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Indigenous Health of Tolotang Community on Handling Children Diseases in Sidrap Regency

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ABSTRACT

Tolotang community one of Bugis ethnic are still maintaining customs, culture, and beliefs in handling child diseases. The study aimed to analyze the thoughts and feelings of the Tolotang community in handling child diseases. This study used qualitative methods with ethnographic designs which involved 28 informants. Data were collected using in-depth interview method and then processed by content analysis. Results showed that the thoughts and feelings of the Tolotang community in the form of knowledge about childhood diseases included 21 diseases in children that were known based on signs and symptoms of emerging diseases; occurrence of disease in children is caused by many factors including the factors of milk or food consumed by children and diseases acquired while still in the womb; prevention of disease in children includes the implementation of complete immunization, providing vitamins and massaging the baby using massage oil; and handling child diseases by bringing to the dukun, reading incantations, giving traditional medicinal herbs or directly bringing them to health care facilities. We conclude that the handling and prevention of traditional childhood diseases is still very high in the Tolotang community, so it was recommended that in increasing public knowledge about prevention and search for appropriate health services children need to maximize the role of health workers, especially in health promotion through various media and information channels.

Keywords: Indigenous Health, Community, Tolotang, Children Disease, Culture

INTRODUCTION

Reciprocal and cultural sensitivities are crucial healthcare to Aboriginal Australians, such as using spiritual or magical treatments and the use of traditional medicines that are thought to be able to relieve symptoms cause of disease. Such as to cope with the wind and flu, wounds, headaches, muscle aches and skin rashes.^[1] Hill (2009) study about health in Aborigines based on culturally oriented interventions and disease prevention strategies and how to apply indigenous knowledge and traditional treatment approaches to interventions for populations risk or Aboriginal communities.^[2]

Most of the people in Giri Jaya Village, Sukabumi Regency still carry out traditional medicine. Knowledge about treatment is generally closely related to the belief system that he believes. Knowledge of the etiology of the disease is based on traditional cultural concepts, relying on previous generations experiences that are handed down orally and are usually taken for granted. In traditional medicine systems cultural and ecological aspects give a dominating pattern.^[3]

The Bugis ethnic provides a special naming of children's disease which is in effect hereditary based on the characteristics and symptoms of diseases seen in the child. Some differences in terms or names of diseases in children between health workers and Bugis ethnic communities such as: varicella they are familiar with the term

mattuo-tuo, typhoid they are familiar with no ise', diarrhea they are familiar with jambang jambang, and so on. Treatment of diseases in children according to Bugis ethnicity is by using a mixture of oil, herbal medicines and reading incantations while massaging.^[4]

The problem of sick children is a very complex problem in a family. Indonesia from every 1000 births, 40 of whom will die before they are 5 years old. Indonesian toddler mortality rate is currently the highest in other ASEAN countries, namely: 4.6 Times higher than Malaysia, 1.3 times higher than Philifina and 1.8 times higher than Thailand. The main causes of infant and toddler death in Indonesia are acute respiratory infections (ISPA), birth complications and diarrhea.^[5]

Refer to secondary data available at the Health Office, Population Control and KB Sidrap District (2018), the number of morbidity according to age in 2018 in Sidrap Regency with the highest number of cases among children included: diarrhea in infants 266 cases, toddlers 1.016 cases; pneumonia in infants 16 cases, toddlers 774 cases; lack of nutrition in infants 41 cases, toddlers 199 cases; infection in infants 43 cases, toddlers 135 cases. Meanwhile for child mortality in 2017 in Sidrap Regency covers 23 infant deaths, while in 2018 there were 19 cases of infant mortality.^[6]

In Sidenreng Rappang (Sidrap) area of South Sulawesi, there is a Tolotang community known as the Bugis tribe who are very good in maintaining ancestral heritage. Tolotang community is very firm in maintaining the customs, culture and beliefs that are adopted. In addition, the Tolotang community greatly glorifies their ancestors. The community is quite proud of their leaders who have the title Uwa'or Uwatta.^[7] Furthermore, Marhani (2016) says that different religious and belief factors will certainly have an impact on thinking and a series of different behavioral patterns.^[8]

It will also affect people or individuals in the maintenance of their

health, including the treatment of children's disease. Thus, this research is to know the thoughts and feelings of the Tolotang community in the treatment of disease in children.

METHOD

Location and Design of Research

This research was conducted in the work area of Manisa Health Center and Amparita Health Center on March 22 to May 7, 2019. The type of research used was a qualitative research with an ethnographic approach.

Informant

The informant selection method used is the snowball method, which is a data retrieval method that will discuss a little longer, it will become big, informants in this study were 28 people consisting of 8 traditional children healer, 9 children / families, 7 health workers and 4 people traditional leaders/community leaders.

Method of collecting data

The method of data collection in this study is by in-depth interviews and observations of the in-depth interview process. To guarantee and reflect the accuracy of the information gathered, researchers use triangulation techniques and sources. To obtain facts in the field, researchers equip themselves with interview guidelines, documentation tools (voice recorders and cameras) and field notes.

Data Analysis

The process of data analysis in this study is to collect all data from interviews according to the variables included in the research. The data analysis technique used is content analysis and then interpreted in the form of narratives, matrices, and schemes.

RESULT

The informants in this study were 28 people, consisting of traditional leaders/community leaders 4 people, 8 dukuns, 9 parents, and 7 health workers. The age of the informants interviewed ranged from 30 to 84 years. The thoughts and feelings in this research are the knowledge of the Tolotang community regarding diseases

affecting infants and toddlers, signs and symptoms of the disease, causes of disease, and prevention of diseases in children. The attitude that is a form of treatment of diseases of infants and toddlers conducted by the Tolotang community either based on personal experience or the experience of others.

The results obtained by the community were the Bugis Tolotang community, recognizing child diseases in two categories, namely diseases commonly experienced by children such as fever, influenza, smallpox, allergic to itching, cough, influenza, abdominal pain, typhoid, intestinal worms and so on. Then there are a number of pediatric diseases in the Bugis community know with lasa ana'like lingkao bolong, lingkao pute, sawengeng, lasa ana' seddeng/sikeppo, lasa ana' terri, and lasa ana' maggarengkeng and serru' matanna.

Based on the indepth interviews, the informants knew the child's illness based on the signs and symptoms that appeared in sick infants and toddlers. As for child disease based on signs and symptoms that appear as in lingkao bolong disease can be known if the signs that appear include the palms and feet that look black if pressed likewise on the whole body of the child and vice versa on lingkao pute the leg and palms look pale white if pressed. In addition, in children with diarrhea parents know the signs and symptoms that occur if the child is experiencing bowel movements more than three times a day accompanied by the consistency of runny stools.

The illness in children is caused by several things according to the Tolotang community informant, among them is baby blood circulation is not smooth, child bathing is irregular and not timely, not paying attention to the placenta, the food consumed by breastfeeding mothers, the disease that was obtained when the baby was still in the womb, the baby was surprised, the age of the mother who was very young had an impact on the health of her baby at birth, fever which is a reaction after immunization, factors from formula

milk, weather and season factors, and feeding bottle used are not clean. While the answer from the health worker informants that caused the child to be sick was because decreased immunity, the child was infected with the virus, and it could be caused by food consumed by the child.

It was also known that the informants knew about prevention of diseases in children. Based on the results of indepth interviews with informants, it was found that prevention of childhood diseases including obeying parental restrictions such as not bringing children out of the house in the evening, massaging children using massage oil in children, carrying out complete immunizations, arranging schedules bathing the child, bringing the child to the traditional healer for disease prevention, routinely giving honey to the child's immune system, putting on a panini/bangle when the child is out of the house. Furthermore, the results of in depth interviews with health worker informants prevention of diseases in children include providing health education, giving vitamins and health checks during the implementation of posyandu, and providing health education to newborn mothers regarding handling of children.

The attitude of informant in the treatment of child diseases manifested in actions such as bringing children to traditional health services such as traditional healer of child or dealing independently using traditional medicines. Other informants used incantations in handling child diseases. Meanwhile, others handle child diseases by bringing their children to health care facilities such as puskesmas, posyandu, pustu or to health workers who carry out health services at home.

DISCUSSION

Tolotang community knows several diseases that commonly attack infants and toddlers such as fever, influenza, smallpox, abdominal pain and diarrhea. Tolotang community also knows about child diseases that the Bugis community calls lasa ana',

which are among them sawengengon medical known as malnutrition, lingkao bolongon medical known as cyanosis, lingkao puteon medical known as anemia/iron deficiency, lasa ana' maggarengkeng, sikeppoon medical known as ectoparasitosis, salo mettiang on medical known as hyperhidrosis and lasa ana'terri.

The concept of disease has been explained by Marimibi (2009) that disease is a cultural product. In society the disease is expressed and constructed differently. As in Indramayu tampek (measles) is also called fever because the symptoms high body temperature.^[9] Based on research by (Elisa, 2015) stated that all types of itchy skin diseases are known as "puru-puru" by the local community which is equated with scabies. Even though not all skin diseases are included in scabies.^[10] Differences in disease knowledge based on ethnicity were also discussed by Lowth (2015) it was stated that population groups with cultural, religious or ethnic differences showed differences in behavior and knowledge about diseases. Population groups are also genetically different, so some diseases occur more in certain ethnic groups.^[11]

In this study, it was found that parents of the Tolotang community know the signs and symptoms of diseases that occur in children as in diarrheal disease, signs and symptoms in children with diarrhea defecate three times a day with the consistency of liquid children's stool. In line with the research by Kosasih et al (2015) all informant answered correctly about signs and symptoms of diarrhea, because information about signs and symptoms is often conveyed to health counseling.^[12]

Also known diseases that usually affect children such as turu puse'or malaria which show symptoms such as the presence of a small rash that appears on the child's body resembling small reddish spots. Miliaria is a skin disorder due to sweat retention which is characterized by the presence of miliaria vesicles. Synonyms for this disease are prickly heat, buntet sweat,

lichen tropicus, prickle heat. The complaint that is felt is itching accompanied by the appearance of vesicles, or nodules especially appear when sweating, at the location of predilection, except in the miliaria profunda.^[13]

There are a number of causes for sick children according to the Tolotang community informants, because they do not pay attention to their placenta, where it is thought that the placenta is a baby born child who is older than the baby because it is in the womb first. In line with the research by Harjati (2012) that a sick child who has an unhealthy physical appearance such as weakness and lacks food, and does not want to sleep. This condition is caused by diseases such as fever, abdominal pain, itching and Kakanya. Kaka is the placenta which is considered a twin brother of a child born. The Bajo gives him offerings when his child is sick. Placenta is imagined to run his life at the bottom of the sea. Fever is a part of a permanent and definite relationship between Bajo people and their eldest siblings who are on the ocean floor.^[14]

The concept of disease depends on human behavior and way of life. Thus efforts to overcome it depend on their belief in the causes of illness.^[9] There are a number of things done by the parents of the Tolotang community for prevention of diseases in children, including the implementation of complete immunization. Children immunized means being given immunity to a particular disease. If the child is immune or resistant to an illness, it is not necessarily immune to other diseases.^[15]

In line with the research by Kaunang, Rompas, Bataha (2016) that basic immunization is very important given to infants aged 0–12 months to provide immunity from immunization-preventable diseases including tuberculosis, diphtheria, pertussis, tetanus, polio, hepatitis b and measles. Provision of basic immunization is very influential on the process of infant growth and development.^[16]

Tolotang community also pointed out that they put a bangle on their children

before leaving the house so they would not be disturbed by spirits. That also explained by Sari et al (2015) that tradition is also related to ingredients in plants. For example in Bogor district a bangle plant is used to expel spirits. Bangle with the latin name *Acorus calamus* has the main efficacy as essential oils containing eugenol, asaron, asaril dehidra, tanneries, starch, akoretin and tannins which are efficacious as fragrance ingredients because they have a distinctive aromatic odor. This is what causes bangle to be able to repel spirits or bad creatures because it has an aromatic fragrance.^[17]

Tolotang community generally use traditional medicinal herbs from plants that are used by the type of disease. It also discussed in Nursiyah (2013) that some health children problems that are often in Cluster Melati, Wonosobo Regency are fever, sore throat, runny nose, worms, nosebleeds, diarrhea, constipation, scabies, abluton, and smallpox. While the kinds of traditional medicines used are tamarind, lime, steamed, meet giring, betel leaf, guava leaves, papaya, yellow, chili leaves, brotowali, wuluh starfruit and sambilito.^[18] Handling traditionally uses plants as in handling tampek. In Indramayu mothers treat it by lining up children with kawak acid, drinking honey and lime or giving suwuk leaves, which according to belief can suck up disease.^[19]

Parents in the Tolotang community did their own treatment first as an initial treatment for children. In this health care system there are elements of knowledge from traditional and modern medical systems. This can be seen if there are children who suffer from illness, so the mother or family member will do self medication first. The act of administering this medicine is the first action that is most often done in an effort to treat disease and is a stage of healing seeking behavior.^[19]

Public knowledge about traditional medicine is generally obtained from hereditary experiences, information obtained from families and surrounding environment. The level of public confidence

in traditional medicine to cure or maintain health is very high, so the community chooses traditional medicine as the first treatment option. This belief can arise from experience on previous treatment or experience from others who have felt cured when using traditional medicine.^[20]

3 Medicinal plants cannot be separated from local livelihoods because they have long been carried out, consumed, and managed through custom and local knowledge. Traditional therapy management is often inherited culturally and is important for pharmacology and local livelihoods.^[21] In Mabel, Simbala & Kofri (2016) it was stated that the plant parts that are widely used by the community are leaves and based on their habitus, the most are bush plants.^[22]

1 In addition to the use of plants in handling diseases, massage is also performed on children by traditional child healers so that blood flow is smooth. In addition, the efficacy of the incantations is read by the traditional child healers to cure the disease. In line of research by Syuhudi (2013) namely the essence of the treatment is actually the prayers that are blown into the water, herbs, and the body of the patient. The water, herbs, and body of the patient are just a container. At the time of the treatment, both hands of the shamans were spontaneously on the body of the treated person. The aim is to improve blood circulation while loosening stiff or strained patient veins.^[23]

The treatment of disease by the massage of the herbalists was also expressed in the research of Dwiningsih et al (2014) that the Marapu herbalist is also able to do healing through massage which is practiced on the ethnic Sumba province of NTT and also give Medicinal herbs. The method of massage or sequence is done by sorting the body part of the patient with varied movements, because between one shaman and others have different ways of sorting.^[24]

CONCLUSION AND RECOMMENDATIONS

Conclusion

The thoughts and feelings of the Tolotang community in the form of knowledge about childhood diseases include 21 diseases in children which are known based on signs and symptoms of emerging diseases; the cause of the occurrence of disease in children is caused by many factors including the factors of milk or food consumed by children and diseases that are acquired while still in the womb; prevention of disease in children includes the implementation of complete immunization, providing vitamins and massaging the baby using massage oil and handling child diseases by bringing to the dukun, reading incantations, giving traditional medicinal herbs or directly bringing them to health care facilities.

Suggestion

From these findings, it is known that the handling and prevention of traditional childhood diseases is still very high in the Tolotang community, so that in increasing public knowledge about prevention and search for appropriate health services children need to maximize the role of health workers, especially in health promotion through various media and information channels.

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