related to the labour helper the post partum mothers, especially in the second group, explained that there were differences in labour pain, depending on who was the helper. In this respect, there was a different experience of labour pain tension if the helper was a TBA compared to when the helper was a health provider (which is a midwife or a doctor). These mothers perceived that when they felt labour pain, they were more comfortable with the TBA than with the health providers.

With the TBA, they perceived the tension of pain to be less. They perceived the power of the TBA’s spell to be the most important influence on the tension of the pain. The herbs that were used to spread on the abdomen made the labouring mother’s abdomen feel colder. The TBA also recognized which part of the mother’s body needed massage or to be touched.

Before I go further I remark that these mothers made distinction between a normal labour and a labour with complication. They gave me impression that for a normal labour they preferred to be helped by a TBA. For a labour with complications, they preferred to go to the health providers. This opinion is based on their understanding that health providers have more knowledge of the human body, and also have medicines and equipment. They thought that the health providers used modern techniques or unnatural ways to deal with labour or labour pain. They also thought that the TBA used the most “natural” way, because only spells, herbs and massage were used to help with the labour or labour pain.

These mothers’ understanding opposed that of the health professionals. In Jakarta, a midwife has the authority to help with normal labour, and only obstetricians have the
authority to deal with labour complications. The midwives have the paradigm that they take a "physiological" approach to pregnancy and childbirth compared to the medical doctors. This profession reduces the procedure of intervention as much as possible. The meaning of the term "natural" as it used by the midwives is not similar to the way the mothers use it. I think that the presence of new medical technology and equipment has a great influence on this friction. The mothers were not really familiar with the new technology, compared to their familiarity with the TBA methods.

These "familiarity" sense I think play important roles to influence the mother perception on labour pain also. Familiarity with the techniques used by the helper is one of the aspects that made the mothers feel more comfortable with the TBA. Another aspect I think is related to the age of the TBA. The TBA in this community usually is an old woman. Their view is that an old age is a respectful age. Old age also relates to "maturity" and "wisdom". Mrs. Lima stated "(...) I address the TBA with 'nenek', because usually her age is like that of my grandmother". The TBA is considered as a representative of the parents, and a respectful person to the mother. Adler and Hammet in Helman (2001:137) mention that the "placebo effect is an essential component in all forms of healing". They mention that one characteristic of therapy is "access to a relationship with a culturally sanctioned parental figure (the healer)". The stories of their mothers about the easiness of labour in the past due to the help of a TBA also created a beautiful imagination in the post partum mothers.

Another idea related the preferences to choose the TBA is related to the place where the labour was happening. With a TBA present, the mother could labour at home and have a lot of support because more family could attend the labour process than in a clinic. Moreover, the mothers grew up in an environment where the existence of family is very important. The community's concept that it is better to die at home, in the presence of one's family, is also a reason to give labour at home, since the mothers view labour as a process with a "high risk" to die. Thus, home is considered as something familiar and an important environment for them. Perceptions similar to those of the Betawi mother were found by Jordan (1983:49) "Dutch women similarly prefer to give birth at home".
Labour pain and financial matter

In this period of time, almost all of human life cannot be seen free from the thing that we call “money”. In relation to the way the mothers dealt with labour pain, money appeared to be a serious consideration. There are indications that their perceptions on labour pain were also created by their economic conditions.

Before going further, I remark that in Indonesia context a Caesarean operation can only be acquired on medical indication. Recently a new phenomenon has occurred: women, especially from high status, try to get access to this kind of surgery due to their fear of labour pain. To meet this demand, in private hospitals this procedure can be accessed based on mother’s requirement. Furthermore, since 2000, Indonesia has adopted another technique besides an operation to reduce the sensation of pain during the labour process. There are some private hospitals in Jakarta who already apply these alternative methods. The doctors call this technique ILA (Intrathecal Labour Analgesia)\(^65\) (Kompas, July 12, 2001). By using this technique mothers can get pervaginam labour with less pain. These phenomena also occur in the Western countries, where labouring mothers prefer to avoid labour pain and instead have an operation (Bali Post, Sunday, October 13, 2002). However, in Indonesia context for both operation and anaesthesia the costs are very expensive for people coming from the major economic background. In addition, during the time I did my field work, the five mothers only knew the Caesarean operation as a technique used for labour complications. They did not know then about the ILA technique.

From my interaction with these five post partum mothers I learned that all of them felt uncomfortable with regard to the Caesarean operation. First, it is costly; second, they had the opinion that the pain after an operation is worse than the pain in a normal labour; third, an operation means to stay at the hospital, a place that the women always feel uncomfortable with. Since these mothers viewed labour pain as a “good sign”, they really waited for this pain to happen. To them, the presence of labour pain increased the possibility that labour will be in normal process. They worried of there was no pain,

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\(^65\) This technique uses local anaesthesia that is injected into the intrathecal of the backbone. The function is to block the pain sensation without disturbing the other muscle processes. This technique is known in American and Europe since 1997, and in Indonesia since 2000 (Kompas, July 12, 2001; Bali Post, Sunday, Oktober 13, 2002)
because it meant that something wrong was happening inside. If something wrong would happen inside, it meant they needed an operation, something they always tried to stay far from. Mrs. Empat case is good example for this situation.

These mothers have a concept that labour pain is as an indication of the “normality” of the labour process. This pain concept is different from the concept that states that “… pain is a “normal” indication of something abnormal” (Jean Jackson in Csordas, 1994:202). This view explains that pain appears to tell that something is wrong with the body. For example, nausea is a sign that something is wrong with the stomach. If there is an injury or an infection inside a person, he will feel pain. For me, there is no contradiction involved in this point of views; both tell that pain gives a message to the person about something in the body. This message can be a good or bad sign. Both concepts show that pain is beneficial for the person.

4.2.2 Labour Pain Behaviours

Pain behaviour consists of “certain changes in facial expression, grimaces, activity, sound or words to describe the pain condition or to appeal for help” (Fabrega and Tyma in Helman, 2001:129). Reviewing the stories of the five mothers, I found that there are some ambiguities related to their behaviour during labour. Furthermore, their behaviour during the labour process is not always related to the pain.

Looking at the mothers’ stories, I found two ambiguities in their behaviour. Their first ambiguity is that on the one hand they perceived that labour pain is a “normal” condition, but on the other hand they did not want to express this normal pain. They felt shy about it. The second ambiguity is that for this “normal pain” the community required some behaviour of them, and the mothers chose to follow this requirement. The examples of this required behaviour are that the mother was suggested to do some activity. One good example was happening in the case of Mrs. Lima, who was not allowed to close her eyes.

For the first ambiguity, the community’s norms and values are tolerant with regard to expressing the pain, but these mothers preferred to be quiet and did not express their
pain too much. Bonica in Wall and Melzack, (1984: 282) review studies by True, 1954; Meehan et al, 1954; Preisman and whites, 1956, show that there is some women avoided to express their suffering due to labour pain even though they feel really painful. These Betawi women prefer just to whimper, but did not scream or cry when they deal with labour pain. They preferred to read some verses of the Qur’an. I think this quiet behaviour is related to the mother’s effort to gain an ideal image of the labour process and an ideal image of the women. This ideal image comes from the proverb that “beautiful labour is the quietest labour”. “(...) the screaming and crying is coming from the baby and not from the mother” (Wife comlead 6). By knowing that the women keep quiet during labour process, the neighbourhood will think that the process is very easy. This easy process related with the good image that good women will have easy labour. These easy labours also show that this mother has strong personality and ready to be a mother.

Besides gaining an ideal image, another reason for holding the pain instead of expressing it is to prevent labour complications. Mrs. Satu’s case is an example. She pushed herself to keep quiet when she felt labour pain. She worried that if she cried she could not breathe, which would reduce her energy. She worried that if she would lose a lot of energy; something might happen in her labour process that could cause labour complications.

There are two more ideas related to the first ambiguity. First, it is reasoned that that for this “normal pain” God give them the capability to deal with it. Each mother felt that if she would express the “normal pain” people would tease her as a “cengeng” (sentimental) person, and she would be viewed as the woman who was not ready to become a mother. In this community, the image of a mother is that of a person who has a strong personality and a lot of patience. The second idea is related to the concept of the “social body” in the community. The mothers felt that their screaming or crying would make everybody worry about them. Mrs. Lima’s case is a good example. She worried that if she would scream; her husband and her children would be suffering from looking at her. She felt that her patience to hold the pain also could help her husband to be strong. These mothers chose to have pain in order to prevent the other
people from feeling “pain”\textsuperscript{66}. The general concept of “pain priority” in this community really inspired them to behave in this quiet way during labour. They behaved in this way to protect their family. The third, the normal things is not means you can express it directly and to every body. In some culture, stomach pain for defecate is consider as “normal pain”, but it does not mean that an adults people who want to defecate can express their pain openly. No body will blame you to express that pain, but there is some feeling that if it is better to keep it quiet and they know after the process finished.

For me, it is not really clear when labour pain for a Betawi woman in this community is considered as “\textbf{Private}” or as “\textbf{Public}” pain. I found ambiguity in this aspect. At the one hand, it seems that labour pain is a private pain. At the other hand, they tell the husband about their pain. They also like to be wiped, or they allow the TBA to give herbs to their abdomen. From these situations comes my assumption that for this community, labour pain exists as both private pain and public pain. At some level they view it as “private pain”, and at some level they view it as “public pain”. Related to the language of the pain, they prefer to keep the pain for themselves. Related to health seeking behaviour and pain treatment, this private pain is moving to become a public pain. Helman, (2001:133) mentions “in some cultural groups, individual sufferers are encouraged to turn their private pain into public pain within a ritual context of healing”.

For the second ambiguity, the mothers believed that the required behaviours were created based on their ancestors’ experiences. For example, the suggestion to do some activities during the labour pain period. Their reasoning is that by doing an activity, the tension of pain will increase. The increased pain will make the baby come faster. The faster the baby comes out, the faster the pain disappears (related to their perception of the labour pain pattern). Another way of reasoning is that by doing something else, they will not think about the pain (transmitted pain).

Another theme, there is behaviour that happen during the labour process is not related with the pain. We can see in Mrs. Lima’s case. She was crying during the labour process. Reviewing her stories we see that her behaviour was not because of the pain.

\textsuperscript{66} Pain here means something related to worry, scare, and an uncomfortable feeling.
Her behaviour was related to her emotional condition. Her behaviour was caused by her memory of her parents and her previous life. Her crying was related to the meaning of her special pregnancy, the event that she had waited for twelve years. It means that she can control the pain but she cannot control her emotional sadness. Labour pain is something that sometimes it is not the most important aspect to concern by the labouring mother. There is something has more meaning than pain during labour.
Chapter Five

THE BETAWI COMMUNITY'S INTERGENERATION CONCEPTS OF LABOUR PAIN

This section describes the concepts of labour pain present in a few generations of the Betawi community observed in the fieldwork. Based on this description, we could study if there have been changes in labour pain concepts from one generation to the next one.

During my fieldwork, I could not take the total population as the most appropriate sampling system. The limited time of this study only gave me the opportunity to meet with part of the women of the community. The total number of my female informants was 26 people plus the five post partum mothers. They lived in three different RT’s (from a total of eight) in the fieldwork area. Based on the age composition of this group of women, I categorized them into three generation groups. Beside the age, these groups were based on their background, such as education and status. Based on these considerations, they were divided into young, middle and old age. Below is a table that shows the composition of the groups:

<table>
<thead>
<tr>
<th>Group</th>
<th>Group</th>
<th>Number of participant</th>
<th>Age</th>
<th>Status</th>
<th>Education (in average)</th>
<th>Note</th>
</tr>
</thead>
<tbody>
<tr>
<td>Young age</td>
<td>Female teenager</td>
<td>3 girls</td>
<td>14 – 19 years</td>
<td>Single</td>
<td>One Junior and two from Senior high school</td>
<td>Second FGD</td>
</tr>
<tr>
<td>Middle age</td>
<td>Female adult</td>
<td>20 women</td>
<td>20-55 years</td>
<td>Married</td>
<td>Most of them graduated from elementary school and Junior high school. Few of them from Senior high school</td>
<td>First FGD</td>
</tr>
<tr>
<td>Old age</td>
<td>Female old lady</td>
<td>3 women</td>
<td>&gt; 55 years</td>
<td>Widow</td>
<td>Do not have formal education</td>
<td>Formal and informal interviews</td>
</tr>
</tbody>
</table>

*Note: The five post partum mothers are included in the middle age group.*
5.1 Labour pain concepts from three different ages

5.1.1 Labour pain concepts for the old age

The old women that I met during my fieldwork were living in different RT’s. They lived alone in their houses. Their children had already married and had moved to their own houses. One of these three women was the grandmother of Mrs. Satu. Another woman was the mother of the Betawi couple with whom I lived during my fieldwork. The last woman is the traditional birth attendant for the area. Each of them had a number of children, ranging from 5 to 8.

I do not know exactly their ages, they did not remember it. They thought that age is not important. In their time, nobody remembered his or her age. I predicted their ages, based on information from their children. I think that these old women were born around 1930 or earlier. At that time Indonesia was not yet independent. They remembered their time of marriage based on the moment of their first menstruation. Each of these three women had married before they got their first menstruation.

During my fieldwork, it sometimes felt like a meeting with my grandmother. They way they spoke and told me stories sometimes did me make forget my role as a researcher, and made me follow their stories. I observed that in their daily lives these three women were eager to keep their traditions and ancestral values. They spoke in the original Betawi language, and wore their local traditional clothes (sarong and kebaya\textsuperscript{67} nim\textsuperscript{68}). They kept their long hair and used hair buns. I never saw those using shoes; instead they preferred to use sandals. They really liked to do their housework. They still did everything by themselves. They preferred to walk rather than to take the local transportation. Some part of their house still represented a Betawi house from the past. They had a big “bale-bale” in their houses. Their bathrooms used traditional wells. Even though their children bought new stoves for them, two of them preferred to cook in the traditional stove.

\textsuperscript{67} woman’s blouse, the front of which is pinned together, worn with sarong.

\textsuperscript{68} Grandma or old lady
Concerning labour pain, there is a word that I frequently heard from these ladies. The word is "kamprahnya". Based on their explanation, kamprah means that labour pain existed already long before they were born. They thought that labour pain is a natural phenomenon in human life. Labour pain is an ordinary pain, like pain in the morning when they want to defecate. They never thought that labour pain is a problem.

For these women, they understood about labour pain when they experienced it by themselves. All of them gave me the impression that their labour process was very “easy” compared to the ones in the present time. They said that labour complications were rare in their period compared with this period. They said that nobody had surgery in their time.

First lady: "(...) When I was working in the padi field, I felt pain in my stomach. I tried to sit down in the small house near the field. Half an hour after I sat down I felt that I wanted to push something, and the baby was coming out (...)."

Second lady: "I experienced labour for my third baby without realizing it. When I slept I felt some pain in my stomach and I wanted to defecate. The baby was born 15 minutes after I woke up".

Third lady: "(...) all of my labours were easy."

During my interactions with these women, they usually used the words “gampang” (easy) and “biasa” (ordinary) to describe their labour pain. Below is my note related to their concepts of labour pain:

a. Labour pain is perceived as a natural and normal pain in labour. Labour pain is something that does not need to be expressed because it is not a disease, and it is natural.
b. Sometimes they did not know when the labour pain started. The sensation was not clear; sometimes it felt like the desire to defecate. One mother told me that sometimes she did not realize that the baby was coming out between her legs.
c. The tension and the duration of labour pain depend on the baby and the mother’s attitude, the gender of the baby and the number of pregnancies.

The mother is the key person who can make the tension of labour pain reduce or increase. A good mother will have easy labour. If the labour is difficult, the mother should do introspection. One grandma told me the story that there was a case in which the mother had labour complications because she made a fault to her husband. The TBA suggested her to ask forgiveness from him. The labour was
easier after the husband had forgiven her and had stepped out over her body. Beside pain coming from the mother herself, one of the women mentioned that pain also can come from the baby inside. The pain increases if the baby is angry to the mother.

Labour complication is another reason why labour pain increases (Labour complication here is not a complication based on medical grounds. A complication to them was a local complication, such as kembar darah or kembar air). The kembar darah complication brings more pain, and kembar air brings less pain.

A short duration of labour pain is not more than half an hour. The average duration of normal labour is 2 hours. They mentioned the word “Dawunya” (until the time). “Dawunya” means that no action for labour is undertaken, contrary to the biomedical field, they just wait for the labour until the baby comes by her/himself. One grandma said that in the past there has been labour that lasted for one week. She said that even though this case is rare, it shows that a patient waits.

d. Following all of the ancestors’ suggestions, like doing ceremony during the pregnancy, will help to make labour easier. There is some tradition or ceremony that is not practiced anymore by the new generation, such as ngirag and cuci tangan. In order to make the painless, herbs and massage can help to reduce the sensation of labour pain.

For these women, they prefer to have their labour rather than seeing other people having labour. They forced themselves to move and to do something during the labour pain phase. They kept quiet when they could not force themselves anymore. The labour pain concepts for this old age group show that they were really inspired by their ancestors’ values. All their labour happened with a traditional birth attendant. Every strategy that they used to deal with pregnancy and labour was close to “nature”.

5.1.2 Labour pain concepts for the middle age

The members of this group did experience labour pain. On average, the members of this group have three to five children. This group is very important because this group is a

69 During the first pregnancy the mother tried to do abortion, but without success. Therefore, the baby will be angry and will hurt her during the labour process
gateway between the old group and the young group. The middle aged women face two different periods, first the period of their mothers, in which everything used to be traditional and natural, and secondly the periods of their children, with its technologies. In their daily life, they combine these two periods. We can see their furniture houses, their physical performances, and the way they speak as the representations of this situation. The general characteristics of the women in this middle age group are not really different from those of the five post partum mother that are described in chapter four. Below is my summary related to the concepts of labour pain for this group:

a. Labour pain is normal and natural. The middle age women used the word "kodrat". They believed that everything that appears in labour is related to their behaviour. The tension of a "normal" labour pain is unbelievable compared to another "normal pain". It cannot be imagined, and only can be experienced. During my interaction with them, I noticed they usually used some specific words to describe labour pain. The words that were used were: Seribu satu penyakit jadi satu (one thousand diseases becoming one disease) and kapok cabe (I could not translate it to English). My understanding of this term for labour pain is that it is like eating chilli. It is very hot, but we do not get any traumatic feeling. After the hot sensation disappears, we want more.

b. There are some patterns in labour pain. The location and the characteristic of labour pain depend on the gender of the baby. The pain is also related to the number of childbirths. The pain after an operation is more painful than the labour pain in a normal process.

c. They had the tendency to tell their husbands to look for the labour helper. Nobody in this generation did labour only by herself like in the past. They had the tendency to tell their husbands first. But still they chose not to be expressive about labour pain. They suggested dealing with labour pain by praying to the God. During the labour pain phase, some of them forced themselves to move, some of them preferred to stay quiet.

d. Only a few women knew about the use of herbs and massage. The mothers of the women who knew usually was still alive.

e. They kept the ancestors' prohibitions, but they did not know the details of it.
Nowadays, most of these middle age women have their pregnancies examined and have labour with the health providers.

### 5.1.3 Labour pain concepts for the young age

The members of this group (three young teenagers) are very cheerful. Sometimes they felt shy, especially since I am a stranger in their area. Besides in the FGD, I also met them in their daily life. They spend their time in school, and sometimes they also follow some additional course, one of them follows an English language course. They study in a public school, the school where the students are coming from many different ethnic and religious backgrounds. Most of their time is spent in the school and with their friends. They prefer to share stories with friends of similar age. Their typical physical performance is really different from that of their mothers and grandmothers. They use new styles of clothes, newer than their mothers’ clothes. They speak perfect Indonesian. They said that they felt shy if they use the Betawi language. They said that if they speak in their local language, their friends will tease them by using the words “norak” or “kampungan”. Sometimes they used the word “enggak gaul”. That term is related to what is the trend at a certain time. Everything that comes from the West by them is considered as being modern. This trend can be seen from the way they clothe, speak and behave.

The three teenagers were born in 1987, 1989 and 1990. In these years, Jakarta considerably changed compared to the past. Due to their single status, the members of this group did not yet experience labour pain. At the first time I met with them, I got the impression that at their age they were not thinking too much about labour or labour pain. They were more concerned about their studies, or about the kind of jobs they prefer.

Teenager 1 (15 years): “labour must be painful. It is normal but I do not know much about it”.
Teenager 2 (16 years): “labour everywhere is the same, and I do not want think much about it now”
Teenager 3 (18 years): “Every woman will experience it. It is not problem for me”

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70 *Norak or kampungan* is used for not modern or still traditional. In other words, indicating that the trend is not being followed.
Related to their perception on labour pain, they felt that the labour process must be the same everywhere, and also painful. They cannot yet imagine the tension of the labour pain. They had heard about labour pain from the daily conversations in their neighbourhood, sometimes they also heard about it from the women’s conversations in the post partum visit. They also saw movies on the television in which labouring women usually feel pain. They said that probably they will start to think about labour pain after they get married and become pregnant. My notes related to their concepts of labour pain are: labour pain is something which is normal in labour, it is already present since long time ago, labour pain is related to one’s behaviour, and when you have labour pain, it is better to keep quiet.

This group started to ask for the rationality of their ancestors’ prohibitions related to labour pain. They believed that the high number of complications in labour processes in the present time is not being caused by the prohibitions. They believed it comes from the God and the behaviour of the mother, whether she takes good care of the pregnancy or not, whether she eats proper food or not, whether she visits the health provider or not, whether she is diligent or not, and so on. Due to their young age, they think in a simply way.

5.2 Finding Interpretations, and discussion

Looking at these three groups, there are some similarities in their labour pain concepts. They view that labour pain is a normal pain, and it seems to be a “natural” phenomenon in labour. Since labour is a part of a woman’s destiny, they accept the pain as a part of this process. For them, labour pain is known already from a long time ago to women who are having labour. Labour pain was the same in the past as it is now. This raises the question if there are also different perceptions of this pain between generations, especially between the old and middle age groups.

5.2.1 The old age compared to the middle age

Comparing the old and middle age groups, the thing that is transferred completely and strongest is the pattern of labour pain. The members of the middle age group put more
belief in this pattern after they made the comparison with their experiences. All of them agreed that labour pain is something important that must be present in labour. In contrast, there are some reductions in some parts. The first one is related to the ancestors’ prohibitions and the influence. On the labour process is obeying these prohibitions. The middle age does not really know the details of the prohibitions. They only know some prohibitions that are famous, such as not to sit in front of the door, to bring sharp things and so on.

Related to the strategy to reduce the pain sensation, the women in the middle age know that there are herbs and massage to help reducing the pain sensation. Since they had labour with health providers, they do not practise these anymore. In so far these women know these strategies, they only know the general ideas about these concepts. If a middle age woman knows these concepts in details, it is because her mother is still live. I got the impression that they start to forget the knowledge on the kind of herbs that are being used to reduce the pain. Related to the massage, they still believe that massage can help them during the labour process.

The observed behaviour of the informant during the field work (When speaking about labour pain)

<table>
<thead>
<tr>
<th>Old generation</th>
<th>Middle generations</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Choose short sentences, and sometimes without</td>
<td>- Choose long sentences to describe, and</td>
</tr>
<tr>
<td>smiles (serious face)</td>
<td>always with big smiles and laughing</td>
</tr>
<tr>
<td>- Their accent shows that the pain is no problem</td>
<td>- Their accent show that the pain is very</td>
</tr>
<tr>
<td>at all</td>
<td>strong, but they accept it and pass it</td>
</tr>
<tr>
<td>- They do not seem to be proud of labour pain.</td>
<td>- They seem to be proud of having labour pain</td>
</tr>
<tr>
<td>- Rather shy when they speak about pain behaviour</td>
<td>- Rather shy when they speak about pain</td>
</tr>
<tr>
<td></td>
<td>behaviour</td>
</tr>
</tbody>
</table>

From the table we can observe that there a small differences on how they tell stories about labour pain. The middle aged is more expressive compared to the old aged. There is a difference in how they experience the pain. The middle aged experienced more pain than the old aged. For the middle aged this “normal” or “natural” pain is very painful compared to the perceptions of the old aged women, who stated that the “normal” pain is really “easy”.

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At the first time I heard the term “easy” being used in the old age group, I thought it was because they put a different meaning on the term “easy”. I think the term “easy” was being used as a way to cope with the difficult process of labour pain. But when I heard about their labour processes, I agreed with them that their processes had been very easy compared to all the labour cases that I have seen. If I take the average, their labour processes took no more than 3 hours for them. It is amazing compared to the labours that I observe during my work as a midwife.

For me this “easy” term has two implications. First, it implies that labour pain was indeed really easy and the process really fast, second, they speak in the opposite way. There is a habit in this community, to say something “horrible” as “good” (they speak in opposite word). If something is wrong, they just keep quiet. For example, they called the smallpox disease as “sakit bagus” (good disease). This word is used in order to cure the disease, and to make the ill person feel more confidence in dealing with the disease. In that time, if labour pain was very painful, they spoke about it in opposite words, to make the pain seem reduced. The term “easy” was used in order to make their children not feel scary with the labour process. This term was also used to show to the children that labour will be easy if the ancestors’ suggestions were followed.

Another possibility of the presence of the “easy” term in the old age is because they gave a different meaning to it. Their time was occupied with physical work, like on the fields. It made labour pain to be nothing for them. Another possibility may be that they forgot about the pain because they do not remember it correctly anymore. I thought the term “easy” was being used to give the impression that they were good women (related to: good women will have easy labour). Whatever the reality was in the past, they transferred the knowledge of “easy” labour to their children. This “easy” term has a strong relationship with the perception that labour pain is a “natural” pain in labour. In the memories of the old women, the past seemed to be an easier time than the present days are. Nowadays, the old ladies see a lot of surgery takes place. In the past, even though they worked hard in the field, they did not face food problems, and there were no schools for education. Nowadays, everything costs money, but there is no work to produce the money with.
Related to pain behaviour, there is a tendency that the old aged makes the labour pain to be a more private pain compared to the middle aged women. Some of them have laboured by themselves, without their husbands knowing about it. The middle aged women have the tendency to put labour pain somewhere between private and public pain. I mean they still consider to keep quiet and do not expressing the pain, but for health seeking and sharing to other people they seem to be more expressive. I thought that this situation is related to the knowledge of the middle aged which they got from study and their interactions with other people. They wanted to share their pain with the people who these women think also have a responsibility, that is, their husbands.

Another idea concerning this situation is related to the phenomenon in Jakarta that the concept of “social” body is being abandoned by the people. People start to make a priority for themselves. In the past the community’s condition or other peoples’ thoughts were the first priority, more than the people themselves as individuals. Next, idea is related with the place for labour or delivery. In the past, the old women can do that process at home. In that time, the number of TBA sometimes cannot reach the labouring mother. Nowadays every labour in Jakarta is happening in the private clinic or in the hospital. The labouring mother needs somebody who closed with her to bring her to the clinic and the hospital. The husband also is the person who has responsibility to pay the cost of the labour process.

Basically, this differences between old and middle age is happen in the level of strategies to deal with labour pain. Their basic principle attached to labour pain is still the same. Labour pain is something that consider as “normal” and “natural” phenomenon.

5.2.2 The young age compared to the old and middle age

If there are some differences in concepts between the old and the middle generation, we can presume that these differences will be greater in comparison to the young age group. The young age group does not know exactly about the patterns of labour pain, the required position during labour, the function of the prohibitions and what these prohibitions exactly are. They really do not know the local term for a labour
complication and its influence, or the herbs that are usually used to reduce the labour pain. They do not even know the name of the herbs. The old aged women or some women in the middle age group preferred to go to a TBA, whereas the young aged members felt worried to go to the TBA. They thought that a midwife or doctor can do better in dealing with labour or labour pain than the TBA. They also did not really believe the spells from the TBA.

I think the gap between on one side the old and middle aged and on the other side the young aged exists, because someone from the young generation has more chance to be exposed to the information from the media, rather than to listen to his or hers grandma’s or mother’s stories. In the afternoon, the young aged prefer to do activities with their friends rather than to stay in the bale-bale or open space together with their mothers. Beside media information, another possible factor that may influence this situation is the level of education. Moreover, change of demographic environment brings new people from different ethnic background to stay in their area and to interact with them. Based on information from several community leaders, recently the proportion between the original Betawi people in that area compared to the past is becoming less. Now the proportion of Betawi people is only 60% compared to the new comers. This situation has important implications because it means that cultural interaction is happening. This interaction will bring new nuances to the labour concepts.

Comlead 1: “I think the modern era has already changed everything. I know that many norms and values are still being kept by Betawi people. But in fact I know that some of the norms and values are different from the past. They think they must follow the situation of this era”.

Even though there is much interaction, and the density of people living in the area is increasing, it does not mean that everything will change. To the young age group, the basic value that labour pain is a “normal” and “natural” pain still holds. Different are however the ways strategies are developed to face the labour pain. Even though the young generation has more biological knowledge and has a new life orientation compared to the middle and old aged, the basic principle on how they give meaning to something is still not really different.
The tradition of the next generation to live near their parents allows for the transmission of the meaning of life, including the meaning of labour pain. The presence of ceremony and some tradition during pregnancy and post partum also helps keep the young age aware of the community concepts on pregnancy and childbirth. Knowledge about labour pain is not only transferred from mother to daughter but also from neighbour to neighbour. By this way, the community can keep their labour pain concepts in consistent.
Chapter Six
CONCLUSION

The Betawi women in this community admit that pain is appearing in the labour process. They perceive that labour pain is a "normal" or "natural" pain that accompanies the labour process. For them, pain is needed in labour as a "sign" of normality and as "rites de passage" from woman to mother. Even though these Betawi mothers experienced very extreme pain, they always considered their pain as a "normal" pain for their cases. They never see labour pain as a problem. Their acceptance of their destiny of their God, the hope to the baby and the role of the community in providing explanations play important roles here.

For the women in this Betawi community, the community’s knowledge and values of labour pain helped them to create a basic perception on labour pain. Their perceptions on labour pain are basically created by their perception of the labour process itself. The general concepts present in the community, such as the family concepts, the woman concepts, the religious and ancestral concepts, and the pain concept in general also play important roles in shaping the mothers’ perceptions and experiences attached to labour pain. "Culture is the principal force in shaping the typical personality of a society as well as the role of personality in the maintenance of cultural institutions" (Nanda and Warm, 2002:86).

For these Betawi women, labour pain as a "normal pain" does not mean that they do not do anything to reduce the tension of the pain or to make the labour process easier. They undertook some efforts since they got pregnant as well during the labour process. Doing some ceremony, following the prohibitions, making closer relationship with their God are example of their efforts. Their belief that life is like a "mirror", created a serious influence in these circumstances.

For these Betawi women, their perceptions and experience of labour pain could be related with emotional aspect, financial matter and their relationship with the people surrounding them, including the labour helper. These relationships give big influence to
their behaviour during labour. Some behaviour that they showed during labour process is not always related to the labour pain. These relationships also bring some ambivalence related to Betawi mother's behaviour when they deal with labour pain. For the pain that is considered as “normal pain” the mother choose to be quiet and follow such requirement behaviour.

Comparing the perceptions on labour pain of Betawi women of three generations (young, middle and old age) shows that there is no change of the basic concept that labour pain is a “normal” and “natural” phenomenon. This stability is gained by transmission of knowledge from mother to daughter, and the daily conversations and observations in their neighbourhood.Labour pain concepts have changed in the context of strategies to deal with it, and the elements that can influence the tension of labour pain. These changes especially happen in the young age members due to the role of media, educational background, and their interactions with the new people.

Based on exploration to the perceptions and experiences of labour pain of these five Betawi mothers and generation comparison, we can have some sense that “birth as bi-social events” (Jordan, 1993:1). Thus, these socially construction of labour will attach everything that happens during labour. Helman (2001:128) consider “in all of these situation there is more to pain than merely a neurophysiological event; there are social, physiological and cultural factors associated with it that also need to be considered”.

For the Betawi women in this community, labour pain is a topic that reminds them of all basic roles in their life. Labour pain is in the intersection between their existence as a woman, a daughter, a wife, a mother, a member of the community and also a God creature. Morris (1991:1) said that “pain is the intersection between mind, body and cultures”. This situation will be an important consideration for all the labour helpers, because it means that to support women that deal with labour pain, the labour helpers must increase their sensitivity on those aspects.
APPENDIX A

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Moerman, Daniel

Morris, D

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Bali Post

Kompas newspaper
Problem analysis Diagram

Explanation:
The focus of this study is inside the box with double line (==)
# LIST OF THE INFORMANT

Post partum mothers

<table>
<thead>
<tr>
<th>No</th>
<th>Initial</th>
<th>Age when marriage</th>
<th>Nowadays age</th>
<th>Education</th>
<th>Job</th>
<th>Religion</th>
<th>Number of this birth</th>
<th>Other source Information</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Husband Wife</td>
<td>Husband Wife</td>
<td>Husband</td>
<td>Wife</td>
<td>Husband</td>
<td>Wife</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>Mrs. Satu</td>
<td>24 23</td>
<td>25 24</td>
<td>Senior high school</td>
<td>Elementary school</td>
<td>Driver</td>
<td>Housewife</td>
<td>Moslem</td>
</tr>
<tr>
<td>2</td>
<td>Mrs. Dua</td>
<td>20 15</td>
<td>43 38</td>
<td>Junior High School</td>
<td>Elementary school</td>
<td>Worker</td>
<td>Housewife</td>
<td>Moslem</td>
</tr>
<tr>
<td>3</td>
<td>Mrs. Tiga</td>
<td>24 23</td>
<td>34 33</td>
<td>Senior High School</td>
<td>Junior high School</td>
<td>Worker</td>
<td>Housewife</td>
<td>Moslem</td>
</tr>
<tr>
<td>4</td>
<td>Mrs. Empat</td>
<td>29 24</td>
<td>44 39</td>
<td>Senior high school</td>
<td>Senior high school</td>
<td>Government employee</td>
<td>Housewife</td>
<td>Moslem</td>
</tr>
<tr>
<td>5</td>
<td>Mrs. Lima</td>
<td>23 19</td>
<td>41 37</td>
<td>-</td>
<td>Junior high school</td>
<td>Private employee</td>
<td>Housewife</td>
<td>Moslem</td>
</tr>
</tbody>
</table>

**Explanation:**

(*) ¾ means the mother is the third daughter from four children

(*) 1/7 means the mother is the first sister from seven children

(*) 3/3 means the mother is the third sister from third children

(*) 3/9 means the mother is the third sister from nine children

(*) 1/5 means the mother is the first sister from five children

Appendix C
## Community leaders

<table>
<thead>
<tr>
<th>No</th>
<th>Initial</th>
<th>Husband</th>
<th>Wife</th>
<th>Husband</th>
<th>Wife</th>
<th>Education Husband</th>
<th>Education Wife</th>
<th>Job</th>
<th>Religion</th>
<th>Number of children</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Comlead 1 + wife</td>
<td>22</td>
<td>20</td>
<td>47</td>
<td>45</td>
<td>Elementary school</td>
<td>Elementary school</td>
<td>Private employee</td>
<td>Moslem</td>
<td>3</td>
</tr>
<tr>
<td>2</td>
<td>Comlead 2 + wife</td>
<td>17</td>
<td>20</td>
<td>38</td>
<td>35</td>
<td>Junior High School</td>
<td>Elementary school</td>
<td>Government employee</td>
<td>Moslem</td>
<td>4</td>
</tr>
<tr>
<td>3</td>
<td>Wife of comlead 3</td>
<td>24</td>
<td>22</td>
<td>42</td>
<td>40</td>
<td>Senior High School</td>
<td>Senior High School</td>
<td>Private employee</td>
<td>Moslem</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Comlead 4 + wife</td>
<td>22</td>
<td>26</td>
<td>44</td>
<td>40</td>
<td>Senior high school</td>
<td>Senior High school</td>
<td>Government employee</td>
<td>Moslem</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Wife of comlead 5</td>
<td>-</td>
<td>21</td>
<td>-</td>
<td>39</td>
<td>Junior high school</td>
<td></td>
<td>Private employee</td>
<td>Moslem</td>
<td>2</td>
</tr>
<tr>
<td>6</td>
<td>Comlead 6</td>
<td>-</td>
<td>38</td>
<td>-</td>
<td></td>
<td>Senior high school</td>
<td></td>
<td>Government employee</td>
<td>Moslem</td>
<td>2</td>
</tr>
<tr>
<td>7</td>
<td>Comlead 7</td>
<td>22</td>
<td>-</td>
<td>55</td>
<td>-</td>
<td>Senior high school</td>
<td></td>
<td>Government employee</td>
<td>Moslem</td>
<td>4</td>
</tr>
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</table>

## Other informants

<table>
<thead>
<tr>
<th>No</th>
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<th>Gender</th>
<th>Age</th>
<th>Job</th>
<th>Number of children</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Makone</td>
<td>Female</td>
<td>± More than 80 years old</td>
<td>Traditional birth attendant</td>
<td>5</td>
</tr>
<tr>
<td>2</td>
<td>Mak two</td>
<td>Female</td>
<td>± 70 years old</td>
<td>Housewife</td>
<td>8</td>
</tr>
<tr>
<td>3</td>
<td>Mak third</td>
<td>Female</td>
<td>± 65 years old</td>
<td>Housewife</td>
<td>6</td>
</tr>
<tr>
<td>4</td>
<td>Religious leader 1</td>
<td>Female</td>
<td>± 44 years old</td>
<td>Religious teacher</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Religious leader 2</td>
<td>Female</td>
<td>± 52 years old</td>
<td>Religious teacher</td>
<td>7</td>
</tr>
<tr>
<td>6</td>
<td>Religious leader 3</td>
<td>Male</td>
<td>± 55 years old</td>
<td>Non government employee and religious teacher</td>
<td>7</td>
</tr>
</tbody>
</table>

Appendix C
### Focus Group Discussion

<table>
<thead>
<tr>
<th>FGD</th>
<th>Date</th>
<th>Audience</th>
<th>Number of participants</th>
<th>Events</th>
</tr>
</thead>
<tbody>
<tr>
<td>one</td>
<td>June 7, 2005</td>
<td>Female</td>
<td>6</td>
<td>After pengajian</td>
</tr>
<tr>
<td>Two</td>
<td>June 12, 2005</td>
<td>Male</td>
<td>8</td>
<td>After paguyuban</td>
</tr>
<tr>
<td>Three</td>
<td>June 17, 2005</td>
<td>Female</td>
<td>4</td>
<td>Family conversations</td>
</tr>
<tr>
<td>Four</td>
<td>June 19, 2005</td>
<td>Female</td>
<td>6</td>
<td>After pengajian</td>
</tr>
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</table>

### Generation and Group Details

<table>
<thead>
<tr>
<th>Generation</th>
<th>Group</th>
<th>Note</th>
<th>Number of Participant</th>
<th>Status</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Young</td>
<td>Female teenager</td>
<td>Second FGD</td>
<td>3 girls</td>
<td>Single</td>
<td>14 – 19 years</td>
</tr>
<tr>
<td></td>
<td>Male teenager</td>
<td>Formal and informal interview</td>
<td>2 boys</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Middle</td>
<td>Female adults</td>
<td>First FGD</td>
<td>20 women</td>
<td>Marriage</td>
<td>20-55 years old</td>
</tr>
<tr>
<td></td>
<td>Male adults</td>
<td>Second FGD</td>
<td>9 men</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Old</td>
<td>Female old lady</td>
<td>Formal and informal interview</td>
<td>2 person</td>
<td>Widow</td>
<td>&gt; 55 years old</td>
</tr>
</tbody>
</table>

Appendix C
INFORMASI PENELITIAN
(versi Indonesia)

Judul penelitian : Persepsi dan pengalaman perempuan Betawi terhadap nyeri persalinan.
Nama Peneliti : Juli Oktalia
Program Studi : Anthropologi Kesehatan
Universitas : Amsterdam, Belanda
Tujuan penelitian : Untuk memahami bagaimana perempuan Betawi mempersepsikan dan mempunyai pengalaman tentang nyeri persalinan serta bagaimana pengaruh dan peran dari norma dan nilai yang ada di budaya Betawi terhadap persepsi dan pengalaman tersebut.
Tempat penelitian : Jakarta Timur
Waktu penelitian : 22 Mei 2005 – 30 Juni 2005

Kode Etik Penelitian
1. Seluruh responden dilindungi keamanan dan kerahasiaannya
2. Nama asli responden tidak akan disebutkan dalam hasil penelitian ini
3. Tidak ada paksan sama sekali dalam mengikuti penelitian ini
4. Informasi tentang penelitian ini akan diinformasikan kepada responden dalam bentuk lisan dan tulisan
5. Jika akan digunakan alat perekam dan sebagainya hal tersebut akan dilakukan dengan seijin dari responden
6. Data-data yang digunakan dalam penelitian ini adalah data-data yang hanya ada kerangka penelitian ini
7. Responden mempunyai hak untuk mengundurkan diri dalam penelitian ini dan seluruh data yang bersangkutan tidak akan di ikut sertakan dalam penelitian

Letter of consent

Setelah mendapatkan informasi ttg penelitian yang berjudul “Persepsi dan pengalaman perempuan Betawi tentang nyeri persalinan” ini, dengan ini menyetujui menjadi salah satu sukarelawan dalam penelitian saudara Juli Oktalia (mahasiswa Anthropologi Kesehatan Universitas Amsterdam).

Tertanda

Respondent
(kode nomor ...........)
Betawi women’s perceptions and experiences with labour pain

Juli Oktalia

Medical Anthropology

UVA (Universiteit van Amsterdam, The Netherlands)

To gain an in-depth understanding on the perceptions and experiences of labour pain of Betawi woman, and to explore the roles of Betawi community’s norms and values on labour pain in the process of shaping those perceptions and experiences. Related to the context of the present Betawi Community, the possibility of a change in perceptions of labour pain from previous generations to the present generation is an important consideration in this study.

East Jakarta

Mei, 22 until June 30, 2005

1. This letter of research information will be given to the respondent both written and oral
2. All of the respondents is guarantee their securities and confidentiality
3. The researcher must put high respect to all of the respondent
4. The original name of the respondent will not include in this research report
5. There is no compulsion to be the respondent of this research
6. If the researcher will use any research tools such as tape recorder, it will be used based on the permission of the respondent
7. Every data that will used in this research is in the context of the research objectives
8. Every respondent have right to drop out from the research and every document related to him or her will be dismissed.
Appendix E

Question samples for interview

NOTE!
- Below are samples of questions for the interviews and FGD.
- The questions samples are only general guide. In the field the questions will asked in informal way (conversations) and with open-ended technique
- The questions will be expanding as much as I can to get in depth information.

1. Betawi women (post partum mother, her mother and so on)
   a. Personal situation
      - Where and when she was born?
      - How does she grow? (What kind of setting)
      - What kind of education does she have?
      - When was she married? (at what age)
      - Who is the source of the family income? Does she work or not?
      - What religion does she believe in?
      - What are the family’s structures or genealogy?
      - Where do the families stay? (in big compound or separate)
      - Is there someone who works as a health provider in the entire family?

   b. Labour pain: perceptions and experiences (including pain behaviour)
      - The number of these labours (first, second, or etc)
      - Are there any people who company you during labour process?
      - Could you explain about the process of your childbirth or labour? How, where, when, and who help the process?
      - Could you choose the person who helps you in labour?
      - What they do during the labour process?
      - How did you feel during the process? (Especially about the pain in labour, for her pain in labour is problem or not and why she feel like that?)
      - What things do you think increase your pain sensation, and what kinds of things can reduce the pain?
      - Which part of your body you felt as the most pain during the labour process?
      - How did you communicate the pain that you felt to the people surrounding you?
      - What kind of expectation did you have related the labour process?
      - If the number of labour is not a first labour, are there any differences between the present experience compare to the past? Could you please explain it?

Perceptions
- How did you perceive labour before you had your own experiences? And why did you perceive it like that?
- Do you receive any information of labour pain before you had your own experiences?
  - What kinds of information and from where? And with whom you talk to? And why?
- What are your mothers perceives of labour pain?
- Do you talk about labour process, especially about labour pain with your husband? And could you explain why?
- How do you perceive pain in labour after you had your own experience?
- Where do you think labour pain comes from?
- What kinds of treatment that you suggest to support women during labour?
- Are you having some effort or preventive effort before the labour process?
- Are there any ceremonies or traditions that related to labour or especially related to pain in labour?
- Based on your opinion, what do you think are Betawi society’s perceptions of labour pain?
Appendix E

- Does the society have some expectations related to behaviours during labour, especially in dealing with the pain or to behave during labour?

3. The husband of the post partum mother

a. Personal situation
   - How old is he?
   - What kinds of job he has?
   - Where did he grow?
   - What are the family structures?
   - What religion does he believes in?

b. Labour pain: perceptions and experiences (including supports behaviours)
   - What do you think about the process of his wife’s labour?
   - Based on your observation, what happens during the process?
   - Do you think your wife had some pain during labour? When and how do you recognize it?
   - What do you think about labour and especially about pain in labour?
   - What do you think Betawi societies will views about pain in labour?
   - Do male or husband has some discussion about the labour process? (Yes or not why they answer like that)

4. Community leaders in that particular society

Labour perceptions
   - How do you perceive the labour process?
   - What are the norms and values that are related to the labour process for Betawi Society?

Labour pain perceptions and changes possibility
   - What do you think about labour pain? How is it related to the concepts of pain in general in Betawi Society?
   - Are there any specific norms and values related to labour pain?
   - What kinds of roles of the family or the society usually do when there is a Betawi woman in labour?
   - Does society have some expectations about women in labour?
   - Are there any changes in Betawi society’s concepts about dealing with labour pain, from the previous generation to the new generation? If there are any changes, how can it be explained?

5. Religious Leaders in that particular society

Religious values and norms related to labour pain
   - How do the religious leaders think and perceive labour?
   - How do the religious leaders think and perceive about pain in general?
   - How do the religious leaders think and perceive about labour pain?
   - How must people who believe in the religion deal with labour pain?
   - Are there any mentions of labour pain in religious texts? Does it specify how women must deal with this pain? If yes, please explain
Guide for FGD

**FGD (Focus group discussion)**
The groups are consisting of Betawi mother in that particular society who wants to be volunteers in my research.

Focus questions on perceptions of and experiences with labour pain in the past and present
I will ask two focus questions to the group and discuss about it:
1. What do you think about labour pain and how you experienced it?
2. Are there any changes in perceptions and experiences in the previous generation and the young generation? If yes, how can it be explained?

*Note: the rest of question is following the question structures for post partum mother and also follow the interesting theme that come out during the FGD.*

**Question for the teenager**
I asked them to make an imagination. If I come from the other planet and I want to know how human in the earth perceive about labour pain. I asked them to be the only human that I can find. What will they answer about labour pain?