

The Habit of Taking Jamu by Brata Pesisir Community in Pamekasan Madura

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Abstract— This study discusses the preservation of Ajhemo Tradition among the people of Branta Pesisir, Pamekasan, Madura. Ajhemo, another term for drinking herbal medicine, is a traditional medical practice that has been existing for generations. This prevailing habit cannot be separated from the socialization carried out by parents in explaining the importance of maintaining health from an early age. In the socialization the parents use proverbial sayings which contain the knowledge of local tradition medicine. Therefore, understanding the health concept of a local community cannot ignore their oral traditions. This study uses ethnographic methods to understand how people interact and collaborate by observing their daily social activities that are constantly changing. Changes in the behavior of the community, either intentional or unintentional, can lead to changes in various aspects of culture. Therefore, it is necessary to conduct observation, interview and document analysis in order to record people's communication and behavior in certain social backgrounds. The preservation of Ajhemo among Branta Pesisir community is due to the functioning of several cultural elements, including oral tradition, family and religion. The three elements of culture contribute to each other in establishing dialectic relations. Ajhemo survival in the local community serves as a Madurese cultural identity. Therefore, Ajhemo as part of traditional health services needs to be developed more massively.

Keywords— ethnolinguistics; oral tradition, local community, habit.

I. INTRODUCTION

The community of Branta Pesisir Pamekasan Madura has a habit of drinking herbs (jamu). For the local people, drinking herbal medicine reflects a healthy way of life that has been done for generations. The term "healthy living", however, is a modern term known as a lifestyle among educated people and urban people. The methods they adopted vary: yoga, carbo diet and gymnastics. These examples are unknown in the Branta Pesisir community (hereinafter abbreviated as BP), even the term "healthy living" is strange in the ears of the villagers. BP people are village communities that are far from the present lifestyle. They have their own strategies for maintaining health that have become a hereditary tradition, namely routine consumption of herbs as a preventive measure.

How to live a healthy life as a view of life encompasses the whole descriptive view that gives a structure to people's experiences. Parents always advise their children repeatedly ajhemo mon terro barese (drink herbs if you want to be healthy). This advice is one of the many old discourses that connect the reality of BP people's way of life today with their past. The advice has a rationale regarding steps or ways that need to be interpreted in order to understand their views on healthy living. The advice was created by their ancestors with the aim of guiding behavior in living a healthy life according to the native point of view of the village.

This advice is the beginning of a child to adapt to traditional health values continuously socialized, which finally subconsciously awakens the thinking constructs that form an interpretation of herbal medicine as his ancestral heritage. The presumption of inheritance has suggestive value so that it is still consumed up to now. The habits is interesting to study considering that the people live in a modern era where a modern medical system is supported by sophisticated equipment. However, the fact is that this condition cannot shift the habit of the people who are still loyal to drink herbal medicine. To understand this habit, it is necessary to look at the historical situation and some perceptions that are deeply entrenched in the hearts of the people who support it. Drinking herbal medicine describes not only the value of health, but also social institutions, sociologically, economically, as well as in gender and religious perspectives.

II. LITERATURE REVIEW

Roy Jordaan in his book *Ethonomedicine in Madura* (1985) provided an overview of the situation and conditions of the Sumenep community in seeking healing through shamans and kiai (Muslim leaders). The local people still believe in mystical experiences regarding the existence of wind disease (witchcraft). In the study, however, the researcher did not elaborate on the views of the local community regarding the habit of drinking herbal medicine. The description of the healing method of the Madurese community was more related to religion, so that the ability to make jamu was not discussed.

Niekhoef (1985) focused more on the condition of Madurese women in Patondu area. In his research, he described the health management system of women who on average could make their own jamu by taking ingredients around their home yards. The results of his research were entitled *Women and Fertility in Madura* (1985). The research provided rich ethnographic data on Madurese women in managing the health of themselves and their families. Madurese women still believed in dukun rembi' (traditional midwives) in the process of giving birth. Despite talking about the health of Madurese women, the researcher did not specify the variety of jamu consumed by women.

Mangestuti and her colleagues (2007) examined the Ajhemo habit of women in the Sumenep palace environment where ajhemo has been practised since childhood. The jamu consumed is mainly for beauty treatments based on recipes from generation to generation. In the research, they used a pharmacological approach in which every ingredient used for jamu was examined for its substances. The results of their research were published in *Traditional Medicine of Madura Island in Indonesia*. The study, however, did not look at the users' reasons for consuming herbal medicine, so that the world view of its users was neglected, whereas ajhemo must have a philosophical basis.

Lestarti Handayani (2008) studied the Ajhemo habit of Madurese women through a health behavioral approach. Her concern is contained in her dissertation entitled *Minum Jamu Oleh Perempuan Suku Madura Sebagai Upaya Perawatan Fungsi Seksual* (Drinking Herbal Medicine by Madurese as a Sexual Care Treatment). She explained about the tightening jamu and jamu for vaginal discharge used by Madurese women to treat sexual organs. Furthermore, she and her team developed a research on the mapping of hemorrhoids used by reproductive organs of Madurese women in the title of *Inventarisasi Jamu Madura yang Dimanfaatkan untuk Perawatan Kesehatan dan Pengobatan Gejala Penyakit yang berkaitan dengan Reproduksi Wanita/Inventory of Madurese Herbs Used for Health Care and Treatment of Symptoms of Diseases Associated with Female Reproduction* (Libang Depkes, 1996-1997). In the study, the researchers adopted a medical approach to examine the habit of Madurese women in drinking jhemo paka' that is used for the health care of sexual organs. As the Ajhemo habit concerns cultural habits, the results of this study are more projected in medical models than in cultural research.

Mutmainnah (2009) studied the behavior of ajhemo by women in Bangkalan. The habit of ajhemo is intended to beautify their body. In the research, the researcher explained about the relationship between ajhemo and the stereotype of Madurese women. However, she did not explain about beauty according to the criteria of Madurese women and the type of jamu taken.

Sociological research was conducted by Adriati and Teguh Wahyudi (2016) and Afiani Ika Limananti and Atik Triratnawati (2003) who examined the function of special jamu for children. Suharmiati (2003) examined the potential of jamu gendong for village community health services in Java. Wardani Ajeng (2012) investigated the development of community health in Sampang Regency at the lowest position in Madura. The three researchers focused on sellers carrying jamu to sell door to door.

From the existing literature, research on Madura has tended to focus on the lives of farmers as conducted by Kuntowijoyo (1980) and Touwen-Bouwsma (1989) that discussed the socio-economic life of farmers. De Jonge (1977) and Bouvier (1987) focused their research on the socio-cultural life of farmers. A number of other studies conducted by Kuntowijoyo (1980; 1993) and Touwen-Bouwsma (1989) highlighted the sociopolitical aspects of the life of the Madurese community in relation to their Islamic religious life. However, studies on the life of coastal communities are very few and mainly related to fishermen activities, but not concerned with agriculture and animal husbandry. Meanwhile, according to De Jonge (1989), statistically the economic activity of Madura in the marine fisheries sector is the most important sector. De Jonge provides an overview of the social, cultural and economic activities of the life of the coastal communities of Madura.

III. METHOD

This research is qualitative in nature, conducted by exploring the habit of women in drinking herbal medicine based on the local wisdom owned by the Madurese community. Informants were teenagers and mothers in the neighborhood unit of BP. In this study, teenagers refer to unmarried women who have experienced menstruation. Those who have experienced menstruation usually have knowledge of the types of herbs and can choose according to their needs. In addition, psychologically they have some independence in determining their future health. The age of the informants ranges from 12 to 60 years old.

Data of this study consisted of primary and secondary data. The primary data was obtained from in-depth interviews with herbal makers, herbal sellers, and consumers such as female teenagers and wives. The secondary data was in the form of information from the Drug Monitoring Agency. The primary data was obtained from individual interviews and Focus Group Discussion (FGD). The interviews were conducted in Madurese language so that the informants did not feel distant, but felt more familiar. By doing so, the informants could talk freely because the feeling of friendship had been established. The FGD was conducted to complete individual interview data that had not yet been expressed, so that when they sat together they had similar interests and did not feel ashamed to express even private things because the atmosphere was informal.

IV. RESULT AND DISCUSSION

A. The Concept of Healthy

The concept of health in BP community has not built from a critical-analytical world, but on life experiences, beliefs and religion for generations. Through stories from mouth to mouth the conception of life can be traced chronologically, so that the development of Madurese traditional medicine can be seen from time to time. In explaining the concepts of healthy living, BP community tends to adopt old expressions to be internalized in their children and grandchildren. These health concepts are manifestations of oral discourse as Mrs. Untung confessed, "Healthy is not simply not being sick, but also about seeing your children not fighting, harmonious fellow brothers that make the soul comfortable." The mother's understanding is in line with WHO statement in the opening of the charter, a state of complete physical, mental, and social well being, and not merely the absence of disease of disease or infirmity" (WHO, 1981, p. 38).

The above statements indicate that health is not only about physical conditions, but also concerned with mental and social health as a whole and not merely the absence of disease and disorder. In Law No.23, 1992 it is stated that health is "a well-being state of the body, soul, and social and economic condition." Health must then be seen as an integral whole of the physical, mental and economic welfare elements. This means that the health system interrelates with various social, economic, educational, psychological, economic and religious factors. These factors contribute to shaping healthy living behaviors which, according to Dumatubun (2002), relate to knowledge, beliefs, values and norms in the socio-cultural environment.

B. Drinking Jamu Makes Healthy

Drinking herbal medicine is a healthy way of life for the people of BP, which has been handed down from generation to generation. A belief says ajhemu ekaberes, which means that drinking herbal medicine makes healthy. Even though some people do not agree with it, this does not affect the shared perception. Recognition of the benefits is greater than the failure factor. Claims of truth based on such a belief are called doxa, which is a direct compliance relationship that is shaped in practice between habitus and corresponding arena and that is according to what is taken for granted from the world that flows from the mind (Bourdieu, 1990, p. 68). Conformity to habitus with the logic of field is due to the presence of doxa. Generally these communities are referred to as transmissive communities because they depend on oral transmission. This opinion is supported by Handayani (2008, p. 46) who points out that jamu does not require scientific nor clinical evidence, but empirical evidence.

The daily life of the Madurese, especially BP community, cannot be separated from the practice of ajhemo (Jordan, 1980, p. 33). Jordan managed to understand how all people in Madura made jamu a life reference, which can be seen from its historical elements and some perceptions that have been deeply entrenched and still infused with the process until now. Before arriving at its meaning, it must first be understood about the words as elements in the network of relations between the words revealed in the proverb "ango'a ta' ngakan tembang ta' ajhemo" (it's better not to eat than not to drink jamu). Even though drinking herbal medicine with all its characteristics is a secondary demand, not the main need, this cannot be ruled out. For the sake of health, men and women are willing to drink jamu even though it tastes bitter. For instance, jamu often consumed by adults, such as butrowali, tastes bitter, so it is called bitter herbs.

Some ingredients for making jamu are taken from kitchen spices and some are taken from hedgerows such as turmeric, galangal and betel. Mangestuti, an expert in traditional medicine, explained:

Finger roots contain flavonoids and turmeric containing curcumin, and both compounds are antioxidants that prevent cell damage, so that users are not susceptible to tumor or cancer, especially in women to prevent breast cancer, vaginal discharge and uterine cancer. Finger roots also contain Isopanduratin A that is effective in preventing the appearance of black spots on the face, so that the face remains clean and bright. Sambiloto has an andrographolide content proven to be efficacious as an antimalarial. Simbukan contains polyphenols, antioxidant that prevents cell damage, so that the users, in addition to avoiding tumor/cancer, will always be healthy, not get sick easily. Pandanus is a plant that contains polyphenol lignans and benzofuran derivatives, which are antioxidants so that when taken it will speed healing after childbirth. Jambe contains phenyl propan and flavonoids which are efficacious as anti-inflammatory, so users will not suffer from rheumatic pain. And there are many more plants that are still unknown to the wider community.

Interview (5 August 2016)

Knowledge of traditional medicine need to be explored by studying ideas, values and views that are expressed by local genius related to their health system. This is important in order to find knowledge related to survival that was organically integrated with the local population in the past, which certainly can be developed in the present. Its existence is supported by the government through the Ministry of Health by conducting scientific certification to produce standardized herbal medicine (Siswanto, 2010, p. 1). This means that the modest work of the ancestors is medically recognized. This can be seen that, according to Basic Health Research (Riskedas, 2010), around 55.3% of the Indonesian population consumes herbal medicine, and 95% say that jamu is beneficial for health. Meanwhile, according to Adriati (2016, p. 123), 68% of Indonesians feel that drinking jamu just fits them. Thus, the data show that the majority of Indonesians like jamu.

Taking herbal medicine is not only part of the past, but it is integrated and becomes part of the present that always lives in the heart of the people of BP. They imitate and gain knowledge from the experiences of the elders in living a healthy life based on the

local wisdom. In this context, taking jamu is seen not as a remnant of the past or cultural heritage, but as part of a journey of traditional health history that is still alive and practised today. Through the tradition of taking jamu, the socio-cultural institutions of the Madurese that have not been known can be explained. This explanation will be understood when listening to speeches or descriptions of the people who are used to taking jamu.

V. CONCLUSION

Drinking herbal medicine has become a necessity for BP community that perceive healthy life based on the daily reality experienced together. The habit of BP women in drinking herbal medicine is based on two reasons: atambha and araksa. The women believe that drinking herbal medicine is physically and psychologically healthy. On the one hand, taking herbal medicine is to treat an illness, and on the other had, it is a measure to prevent them from getting sick.

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