



## **THE TAWEN MYTH AS A MECHANISM TO CONTROL POSTPARTUM MATERNAL HEALTH**

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### **ABSTRACT**

The Tawen myth is a traditional belief of the Dayak Ma'anyan community applied in postpartum care. It guides postpartum practices, during a period prone to stress due to physical changes, role shifts, and hormonal fluctuations, which can impact the psychological well-being of mothers. Objective to analyze the psychosocial impact of the Tawen myth on the mental well-being of postpartum mothers. A qualitative study involving 10 Dayak Ma'anyan women as primary informants, selected by purposive sampling, along with 4 cross-sectoral participants from village authorities, traditional leaders, healthcare providers, and village midwives. Data were gathered through in-depth interviews and field observations, analyzed using thematic analysis. Six themes emerged: 1) Reasons for practicing Itampadi within the Tawen myth, 2) The Tawen myth as a health control mechanism for postpartum mothers, 3) A mix of fear and calm as the emotional impact of the myth, 4) Social uncertainty, food limitations, and taboo violations as stressors, 5) Food restrictions reflecting deep concerns, 6) Physical and social activity limitations as preventive actions for Tawen. Psychosocial issues related to the Tawen myth stem from a combination of fear and calm in practicing Itampadi. Fear of Tawen strongly influences postpartum mothers to follow traditional practices. While these practices offer psychological security, they also create emotional pressure, especially in the face of social change and modern physical needs.

Keywords: dayak ma'anyan; indigenous community; local wisdom; postpartum; psychosocial

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## **INTRODUCTION**

The Tawen myth is a traditional belief inherited from the Dayak Ma'anyan culture in Central Kalimantan. Tawen is generally used by Dayak Ma'anyan women to describe the unhealthy physical condition of mothers during the postpartum period (Herniati, 2024). In the traditional beliefs of the Dayak Ma'anyan, if a postpartum mother has physical complaints such as dizziness, nausea, fever, pain, and other physical complaints, they believe this to be a Tawen phenomenon. The causes of Tawen are believed to be very diverse, such as food factors, the environment, and even social interactions in society (Herniati, 2024).

The Tawen myth is specifically applied in the context of maternal care during the postpartum period. Belief in this myth guides the entire postpartum care process. Belief in the Tawen phenomenon gives rise to rules or restrictions for a mother during the postpartum period. One of the common restrictions applied is Itampadi (prohibition), such as food and activity restrictions. Examples of abstinence practices carried out by postpartum mothers include only eating white rice with salt that has been ground with pepper and boiled eggs, for one week postpartum. They are also prohibited from eating processed foods that are spicy, oily, or flavored for three months or until they get their period back (Herniati, 2024).

The postpartum period is a critical period in a woman's life. During this period, there are significant changes in roles, physical, hormonal, and psychological. These changes increase the mother's vulnerability to stress. Some postpartum mothers are reported to even experience disappointment, irritability, which causes disturbances in sleep and eating patterns (Aspiani, 2017). Various changes during the postpartum period also increase the potential for postpartum depression (Aspiani, 2017). Research shows that stress, anxiety, and postpartum depression can have a negative impact on the relationship between mother and baby, physical recovery, and adaptation to the new role as a mother (Jayanti & Wijayanti, 2022; Jannah & Latifah, 2022).

In addition, previous studies related to the phenomenon of customary sanctions for pregnant women in the Dayak Ma'anyan Tribe were found to be a source of stressors that increase the risk of traumatic experiences developing and affecting the mother's mental health (Lanawati & Ivana, 2020). Given the vulnerability of mothers to stress during the postpartum period, as well as its impact on the mother's mental well-being, professional health care is urgently needed. On the other hand, some beliefs in the Tawen myth actually contradict the concept of professional nursing care, and can hinder postpartum nursing care in the community. The Tawen myth has the potential to slow down the physical recovery of mothers after giving birth. This situation can increase the experience of stress and psychosocial problems that disrupt the physical and mental well-being of mothers and have an impact on the relationship and development of mothers with children, family, and the environment.

Although the Tawen myth has become an integral part of the life of the Dayak Ma'anyan people, in-depth research related to its influence on maternal mental health during the postpartum period, especially related to psychosocial aspects, is still limited. The limited information related to the psychological impact of the Tawen myth during the postpartum period is a gap that needs to be filled. Through an analysis of the psychosocial aspects involved in the postpartum experience, a deeper understanding of how the Tawen myth affects maternal mental well-being during the postpartum period can be known. A deeper understanding of how the Tawen myth affects maternal perceptions and experiences during the postpartum period can provide valuable insights into cultural interactions, traditional beliefs, and mental health in the context of the Dayak Ma'anyan culture. The findings in this study are expected to contribute to the development of effective and contextual mental health interventions according to the needs of the Dayak Ma'anyan people, especially related to the well-being of women in indigenous groups. Therefore, this study aims to psychosocially analyze the influence of the Tawen myth during the postpartum period in the Dayak Ma'anyan people by focusing on the perceptions, experiences, and mental well-being of individuals.

## **METHOD**

This research was conducted using a qualitative method. This method was chosen to be able to explore in depth the psychosocial aspects of the Tawen myth. This research was conducted in one of the villages in East Barito Regency, Central Kalimantan. The data collection process was carried out from September 6 to September 16, 2024. The research population was the Dayak Ma'anyan tribe. The main informants in this study were a group of Dayak Ma'anyan women who were selected using a purposive sampling technique, with inclusion criteria; having experience giving birth and undergoing postpartum, willing to be an informant, and willing to be recorded by voice or video during the research process, while informants who were pregnant during the research process were not taken. The main informants involved in this study were 10 people. The researcher also involved 4 key informants who were taken

from across village government sectors, local traditional leaders, local health workers, and village midwives.

The main instrument for data collection was the researcher herself. During the data collection process, the researcher has ensured that the researcher meets the rules as an instrument, such as listening without interrupting, not dominating the discussion, having an open attitude, by conducting self-reflection after each data collection process. In addition, the researcher uses a structured questionnaire that has been prepared to ensure that it is carried out according to the research objectives. The data collection process is supported by voice and video recorders, field notebooks, and stationery. The data collection process is carried out using in-depth interviews with structured questions related to the Tawen myth that is believed. The data analysis process is carried out using thematic analysis techniques. This research has passed the ethical feasibility test from the KEPK of Muhammadiyah University of Banjarmasin with an ethical certificate number 0128226371, on July 29, 2024.

## RESULT

The collected data was divided by researchers into two data components, namely demographic data of the informants involved and the main data of the research results. The two data components are presented in full in the tables below:

### Informant Characteristics

The main informants in this study were women in the Dayak Ma'aanyan tribe. The characteristics of the main informants can be seen in the table below;

Table 1.

Distribution of Characteristics of Key Research Informants

	Characteristic	f	%
Age	Teenagers (10 – 18 years old)	0	0
	Adults (19 – 59 years old)	8	80
	Elderly (60+)	2	20
Occupation	Housewives (IRT)	7	70
	Farmers	1	10
	Honorary	2	20
Last Education	Elementary School	5	50
	Junior High School	3	30
	High School	1	10
Pregnancy History	2 times	5	50
	3 times	2	20
	4 times	1	10
	5 times	1	10
	6 k times ali	1	10

Where the results of the study found that the majority of the main informants involved were in the adult age category as much as 80%. From the occupation category, it was found that the majority who were willing to be involved were housewives, as much as 70%, while from the last education category, as much as 50% only had elementary school education (SD). In the pregnancy history category, 50% of the main informants involved had a history of more than one pregnancy.

While key informants were taken from across sectors originating from 4 sectors, namely the village government, local traditional leaders, local health workers, and traditional maternity practitioners. The complete characteristics of key informants are presented in the table below :

Table 2.  
Distribution of Key Informant Characteristics

	Karakteristik	N	F (%)
Sector	Village Head	1	25
	Traditional Leader	1	25
	Local Health Worker	1	25
	Village Midwife	1	25
Gender	Male	3	75
	Female	1	25
Age	Adult (19 – 59 years old)	4	100
	Elderly (60+)	0	0
Education	Elementary School	1	25
	Junior High School	1	25
	High School	1	25
	Midwifery Diploma III	1	25
Occupation	Farmers	2	50%
	Village Government	1	25
	PNS	1	25

In terms of gender, 75% of the cross-sectors involved are male, while in terms of age 100% are in the adult age category. The characteristics of education are very diverse, where 25% each have education at elementary, junior high, high school, and Diploma III levels, while for the job category 50% are farmers, the remaining 25% each work in the village government and civil servants.

### Primary Data of Research Results

The data analysis process was divided by researchers into 2 data components. The first data component analyzed was data from the main informants of the study, which amounted to 10 results of in-depth interviews. The second data component, namely key informant data, which amounted to 4 results of in-depth interviews. From the 2 data components, this study succeeded in identifying several themes, namely.

### Reasons for practicing the Itampadi custom as the main essence of the Tawen myth

This theme highlights the reasons informants practice Itampadi as the main essence in their belief in the Tawen myth. Researchers identified that beliefs related to the physical impacts of Tawen such as a thin body, scaly skin, and worsening health conditions in old age were the reasons the main informants practiced Itampadi.

*“...pertama, menjaga badan kita...jaga badan itu...supaya badan kita sehat....kalau kita sembarangan makan....syukur jika dia (Tawen) munculnya langsung...tapi jika kemudian hari munculnya, itu yang...bisa...membuat...badan orang menjadi kurus...jadi badannya...apa itu...bersisik-sisik, itu karena makan sembarangan saat nifas itu tidak diatur...tidak dijaga...”* (Key Informant 1)

*“...menurut saya kan...lebih baik kita itu Itampadi...karena apa...jika kita Itampadi, badan kita sehat...tidak seperti kata orang itu lalu kurus...demi kesehatan kita sendiri...orang yang makan sembarangan dengan kita yang Itampadi...biar bagaimanapun dia menutupi kelihatan dari badannya...badannya kurus, lalu kulit ini bisa bersisik-sisik begitu kelihatan (menunjukkan kulit tangan)...berkerut...kering, tidak ada minyak...”* (Key Informant 2)

*“...jangan bekerja capek...ibaratnya, banyak macam kerjaan di saat nifas itu (Itampadi), supaya kita saat tua nanti tida sakit kaki tangan, tidak serba nyeri...”* (Key Informant 3)

*“...jelas perbedaannya...itu seperti pucat pasi, kulit bersisik, tidak segar, kering, beda dengan orang yang Itampadi...pokonya beda lah...” (Key Informant 5)*

Similar reasons are also indicated by statements from across sectors (village heads, traditional leaders, and village midwives) where Itampadi is recognized as a way to maintain the physical health of postpartum mothers.

*“...terkait masalah Tawen itu, dari segi saat melahirkan, ada pantangan-pantangan makanan yang dilarang...andai kata kita mengikuti proses-proses itu...kalau kepercayaan mitos dulu, kalau tidak ibabat (menggunakan korset), pekerjaan berat, kan bisa ambein...pemahaman-pemahaman dulu mungkin bisa juga diterapkan (Itampadi)...saat masa nifas konsumsi ini yang bagus untuk masa nifas (makanan rendah garam...” (Village head)*

*“...Tawen itu paling berbahaya setelah melahirkan itu...tujuan praktik Itampadi itu tujuannya supaya sehat, karena Tawen itu ada dua, Tawen nganuk, efeknya saat sudah tua, banyak macam efeknya, bisa penyakit, kurus tidak ada daging, itu yang menyebabkan, orang kurus semakin kurus...” (Traditional Leader)*

*“...kalau yang dia tidak mematuhi (Itampadi), itu dia spontan, seperti orang itu, dilihat dari dengan yang dia muda, dia terlihat lebih tua, dan dia terlihat sehat padahal dia mengidap penyakit, jadi memang efeknya memang mencelakakan dirinya sendiri, efeknya tidak selalu muncul...sama yang sering juga yang kurus-kurus itu, rata-rata dampak tawen ini ke arah fisik...” (Village Midwife)*

Another reason expressed by the main informant is the informant's fear of Aisan (Tawen Phenomenon in old age). Where Aisan was expressed by the main informants, traditional leaders, and village midwives as a physical impact of violating the Itampadi rules during the postpartum period

*“...dan intinya...ibaratnya...ya semacamnya...semacam...maksud kami itu, kami harus Itampadi...setelah melahirkan itu...Itampadi supaya saat tua nanti, seperti kata orang itu, tidak Aisan...jangan bekerja yang melelahkan...jangan banyak macam kerjaan saat masa nifas itu, supaya saat kita tua nanti tidak serba sakit kaki tangan, serta nyeri...itu namanya Aisan...” (Key Informant 3)*

*“...Aisan itu, kondisi badan kita itu...tidak Tawen...Tawen di kemudian harinya...itu maksudnya...tidak langsung (Tawen) kalau istilah kita...itu ya...budaya...eee...sebutan kita Ma'anyan itu Aisan...” (Key Informant 4)*

*“...Asian itu kalau dalam kesehatan medis, rematik...” (Key Informant 1)*

### **Tawen Myth as a Mechanism to Control Postpartum Mothers' Health**

This theme shows that the Tawen myth is used as a way to control postpartum mothers' health in the Dayak Ma'anyan community. This control can be seen from the rules regarding the types and methods of consuming food, as well as restrictions on certain physical and social activities.

*“...hal yang tidak boleh dimakan...seperti...itu makanan...seperti...seperti...ya pantangan itu, yang tidak boleh cepat dimakan itu...yang tidak boleh...seperti...mengangkat barang berat, tidak boleh selama kita baru melahirkan...tidak boleh kesana-kemari, tidak boleh menghadiri...sementara sampai 3 bulan...setelah itu boleh...walaupun boleh jangan sampai terlalu bergabung, tapi boleh datang (bersosialisasi)...” (Key Informant 1)*

*“...rata-rata Itampadi makanan...bahkan pekerjaan...makanan yang harus dibatasi 3 bulan...bersosialisasi dengan orang boleh...tapi jangan makan sembarangan...yang jangan itu seperti potong karet, menimba air, bekerja di ladang begitu...” (Key Informant 5)*

*“...saya makanan...bahkan pekerjaan...aktivitas...aktivitas yang berat tidak diitu (dilakukan) lagi sebutannya...selama 3 bulan...interaksi dengan orang tu tidak apa...cuman*

*ya...karenakan seperti saya kan...menciym dari itu kan (situasi lingkungan)...bahkan AC itukan...AC sendiripun saya Tawen...itu usia bayi sudah 5 bulan...sudah menstruasi tapi tetap Tawen...berartikan kondisi badan itu...berat mungkin..”( Key Informant 4)*

*“...telur itu direbus, lada, bawang putih, itu yang dimakan...hampir tidak ada gizi...tapi kata bapaknya (husband) kalau ingin sehat, itu semua baik (badan) harus kamu Itampadi kata mertua saya...” ( Key Informant 6)*

*“...lima (jumlah persalinan) dasar tidak ada saya makan telur...” (Key Informant 8)*

Belief in the impact of the Tawen myth makes the Itampadi practice considered as a form of protection for the health of postpartum mothers. This theme also identifies that there is a conflict between local health workers and community beliefs related to the Tawen myth. Researchers identified that local health workers believe that health education related to the prohibition of food restrictions in the Itampadi practice has succeeded in making the Itampadi practice abandoned by the community.

### **The combination of fear and calm as the emotional impact of the Tawen myth**

This theme highlights that the practice of Itampadi is based on an emotional response, namely a deep fear of the impact of Tawen which is considered a serious threat to the physical health of postpartum mothers. The impact of Tawen is even considered to be able to cause death. This feeling of fear then increases alertness and compliance in following all the prohibitions in the practice of Itampadi.

*“...pertama memang saya itu takut, kenapa kan kata orang takut Tawen, Tawen itu kan, untung jika bisa diobati, kalau bisa diobati...diobati...kalau tidak bisa diobati kan...kadang kala itu yang bisa langsung meninggal! kan...” ( Key Informant 1)*

*“...mau tidak mau lalu mengikuti Itampadi...kalau tetap memaksa (tidak melakukan itampadi) itu bisa membuat kita berada di antara hidup dan mati (dampak Tawen)...” ( Key Informant 5)*

*“...tidak apa-apa mengikuti Itampadi...takut Tawen...jaga diri kita...” (Key Informant 10)*

This study found that despite emotional responses such as fear, the practice of Itampadi was not considered a burden or pressure by the main informants. Following the rules of Itampadi gave them a sense of calm and security. The main informants acknowledged that these rules had been passed down through generations, so they did not feel stressed in following them.

### **Social uncertainty, the dilemma of limited food choices, and the potential for violation of taboos, as sources of stressors**

This theme highlights that the stress response experienced by informants related to beliefs in the Tawen myth is not directly related to the Itampadi practice they undergo, but rather to the social situation they must face during the postpartum period. Informants revealed that while undergoing the Itampadi practice, they often felt anxious when they had to attend social events in the community. This was due to concerns regarding the uncertainty of the safety of the food served. They often felt worried whether the type of food served and its processing were in accordance with the Itampadi taboos they were following.

*“...maklum olahan orang banyak (makanan di acara)...kalau di acara orang...kalau buatan kita sendirikan, kita kan tau, apa saja yang tidak boleh dimakan...tidak orang sembarangan memberi makanan, dan kita merasa diri kita sendiri...makannya tidak bergabung dengan orang biarpun acara apapun, apakah itu acaraa nikahan, kematian...selama itu tidak boleh sembarangan makan...maksudnya tidak boleh sembarangan makan...saya tidak berani sembarang makan...saya patuh peraturan...” (Key Informant 1)*

This study found that informants experienced a dilemma related to limited food choices during the postpartum period. Informants felt a dilemma between following the prohibitions and their needs related to the variety of food types during the 3 months of the postpartum period. Informants also indicated experiencing anxiety (fear) of committing violations, especially related to food violations. Informants stated that while implementing Itampadi there was a sense of anxiety and fear that the food they consumed, especially those they did not prepare themselves, would violate Itampadi rules.

*“...maklum kan buatan banyak orang...kan seumpamnya di tempat orang acara...kalau kita yang membuat, kita kan tau, apa saja yang tidak boleh dimakan...”* (Key Informant 1)

*“...ibarat kata orang...ini burung bisa dimakan...kalau kita merasa tidak pernah memakannya, terpikir takut juga...takit itu membuat tawen...”* (Key Informant 2)

*“...saya tidak berani makan Pepaya...Pepaya yang dioseng...tidak berani saya makan...kata orang jangan cepat makan itu takut gatal...”* (Key Informant 9)

### **Food taboo practices as a reflection of deep concern**

This theme describes food taboos in Itampadi, which is a form of community concern in Dayak Ma'anyan regarding the health of postpartum mothers. In this study, it was found that there are specific types of food ingredients to be consumed or avoided during the postpartum period. Informants revealed foods from plants with yellow sap, papaya fruit, salt, and spiced foods, as foods that are generally avoided.

*“...yang tidak boleh dimakan...yang dipantang...tidak boleh cepat makan itu...yang bergetang kuning, pertama setelah melahirkan itu tidak boleh makan sayur...itukan adat orang dulu...memang tidak semua sayur, sayur katuk boleh, Terong tidak boleh, sejenis Pepaya itu boleh, boleh, tapi tidak boleh cepat dimakan, karena takut itu...takut gatal...takut cepat hamil lagi...itu cerita orang dulu...makan garam selama satu minggu setelah melahirkan tidak boleh, ikan yang masak berbumbu, tidak boleh dibumbu ikan itu, hanya di panggang kering...”* (Key Informant 1)

*“...dulu kalau saya hanya berani makan sayur Katuk, daun singkong itu boleh...ikan itu ada jenis ikannya yang boleh...ikan Seluang, Kehung...dipanggang, jangan dimasak berbumbu...”* (Key Informant 2)

On the other hand, the only recommended vegetable is katuk leaves. The recommended way of processing food is only steamed or grilled. This food taboo is mandatory for all postpartum mothers in the Dayak Ma'anyan community to be carried out for 3 months of postpartum. Some informants even do it for up to 6 months of postpartum, to prevent the Tawen phenomenon that they believe in.

### **Restrictions on physical and social activities as a preventive measure for Tawen**

This theme shows that restrictions on physical activities are also carried out as a preventive measure for Tawen. Informants stated that during the postpartum period, there is a prohibition on lifting heavy objects. Postpartum mothers are also required to wear corsets for 3 to 6 months after giving birth. Informants stated that heavy physical activity can worsen postpartum conditions.

*“..kalau itu enam bulan Iabat (berkorset), kalau saya dulu enam bulan Iabat...”* (Key Informant 1)

*“...aktivitaskan, yang berat tidak di...itukan lagi (dikerjakan) sebutannya, selama tiga bulan...”* (Key Informant 4)

*“...lalu jangan lelah bekerja, ibaratnya jangan banyak macam yang dikerjakan saat nifas itu, supaya kita saat tua nanti tidak sakit kaki tangan, serba merasa nyeri...”* (Key Informant 3)

*“...Itampadi makan, bahkan aktivitas, yang berat tidak diitukan lagi (dikerjakan)...”* (Key Informant 4)

Tawen prevention was also expressed by informants from the restriction of social activities. Postpartum mothers are advised to avoid community events such as funerals, parties, and other social events. This is believed to be able to avoid potential exposure to food or activities that can cause Tawen.

*"...boleh datang (ke acara masyarakat), tapi tidak boleh terlalu membantu kegiatan orang...acara sedih maupun tidak sedih...karena buatan orang itu (makanan di acara masyarakat) bisa membuat kita Tawen...tidak boleh sembarang makan saat bersama orang banyak selama tiga bulan..."* (Key Informant 1)

*"...menghadiri acara orang boleh, tapi jangan makan sembarangan..."* (Key Informant 4)

*"...saya dua kali Tawen itu, satu kali Tawen kuburan (acara kematian), karena ke kuburan..."* (Key Informant 10)

## DISCUSSION

### Reasons for practicing the Itampadi custom in the Tawen myth

This study found that the Tawen myth plays an important role in the welfare of mothers during the postpartum period. This can be seen from the perception of postpartum mothers about the reasons for practicing the Itampadi custom as one of the elements of belief in the Tawen myth. Where the main reason expressed is to maintain physical health, and as a form of prevention of worsening physical health conditions in old age due to violating the Itampadi rules. This finding shows that informants have a strong belief that Tawen threatens health. This reason was also expressed by related cross-sectors, namely village heads, traditional leaders, and village midwives, where they emphasized the same thing that the Itampadi practice is carried out as a way to maintain physical health in the Dayak Ma'anyan community.

Another reason expressed was the informant's fear of Aisan (Tawen Phenomenon in old age). Aisan is defined as joint, muscle, and motor pain that will be experienced in old age. They believe that Aisan occurs due to violating the Itampadi rules during the postpartum period. For informants, this non-compliance not only has a direct impact, but also causes serious health problems in the future, such as chronic pain. The belief that Tawen can be life-threatening, and the fear of long-term health impacts are what drives postpartum mothers to practice Itampadi in the Dayak Ma'anyan community. Similar views were also expressed by related cross-sectors, where they stated that non-compliance of postpartum mothers in practicing the Itampadi custom will have a direct impact on physical health (occurring during the postpartum period), or conversely the impact of Tawen will be felt when postpartum mothers enter old age. This shows that physical health reasons are the main point that motivates the practice of traditional care. Motivations like this are generally often found as one of the reasons someone complies with a rule or traditional practice in the community. For example, in a study of Malaysian women, one of the motivations for following traditional practices such as Malay massage and herbal use was for physical recovery (Dewi, Sudaryati, & Zuska, 2020). The hope for faster recovery and avoidance of labor complications when using traditional medicine is also found in Zambian women's culture. Where there is a belief that traditional medicine is more natural than conventional medicine, so it is more efficacious in physical recovery is the basis for motivation to implement these practices (El et al, 2020). Maintaining physical health as a reason for following traditional practices during the postpartum period is also seen in the postpartum care tradition in Manunggang Jae village, Padangsidempuan, Indonesia, where the Marapi tradition is often applied with the hope that postpartum mothers will

recover faster and be physically strong (Dewi, Sudaryati, & Zuska, 2020).



### **Tawen Myth as a Mechanism to Control Postpartum Mothers' Health**

Researchers found that belief in the Tawen myth is used as a mechanism to control health in the Dayak Ma'anyan tribe. This practice functions as a self-control tool that helps postpartum mothers maintain their health by adhering to certain diets and activities. For informants, the Itampadi practice is an obligation for all Dayak Ma'anyan women to protect themselves from the impacts of Tawen which are considered very serious. This means that traditional practices such as Itampadi are considered as one of the systems to maintain health.

Traditional practices are often found as a form of effort to maintain health. This can be seen from several previous studies that show traditional treatments such as consuming herbs or spices and massage from village shamans, are used to overcome physical problems during the postpartum period, especially in the culture of the South Sumatran community (Setyowati, 2019). The use of traditional plants is also reported to be often practiced in an effort to facilitate breast milk and postpartum healing (Sibeko, Johns, & Cordeiro, 2021). In the Kaili tribe, for example, practices such as massage, herbal baths, and facial massages are believed to restore the anatomy of the vagina and uterus, and are used as a concept of protecting the health of postpartum mothers (Suryani & Usman, 2020). This shows that similar practices such as Itampadi in the Dayak Ma'anyan tribe are often carried out as an effort to maintain the physical health of postpartum mothers.

Although the Dayak Ma'anyan community believes in the importance of the Itampadi practice as a mechanism for controlling health, this belief makes them not dare to ignore the Itampadi practice even though it is contrary to medical advice. This is in contrast to the beliefs of local health workers. Where health workers believe that the Itampadi practice is no longer carried out. The health sector strongly believes that health education regarding the importance of balanced nutrition, and the prohibition of restricting food as the main essence of the Itampadi practice, has succeeded in changing people's beliefs regarding the Tawen myth. However, the main informant stated the opposite, their belief in this practice is very strong, because their experience of trying to ignore the Itampadi practice on the advice of medical personnel, actually resulted in them experiencing the Tawen phenomenon. This experience made them decide to ignore the medical advice given. This strengthens their belief that this practice is important and should not be neglected, even if it goes against medical advice.

The contrast between customary views and health practices is often found in community groups. Several previous studies have stated that despite access to modern health practices, some people still follow traditional practices such as restricted movement and the use of unsafe home remedies, because they believe that these have benefits for the health of mothers and babies (Ahuja et al, 2023). In terms of services, previous studies have stated that maternity services and care are often restrictive and bureaucratic, in a controlling system that is not culturally sensitive (Phanwichatkul, Schmied, & Liamputtong, 2022). This shows that professional nursing practices are often not aligned with cultural beliefs/values that exist in the community. The contrast between the views of key informants and health workers regarding the application of Itampadi practices in this study shows that health workers tend to be culturally insensitive.

### **The Combination of Fear and Calmness as the Emotional Impact of the Tawen Myth**

The role of the Tawen myth in the well-being of postpartum mothers is also illustrated by the emotional impact they feel. The practice of Itampadi in the Dayak Ma'anyan community is based on a deep fear of Tawen, which they believe is a serious threat to the health of postpartum mothers. Tawen is seen as an existential threat, where they believe Tawen can

cause death. This shows the great influence of cultural beliefs on postpartum health behavior. This feeling of fear triggers alertness and compliance with these traditional rules. On the other hand, the practice of Itampadi is not considered a burden or pressure by informants. Complying with the Itampadi rules actually provides a feeling of calm and security. Postpartum mothers do not feel stressed in following the rules, because this practice has become a habit that has been passed down from generation to generation. The aspect of hereditary tradition plays a major role in the internalization of the Itampadi rules. Therefore, even though there are restrictions, postpartum mothers feel protected by the practice.

Emotional responses such as fear or security experienced by postpartum mothers show that cultural attachment is very important in providing emotional and mental stabilization of mothers during the postpartum period. Emotional aspects as found in this study were also reported in previous studies on Zambian women, Lusaka Province. Many Zambian women were reported to use traditional medicine during childbirth because they were afraid of going against beliefs or norms inherited from parents or community elders from generation to generation (El et al, 2020). Other studies have shown that interventions involving aspects of traditional medicine such as herbal steam baths can create emotional responses such as feelings of calm and comfort and can prevent postpartum blues (Maharani, Anwar, & Suwandono, 2019).

### **Social uncertainty, the dilemma of limited food choices, and the potential for violation of taboos, as sources of stressors**

Researchers found that there was a stress response experienced by informants. The stress response that emerged was not directly related to the practice of Itampadi, but rather related to social situations, such as the obligation to attend community events. The most common stress response felt was anxiety due to uncertainty regarding the food served at community events whether it was in accordance with the Itampadi taboos. This anxiety arose from their inability to control the food served. This shows a very strong emotional attachment to the Itampadi food rules (food taboos). Social uncertainty is an external stressor in carrying out this practice. In addition, although Itampadi provides peace, mixed feelings were found regarding limitations in food choices. Postpartum mothers experience a dilemma between following taboos and the need for food variety during the 3 months of postpartum. This feeling shows an internal conflict between the desire to maintain health and the physical reality of the limitations of food choices that can be consumed. This condition proves that even though the Itampadi tradition to prevent Tawen offers psychological security, there are still aspects of this practice that create discomfort.

The fear of breaking taboos, especially related to food that is considered to cause Tawen, is the main stress for informants. Anxiety is more focused on postpartum mothers' beliefs regarding the possibility of violations that could endanger their health. This stress shows the strength of the belief in the relationship between food taboos and health. The fear of breaking taboos is not only a social fear, but also a result of the real physical impacts they feel. This means that, although the Itampadi practice is considered a protection against Tawen, this practice and beliefs about Tawen also create significant emotional stress, especially related to the potential for violations of the practice. Sources of stress during the postpartum period in indigenous groups are often associated with taboos and customary rules. Although in several studies found researchers did not directly mention that taboos and customary rules are the main source of stress during the postpartum period, it was found that beliefs and pressure from the social and family environment regarding compliance with traditional practices have the potential to create emotional burdens during the postpartum period (Ali, Gnanasan, &

Farooqui, 2018; Wahdakirana & Rahayuningsih, 2021; Savitri, Hayati, & Daryanti, 2022; Nuriaili, 2023). The obligation to comply with customary rules such as the tradition of isolation and prohibitions on using medical facilities (Nuriaili, 2023), as well as customary practices that limit access to more modern mental health services (Savitri, Hayati, & Daryanti, 2022), and social pressures such as expectations that postpartum mothers must fulfill traditional roles and responsibilities towards the family (Wahdakirana & Rahayuningsih, 2021) can be a source of stress, especially if the rules or taboos during the postpartum period are believed to be a necessity that needs to be implemented to maintain safety and health. Cultural beliefs, including dietary restrictions, can have psychosocial impacts on the individuals who experience them (Matsuda, 2023).

### **Food taboo practices as a reflection of deep concerns**

Researchers found that there was a link between diet and prevention of health problems (Tawen), with rules that were passed down from generation to generation. Food taboos such as yellow-sap plants and papaya fruit expressed by informants were based on the belief that these foods had a negative impact on postpartum mothers. For example, informants revealed that papaya fruit is believed to cause itching in the genital area and increase the potential for postpartum mothers to become pregnant again before completing the 3-month postpartum period. In addition, the only vegetable considered safe for consumption by postpartum mothers is katuk leaves. The taboo on salt and spicy foods for the first week after giving birth, where food may only be processed by steaming or baking, identifies that there is a belief related to good food processing methods as a prevention of Tawen. This shows that they believe that one of the keys to maintaining the health of postpartum mothers is simple food processing. The implementation of the duration of food taboos for a fairly long period, namely 3 months, shows a strong belief in the long-term effects of the Tawen myth.

Findings related to the implementation of dietary restrictions are often found in traditional cultures. For example, avoiding certain foods that are considered to slow recovery or affect the quality of breast milk, or not consuming cold foods, are practiced by many Malaysian women during pregnancy and the postpartum period (Ali, Gnanasan, & Farooqui, 2018). In the study, dietary restrictions play an important role in traditional health practices during pregnancy and childbirth, for the recovery of the body and the balance of maternal health (Ali, Gnanasan, & Farooqui, 2018).

### **Restrictions on physical and social activities as a preventive measure for Tawen**

Another prohibition expressed by the informant is the restriction of physical activity. Where there is a prohibition on lifting heavy objects and the requirement to use a corset for 3 to 6 months after delivery. The informant stated that heavy physical activity can worsen postpartum conditions. This prohibition reflects an effort in the Dayak Ma'anyan community to maintain physical stability and prevent complications that can arise if the body is overworked.

The informant also revealed that there is a prohibition on attending social events during the postpartum period. In the first three months, postpartum mothers are not advised to attend community events such as funerals, parties, and other social events. This is done to avoid potential exposure to food or activities that can cause Tawen. This social restriction shows that the Dayak Ma'anyan community not only maintains the physical health of postpartum mothers through food prohibitions and physical activities, but also protects postpartum mothers from potential external risks such as exposure to inappropriate food or environments that can increase the risk of postpartum mothers experiencing Tawen.

Prohibitions on physical and social activities are also reported to exist in traditional Malaysian culture. Women who are in the postpartum period are subject to restrictions on physical activity such as a ban on heavy activity because it is believed to affect recovery, as well as overly active activities that can cause fatigue. In this culture, rest and traditional therapies such as Malay massage are recommended to improve blood circulation and accelerate recovery. Social restrictions are also applied to avoid disease or other dangers to the health of the mother and baby, such as limiting social interaction with outsiders (Ali, Gnanasan, & Farooqui, 2018). From this description, the researcher underlines that psychosocial problems related to beliefs in the Tawen myth arise from a combination of feelings of fear and calm in postpartum mothers in practicing Itampadi. Where fear of Tawen is a strong factor that makes postpartum mothers in the Dayak Ma'anyan tribe obediently carry out the Itampadi practice, while compliance with the practice also provides emotional calm. Psychosocial problems also arise from social uncertainty, the dilemma of limited food choices, and the potential for violations of taboos. These three points are indicated to be sources of stressors that trigger stress responses in postpartum mothers. The stress felt by postpartum mothers is more dominantly related to external factors such as social and limited food choices, while the Itampadi rules actually provide a feeling of security and avoid stress. The practice of food taboos in the Itampadi tradition as an effort to prevent Tawen also creates an emotional dilemma. This situation shows the potential for conflict between cultural rules and physical needs that are not always easy to implement. The findings of psychosocial problems underlined by researchers illustrate that traditional practices can provide psychological security, but in certain contexts also create emotional stress, especially when facing social changes and more modern physical needs.

## **CONCLUSION**

This study shows that psychosocial problems from belief in the Tawen myth arise from postpartum mothers' fear of the health impacts of violating the taboos they believe in. In addition, social uncertainty, the dilemma of limited food choices, and the potential for violation of taboos trigger a stress response in postpartum mothers, while obeying the rules of taboos actually provides a feeling of security and avoids stress. This illustrates that traditional practices can provide psychological security, but also create emotional stress. Seeing how the belief in the Tawen myth is used by the Dayak Ma'anyan community as a mechanism to control postpartum health, as well as the psychosocial impacts that arise from traditional practices that are believed, nurses who work in traditional communities must have a deep understanding and sufficient cultural competence to accommodate community beliefs related to the Tawen myth and Itampadi practices, with modern health practices. Nurses need to bridge the gap between professional health science and traditional cultural beliefs. Applying a transcultural nursing approach by collaborating with traditional leaders and traditional birth attendants can be considered. In addition, nurses must consider the subjective experiences of postpartum mothers when providing health education. Respecting the mother's personal experience in going through the postpartum period will help create a relationship of mutual trust. Collaborative actions and the creation of a relationship of mutual trust between nurses and the community can encourage indigenous people's acceptance of modern health practices, without ignoring the traditional beliefs of the community.

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