Postpartum Maternal Care Tradition in Manunggang Jae Village Padangsidimpuan City, Indonesia

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Abstract:
Maternal and child health problems cannot be separated from cultural factors in the society. One example of culture related to maternal and child health is the marapi tradition carried out by the puerperal mother in Manunggang Jae Village, Padangsidimpuan City. Marapi tradition is a tradition of fumigating or heating a mother who has just given birth and her baby for 40 days. This study aims to explore more information about the practice of postpartum maternal care in Manunggang Jae Village, Padangsidimpuan City. This research is a qualitative research with phenomenology design. Data collection was conducted through in-depth interviews with 8 postpartum mothers, traditional leaders and health workers in October 2018 until August 2019 in Manunggang Jae Village, Padangsidimpuan City. The results showed that postpartum maternal care was based on hereditary traditions, the types of care were fumigation of the mother and baby during puerperium and standing on a fireplace (manjonjongi api). The community believes this practice makes mothers recover faster and babies are stronger but in terms of health this tradition has a negative impact on the health of postpartum mothers and newborns.

Keywords:
tradition; postpartum care; maternal health; infant health; Indonesia

I. Introduction

Maternal and Child Health Problems (MCH) is inseparable from socio-cultural and environmental factors in the communities where they are located. H. L. Blum (1974) in Notoatmodjo (2012) explains that four main factors that influence the degree of public health. These factors consist of behavioral or lifestyle factors, environmental factors consisting of economic, social, political, and cultural conditions, health service factors, and genetic or hereditary factors. One of the fundamental causes of the still high death of mothers and children is culture. Cultural background influences individual beliefs, values and habits, including the health care system and how personal health is implemented (Manalu et al, 2012).

Indonesia consists of thousands of large and small islands which are inhabited by hundreds of ethnic groups with a variety of cultures has provided a special feature. The behavior of the community, especially traditional communities, is reflected in their behavior utilizing the intellectual property of local people in the form of their traditional knowledge and biodiversity in their environment. Cultural practices related to health are partly claimed by "modern" knowledgeable people as one of the causes of poor health status of the local community (Angkasawati, 2015).

Community groups that still maintain the local culture in the practice of pregnancy care, childbirth and childbirth still exist in several regions in Indonesia, such as the sei tradition
practiced by the people in East Nusa Tenggara. Sei tradition is a tradition of smoking a new mother giving birth to her baby for 40 days. Postpartum care by warming the body has an impact on the mother and baby because the mother and baby are exposed to the smoke generated from burning the charcoal. Research on sei culture in East Nusa Tenggara shows that there are 37.4% of mothers and 43.3% of babies who experience respiratory problems caused by air humidity, ventilation rate, lighting, dust content that has exceeded the recommended levels recommended by the Ministry of Health (Anwar and Soerachman, 2014).

Similar traditions can also be found in other regions, namely in Toba Samosir Regency, which is better known as mararang. Mararang is done after the mother and baby are cleaned of blood after delivery. This tradition is usually done approximately 40 days after giving birth. The mararang tradition is to burn wood or charcoal until it becomes embers and then placed next to or under the bed of the mother and baby. This tradition is carried out to provide warmth to the mother and baby and to help the process of cleaning the dirty blood of the puerperal mother and also accelerate the recovery of maternal health. When doing the Mararang tradition, mothers often sweat as well as their babies. Some babies have a rash on the skin due to room temperature that is too hot (Sitorus, 2017).

Padangsidimpuan City also has a post-natal tradition called "marapi". The marapi tradition is a tradition of fumigating or heating a mother who has just given birth to her baby for 40 days. The marapi tradition has been carried out by the community in Padangsidimpuan City for generations. Mothers in Manunggang Jae Village always does marapi after giving birth unless the delivery is done by the cesarean process. The delivery process is mostly done at home, besides that there are still deliveries assisted by the dukun. Although childbirth has been assisted by health workers, the dukun still accompanies and follows the delivery process and participates in caring for the postpartum mother and her baby.

During the marapi, mothers and babies will breathe polluted air because the fuel used for marapi is biomass fuel (charcoal or firewood, orange leaves and clove leaves). The results of incomplete combustion of biomass fuels produce various kinds of health-damaging substances such as fine particles (PM2.5) or small particles (PM10), ozone (O3), nitrogen oxides (NOx), carbon monoxide (CO), polyaromatic hydrocarbons (PAHs), non-methane volatile organic compounds (NMVOCs) and sulfur dioxide (SO2). Exposure to pollutants resulting from incomplete combustion can adversely affect health. The impact is quite diverse ranging from an allergic, irritant, carcinogenic and mutagenic. Exposure to indoor air pollution can cause various adverse health effects on children and adults, from respiratory illnesses to cancer to eye problems. Poor ventilation can also exacerbate health risks posed by indoor pollutants (WHO, 2018).

Most people already know that the marapi tradition can pose health risks to mothers and babies. Postpartum mothers continue to carry out the tradition of marapi on the advice of their families and their desires because they believe the marapi tradition can help their recovery process after giving birth.

II. Review of Literature

Padangsidimpuan City is one of the cities in Sumatra Utara Province, Indonesia. Consisting of 6 districts, 37 villages, and 42 villages with an area of 114.66 km² and a population of about 228,429 people with a population density of 1,992 people/km². Manunggang Jae Village is one of the villages in the Padangsidimpuan Selatan District with a...
geographical location bordering: North of Perkebunan PK Village, South of Huta Padang Village, West of Pekebunan PK Village and East of Perkebunan PK Village. Manunggang Jae Village is surrounded by rice fields and rubber plantations and is about one km from the main road with an area of 193 Ha with a population of 2978 people and several households 478. The closest health worker that can be reached by the community is one village midwife assigned by the government and residing in the village, and one midwife who is a native of Manunggang Jae Village. The closest health center is Labuhan Rasoki Public Health Center which is about 3.6 km from the village. The population in Manunggang Jae Village consists of various tribes with the majority ethnicity being the Mandailing and Javanese tribes. Manunggang Jae village is divided into four hamlets, hamlets one and four inhabited by the majority of Javanese tribes while hamlets two and three are inhabited by the majority of mandailing tribes. Mandailing tribe has a variety of traditions that have existed since ancient times and have been carried down through generations by the community and are still preserved today.

2.1 Postpartum Care

The postnataal care that is usually performed by mothers in Manunggang Jae Village is a series of activities which are provisions that were passed down from their ancestors. The values that underlie the implementation of puerperal care are mainly for the health of new mothers giving birth so that their health can recover quickly and be strong quickly. Also, by doing marapi, it is expected that the mother does not often feel cold, helps the process of cleaning dirty blood and can accelerate wound healing. The tradition is also intended to warm the baby so that the baby does not get sick quickly due to cold. The practice of marapi tradition consists of marapi and manjonjongi api.

2.2 Marapi

The postnatal care that is usually performed by mothers in Manunggang Jae Village is a series of activities which are provisions that were passed down from their ancestors. The values that underlie the implementation of puerperal care are mainly for the health of new mothers giving birth so that their health can recover quickly and be strong quickly. Also, by doing marapi, it is expected that the mother does not often feel cold, helps the process of cleaning dirty blood and can accelerate wound healing. The tradition is also intended to warm the baby so that the baby does not get sick quickly due to cold. The practice of marapi tradition consists of marapi and manjonjongi api.
Marapi is a tradition of fumigating or heating a mother who has just given birth to her baby for 40 days (figure 3.). Marapi is done by putting a fireplace under the mother's bed. The materials needed for the fireplace are charcoal from coconut shell (figure 4. right) or charcoal from firewood (figure 4. left) which is used to heat the mother and baby by burning it and placing it under the bed.

![Figure 3. Charcoal from firewood (left) and charcoal from coconut shell (right)](image)

Before entering the period of charcoal delivery has been prepared by the mother and family. The charcoal is obtained by burning wood or coconut shell until it becomes charcoal, after all the wood or coconut shell is burned it will be doused with water so that the fire dies. Then the charcoal is dried in the sun to dry, drying time depends on weather conditions. If the weather is hot, drying the charcoal will last for two or three days.

![Figure 4. Clove/syzygium aromaticum leaves, syn. eugenia aromaticum (top left), cinnamon leaf/cinnamomum verum, sin. c. zeylanicum (top center), patchouli/pogostemon cablin leaf (top right), taso leaf/clerodendrum serratum (bottom left) and orange leaf/citrus hystrix (bottom right)](image)

Besides charcoal, certain leaves are also needed in the implementation of marapi. Some types of leaves that are most often used for fire manjonjongi are clove/syzygium aromaticum, syn. eugenia aromaticum, cinnamon leaf/cinnamomum verum, sin. c. zeylanicum, patchouli/pogostemon cablin leaves, taso/clerodendrum serratum leaves and orange/citrus hystrix leaves (figure 5.). The use of leaves is intended so that the puerperal mother does not smell rancid and to eliminate the smell of white blood.
When moms do marapi tradition, all family and community members play a very important role. The role of family members, especially husbands and parents, is very helpful and determines the health and safety of mothers. After delivery, the husband or other family members will prepare a fireplace that is used to heat the mother and baby. The fireplace container uses a crock or basin that is no longer in use. The cauldron/basin is filled with soil until almost half of the cauldron, then on the ground is put ash from the rest of the cooking using firewood. After being filled with ash then firewood is put to light the fire, after the fire has ignited and firewood has produced coals, firewood will be taken and only the embers stay in the fireplace. After that, the charcoal will be added.

Marapi is done as soon as the mother and baby have finished cleaning by the childbirth helper. The first week after giving birth the fire will be lit for 24 hours. If the barny has begun to fade and the heat has also reduced, the husband or other family members will add charcoal. After two weeks the fire will be lit in the afternoon around three o'clock until the next day. During the day no longer need to marapi because the weather is quite hot. The length of marapi time in one day is also adjusted to the weather conditions and the needs of the mother and baby. If the heat of the fire is not ignited and the heat of the fire is also adjusted to the condition of the mother and baby, if the fire is less hot the charcoal will be added and if it is too hot then the charcoal will be pushed aside. Babies also cannot stand if the fire is too hot. Marapi is usually done for 30-60 days. The place deemed most appropriate and appropriate for marapi is in the room or the living room. Postpartum mothers who live in the in-law’s house doing marapi in the room while the post-partum mothers who already live in their own homes there are doing marapi in the room and the living room.

In addition to marapi, postpartum mothers also do manjonjongi api (standing on the fireplace). Manjonjongi api is done after the postpartum mother finished bathing. Postpartum mothers do the fireworks by standing and their legs stretched. The fireplace is placed between the legs of the mother. When manjonjongi api, mothers are advised not to wear clothes and only use a sarong. The mother's entire body is covered with a sarong except for the head. Cloth will be stretched out to cover the fireplace and feet of the mother, this is so that smoke from the fireplace hits the entire body of the mother (figure 6. left).

The materials needed to fire a fire are firewood and certain leaves. Fireplaces placed under the mother's bed only use charcoal without adding foliage, while for the fire majorjongi requires foliage (figure 6. right). Manjonjongi api is usually done the next day after birth and is carried out for one week to one month in a row after the mother gives birth. Manjonjongi api are carried out twice a day ie morning and evening after bathing. Manjonjongi api is an activity...
carried out to smoke the entire body of the mother by burning wood and leaves and coconut husk so that it emits smoke, after which the mother will stand on the fireplace and both feet are on the side of the fireplace. The mother's body is covered with a sarong so that the smoke hits the entire body of the mother. Manjonjongi api duration is not determined according to the ability of the mother or if the mother is sweating, the mother will stop. The leaves that are used are clove leaves, orange leaves, cinnamon leaves, patchouli leaves and taso leaves, which are believed to make the mother's body more fragrant and eliminate the rancid odor caused by maternal puerperal blood.

Manjonjongi api is also believed to relieve aches and make the mother's body fresher. Another benefit is accelerating the delivery of puerperal blood from the mother's uterus and can prevent the mother from abdominal pain after childbirth (rian). Besides, manjonjongi api is also useful for accelerating the dryness of wounds that occur during labor. The place that is considered the most appropriate and most appropriate place for fire breaking is in the room, in the kitchen and the bathroom. The reason is that the room is a safe place and is not passed by many other family members, while the kitchen and bathroom are places that are close to the bath so that immediately after bathing the mother can immediately manjonjongi api. Manjonjongi api tradition may be more devoted to the care of the birth canal because the manjonjongi api is done in a standing position, legs are stretched and a fireplace is placed between the legs. Manjonjongi api is done without clothes and only uses a sarong that is intended so that the steam and smoke from the fireplace directly hits the body and birth canal.

III. Methodology

This research is a qualitative research with phenomenology design. This research was conducted in Manunggang Jae Village Padangsidimpuan City. The study took place from October 2018 to August 2019. The main informants in this study are mothers who are still or who have done marapi tradition in childbirth care. The number of informants in this study was eight people, consisting of seven post-partum mothers who had done marapi, and one mother who was doing marapi and triangulation of community leaders and health workers. The technique used is purposive sampling technique.

This study uses data collection methods with in-depth interviews (in-depth interview). The process of collecting data is done by researchers with the help of data collection tools in the form of interview guidelines that have been prepared by researchers before going to the field, a voice recorder using a cellphone to record conversations during the study, and the field notes of the researcher.

IV. Discussion

Postpartum care that is usually done by mothers in Manunggang Jae village is a series of activities which are provisions that were passed down from their ancestors. According to the informant, the values that underlie marapi are primarily for the health of new mothers who give birth so that their health can recover quickly and be strong quickly. Besides, by doing marapi, it is expected that the mother does not often feel cold, helps the process of cleaning dirty blood and can accelerate wound healing. The tradition is also intended to warm the baby so the baby does not get sick quickly due to cold. The childbirth tradition is also carried out in other areas such as the tradition of the childbirth performed by the post-partum mother in North Buton. Research conducted by Usman and Sapril (2018) entitled "The Utilization of Posoropu Culture in Postpartum Care by North Buton Women" states that
every day a puerperal woman doing pirarai tradition. First, the family members lit a fire in my room that had been designed in my mother's room.

This tradition is carried out until the postpartum period ends. Temperature or heat depends on the wishes or needs of the informant himself who is believed to be beneficial for babies born to have a strong physique, not catch a cold, and not easily contracted hepatitis. The benefits that can be felt by the mother are preventing white blood from rising to the head, because if white blood rises to the head it can cause persistent headaches, and other benefits are to reduce to relieve pain in the hip. The phenomenon of marapi also occurs in several regions and tribes in Indonesia such as the Batak tribe known as mararang. The mararang tradition is a tradition of postpartum care by roasting using charcoal fuel (Sitorus, 2017). People in Amunaban Barat carry on the roast tradition (se'i) of postpartum mothers for 40 days in Ume Kbubu (roundhouse). The position of the mother is above the bed and the ember is under the mother's bed, the distance of the ember with the mother's position is around 40-50 cm. So that the coals that burn well are hot, then they use pine wood which they call cassowary wood. The cots or bale-bale on which the mother lies are made from the famous strong cassowary wood (Handayani and Prasodjo, 2018). The people in Aceh warmed up the parturition mother known as Madeung and Toet Batee. This method is not a strange thing in the lives of the people of Aceh who have just finished giving birth, especially in the Tanah Jambo Aye area. The method of treatment of Madeung and sale, is believed to dry uterus, the body becomes thinner or thinner, can shrink the stomach, can give birth and make the mother beautiful and make the body fragrant. Since the first day in peumadeung (disale) and placed hot stones in the stomach. Mother sleeps on a bale made of bamboo or wood under which a fire is lit. It aims to cleanse dirty blood, restore muscles and streamline the body (Rahayu, Mudatsir & Hasballah 2017).

The tribes in other parts of Asia such as in Malaysia also found a similar phenomenon. Fadzil, Shamsuddin and Ezat (2015) in their study entitled "Traditional Postpartum Practices Among Malaysian Mothers: A Review" describes postpartum care of Malay mothers. Traditional Malay massage is part of a treatment regimen throughout the 44 day confinement period. Other elements of this regimen are the furnace (hot stone/iron compress), tangas (vaginal steam bath), traditional barut/corset, as discussed earlier, also known as a curve in other parts of Malaysia), salai (traditional sauna), and abstinence (strict dietary exclusions, inclusion criteria, preparation, and servings), and abstinence from sex.

Manjonjongi api is also a legacy of local culture that was obtained from their parents and is still carried out today. Manjonjongi api is believed to relieve aches and make the mother's body fresher. Another benefit is accelerating the delivery of puerperal blood from the mother's uterus, and can prevent the mother from abdominal pain after childbirth (rian). Besides, manjonjongi api is also useful for accelerating the dryness of wounds that occur during labor. This tradition is not only done in Indonesia, research conducted by Zamani (2001) entitled "Traditional Practices in Postnatal Care: The Malay Community in Malaysia" shows that there are several elements that are carried out in the care of postpartum mothers in Malaysia, namely furnace, tangas, barut, salai and abstinence, of all the traditional practices salai is the most uncommon because to do salai must make a bed in the house.

Yusoff et al (2018) stated that steaming the vagina or tangas in Malay is a traditional method that uses steam derived from herbal blends. This tangas treatment is given by the position of the woman sitting on a wooden chair that has an opening in the middle of the perineum area so that it is exposed to steam or steam coming from a bucket of hot water with
spices in it. Tangan treatment is intended to lift the uterus back to its original position and also to shrink the uterus that has expanded during pregnancy. Tangan will also make the body feel lighter and more comfortable.

This view can be rationalized from a biomedical point of view that warm temperatures are very beneficial for postpartum mothers and newborns, warm temperatures can prevent hypothermia in infants which is often the cause of death in newborns. For postpartum mothers, the warmth makes blood vessels dilate so that blood circulation is smooth and the transport of oxygen in the organs of the body is good and is very helpful in wound healing. However, on the other hand, the roasting process of the postpartum mother and her baby can also be detrimental to the health of the mother and baby by using wood fuel (biomass). Smoke from burning firewood (bio-mass) contains very fine dust particles (less than 10 microns) and air pollutants such as carbon dioxide (CO2), formaldehyde (H2CO), nitrogen oxides (NOx), sulfur oxides (SOx) (Anwar & Soerachman, 2014). Doing childbirth care by heating is also feared to cause health problems for postpartum mothers. Endjun (2002) states that traditional bathing is done by heating or sitting on something hot, so that it can cause effects that can endanger the health of the mother, such as sitting on hot coals or heating can cause vasodilation, lower blood pressure, can even stimulate bleeding, and can cause dehydration in postpartum mothers. Sitting on hot embers can cause vasodilation, reduce maternal blood pressure and increase bleeding can also cause dehydration (Prawirohardjo, 2006).

V. Conclusion

The marapi tradition is the practice of postnatal care for the Padangsidimpuan City community to give warmth to the postpartum mother and her baby so that the mother and baby will not get sick quickly due to the cold. The types of treatments carried out in the form of marapi and manjonjongi api (standing on the fireplace). Even the marapi tradition is done to strive for the health of the puerperal mother and her baby, but in reality this traditional practice is a risky behavior that can harm the health of the mother and baby. It is very important to develop health promotion of postnatal care for mothers and newborns carried out through a cultural approach to society in general and in particular to postpartum mothers and families.

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