Traditional Birth Attendants, Maternal and Neonatal Mortality within the Dayak Agabag Community In Village of Sujau, Indonesia

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Background: Antenatal, delivery and postnatal care services are the most recommended interventions to prevent maternal and neonatal mortality. In the village of Sujau, there is highest prevalence of home delivery, Traditional Birth Attendants (TBA) use, but a low attendance of antenatal care services. The policy change tried to stop child birth with TBAs at home, many women still give birth at home, but there is no maternal and neonatal mortality in Village of Sujau. Structural barriers to facility delivery such as lack of geographical access to health care, inadequate health worker, financial limitations, cultural beliefs and practice are the reasons for home delivery.

Objective: To explore cultural beliefs and practice on antenatal, delivery and postnatal care within the Dayak Agabag Community in Village of Sujau.

Methods: A qualitative study was conducted from March to November 2012. Indepth interviews were carried out comprising 1 TBA, 2 midwifes, 1 traditional leader of Dayak Agabag, 3 community health workers (cadres), 1 headman, 2 fathers and 2 mothers who delivered at home. The guidelines for in-depth interview included the topic of reasons for preference of TBAs, culture beliefs, practice and herbs during antenatal and postnatal periods.

Results: Our study found that the reasons underlying the preference for TBAs were low-cost, easy accessible, available informal sectors for seeking care and their positive perceptions (spells, respectful, skilled, friendly and family relationship). All women had a positive attitude toward TBAs. Special local practices were believed to reduce complications during delivery. According to culture belief, TBAs usually assist from the 7th month of pregnancy and encourage women to drink herbs (*palupi* leaves and ginger) with TBA spells, massage every morning or every evening and the use of ogot-ogot (heritage objects in the form of fabric sewn and tied at the waist of pregnant women). During delivery, women drink herbs with TBA spells. After delivery, TBAs wash mother's clothes, help mother to take a bath with warm water which is mixed with ginger and lemongrass, wash baby's eyes and cut the umbilical cord with a new knife. Women drink ginger and coffee during the postnatal period. TBAs regularly visit their home to take care of both mother and baby.

Conclusions: It is important to improve access to health services and collaborate with health workers to promote and prevent health services, including maternal and neonatal health. Ginger and coffee are one of the 50 richest dietary source of polyphenols. Intake of polyphenols has been associated with health effects.

Key words: Midwife, Herbs, Culture, Indonesia, qualitative study, Ginger, Coffee