

Traditional Practices In Postnatal Care: The Malay Community In Malaysia

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INTRODUCTION

Traditional practices in postnatal care continue to be widely popular in Malaysia. For generations, these practices have been taught and strongly followed within the community. They are based upon practical experience and observation, and involve the use of plants, mineral substances and rituals derived from socio-religious beliefs¹. It is believed that a woman would regain her energy and health after childbirth by following these methods. As a consequence, there is a growing commercial interest in these practices. This essay will outline the types and benefits, as well as the commercial aspects, of this ancient practice.

MALAYSIA

Malaysia is located in South East Asia; the capital city is Kuala Lumpur. It has an area of 329 749 km sq, which is inhabited by approximately 23 million people². The population growth per annum is 2.5 %, and the life expectancy at birth for males and females is 62 years and 65 years respectively. Malaysia has a multiracial society, which lives peacefully and harmoniously. The major races in the society are:

Malays	-	56%	of the population
Chinese	-	23%	"
Indians	-	8%	"
Others	-	13%	"

This diverse racial mixture allows Malaysia to have a multitude of tradition and culture. To this day, each race continues to practice its own tradition. This essay will focus on the postnatal care practices specifically within the Malay community.

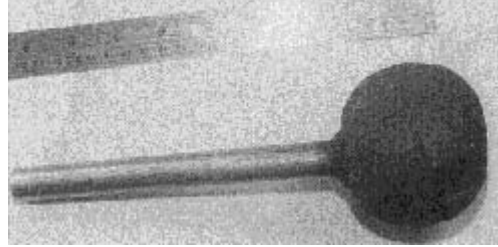
THE TRADITIONAL PRACTICES

During the postnatal period, the woman traditionally goes back to her mother's house, where she will undergo postnatal care with the help of her mother. However, most women nowadays prefer to recuperate at their own home. In fact, many women do the traditional postnatal care themselves. There are six components to the traditional practices of postnatal care. These are:

1. *Tuku*
2. *Mengurut badan*
3. *Barut*
4. *Salai*
5. *Air akar kayu*
6. *Pantang makan dan minum*

These components are performed daily for a period of 40-48 days after delivery. This is known as the confinement period. During this period, the mother is discouraged from working or doing heavy house chores. She is encouraged to breastfeed her child up to the age of 2 years old.

Figure 1: A Tuku



The Components

1. *Tuku*: *Tuku* is a ball-like metal object with a handle (see Figure 1). It is heated up early in the morning by fire and then wrapped with cloth or paper. The *tuku* is then gently rolled over the woman's abdomen. This rolling movement allows the warm heat from the *tuku* to spread throughout the abdomen. It also acts as a form of gentle massage. This process is usually performed before and after the morning bath.

2. *Mengurut Badan*: In English, this means, "to massage the body". It is performed after the *tuku*. It is usually performed three times per week, by an experienced masseur. The masseur starts at the head and neck and slowly massages downwards to the lower limbs. Care is taken in massaging the abdomen. This whole process lasts between 45 minutes and 1 hour. Many believe that the act of massaging prevents muscle cramps and promotes good blood circulation³.

3. *Barut*: *Barut* is made of cloth, and is tightly wrapped around the woman's waist. It is believed that the *Barut* helps the woman to regain her slim body shape. It is usually worn in the morning after the body massage and during the night; it is seldom worn in the afternoon.

4. *Salai*: Of all the traditional practices, *salai* is the least common. It is not widely used, as it has to be built and fixed in the house. *Salai* is a wooden apparatus on which the woman lies. She is encouraged to lie on it in the afternoon. Underneath this apparatus is slow burning charcoal or wood in a metal basin; the heat from the charcoal or wood

Figure 2: A Salai



soothes and relaxes the body (see Figure 2).

5. Air Akar Kayu: Air akar kayu means “*tonic drinks made from medicinal plants*”. Malaysia, being situated in the equatorial belt, contains rich varieties of tropical flora. More than 250,000 species of flowering plants have been reported, of which 1230 species are reported to be medicinal. Among these, only about 100 to 150 species are commonly used in traditional medicine preparations⁴. “Sepang” (*Caesalpinia sappan*) and “Kederang” (*Hymenocardia wallichii*) are easily available in traditional medicine shops throughout the country. The wood from these plants is boiled in water and then drunk warm. “Kacip Fatimah” (*Labisia pumila*) and “Tongkat Ali” are two other herbs that are popular and widely consumed. These herbs are believed to increase blood circulation and prevent ill health. The Forest Research Institute of Malaysia (FRIM) was formed by the Malaysian government to actively research and conserve medicinal plants that are commonly used in the society.

6. Pantang Makan Dan Minum: This means “*to prohibit oneself from eating or drinking certain food items*”. During the confinement period, the woman is only allowed to eat grilled meat or fish with rice. She is also encouraged to drink plenty of warm water; she is discouraged from drinking cold water or eating fried foods. It is felt that cold water and oily foods prevent good blood circulation, thus causing muscle aches and pains⁵.

Why is it done?

The main aim of these traditional practices is to increase and improve blood circulation. In Malay society, good blood circulation is thought to be the “soul” of good health. It is for this reason that most traditional methods have an element of heat, which can increase blood circulation. It is believed that good blood flow will improve a woman’s health in the long term; many women believe that they will have less muscle aches and joint pains in the later stages of their lives. They also believe that labour in subsequent pregnancies will be less painful as well as quicker. Modern medicine has proven that blood circulation has a direct effect on the well being of body cells and tissues.

Nevertheless, these traditional practices are not fully followed after a Caesarean section; most

women would not do the *Tuku* and *Barut* as they fear that these two acts may prevent proper healing of the surgical incision.

Commercialism

Commercial interest in the use of natural products has grown considerably. According to the World Health Organization (WHO), as many as 80% of the world’s people depend on traditional medicine for their primary healthcare needs. In Malaysia, traditional medicine records annual sales of RM 2 billion⁶ (RM = Ringgit Malaysia; US\$1 = RM3.8).

As a result of the rapid expansion in the utilization of traditional medicinal plants, all traditional medicinal plants, both local and imported, must be registered by the National Pharmaceutical Control Bureau (NPCB) of Malaysia, under the Control of Drugs and Cosmetic Regulation Act 1984. Additionally, all manufacturers of traditional medicine have to comply with strict government regulations in order to obtain the “Good Manufacturing Practices” (GMP) certificate, which was introduced to ensure that manufacturers maintain a high standard of quality in their products⁴. Currently, many of these herbal medicines are sold in capsule form and packaged in air-tight containers.

CONCLUSION

In conclusion, I hope this essay has given a greater understanding of the types of traditional practices in postnatal care in Malaysia, as well as the reasons for continuing it. Although many scientists still regard traditional remedies somewhat skeptically, one should not ignore the fact that many important modern drugs (eg. digitoxin, reserpine) were discovered by following leads from traditional medicine. It is reported that, of the 121 biologically active plant-derived compounds presently in use worldwide, 74% were discovered by researchers verifying the authenticity of information derived from traditional uses of plants⁷. Hopefully, in the future, more research will be performed to identify the benefits of traditional practices and medicines.

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REFERENCES

- Supathan HR. The Role of the Malay Traditional Medicine, 1989.
- Malaysian National Census Report, 1990.
- Said S, Malik MR. Adat Resam Tradisional. Butterworth Publishers, 1992.
- Zakaria M. The Development of Drugs from Plants Used in Traditional Medicine. The Forest Research Institute of Malaysia, 1990.
- Deraman AA, Mohd WRW. Adat Pantang Larang Orang Melayu, 2nd Edition. Berita Publishing, 1992.
- Kumari K, May DY, Ibrahim TMT. Economic Significance of Medicinal Plants in Peninsular Malaysia. The Forest Research Institute of Malaysia, 1998.
- Medicinal Products from the Tropical Rainforest: Proceeding of the Conference. The Forest Research Institute of Malaysia, 1989.