

A STUDY OF PREGNANCY, BIRTH AND MORTALITY RATE IN COLONIAL NARRATIVE AND SACRED NARRATIVE IN SABAH FROM THE 1940S TO 2017

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A community is defined by its uniqueness of traditions and customs, which have been passed down from one generation to another. Among community members, the traditions and customs of the community must be upheld as they are the pride of the community and they indicate the roots of the community. Violating traditions and customs is an act which would be scorned upon and sometimes it is said to cause misfortunes and disasters to the person who violated these traditions and customs and (it is believed, in some cases, these violations may inflict people around him or her, such as family members, as we may see later in this paper). Some of these traditions, customs, and even taboos, which used to be passed down from mouth to mouth, are being recorded in the forms of myths and folklores. These writings could be considered as sacred narrative. In most cases, some theological or religious elements and beliefs are incorporated into these writings, and over a certain period of time, these folklores are considered as either real and factual stories or even legend. In some places, the teaching of such beliefs are taught through the folklores (Bascom 9). The existence of such writings strengthens and gives life to these traditions, but with the passage of time, some of these practices are slowly fading away. In the context of Southeast Asia, the folk beliefs of certain communities are also embedded into the stories and tales. In correlation with the definition of sacred narrative, folk beliefs are the religious occurrences, and they are always related to a high religion that is organised and established (Mohd Taib Osman, 1989). This religion usually is subscribed by the members of the community where the folk beliefs existed. The elements in folk beliefs are varied and diverse. They usually exist to 'ease' the lives of the people of the community in many areas, such as the well-being in health and success in the economic activities. For an example, the Malay and ethnic groups in Malay Peninsular and Borneo are associated with the farming and fishing activities. The people of these communities have to abide by these beliefs in order to gain favours of some 'caretakers' or deities to have an abundant harvest and haul. By breaking or violating the taboos of these folk beliefs, it is believed that the 'caretakers' or deities will be upset with such conducts and bring misfortunes to the people.

For this paper, the element of the folk beliefs analysed is in relation with the process of childbirth: before, during and after. The focus of this paper is the communities of Murut and Bajau Laut—two ethnic groups in Sabah. To study the sacred narrative in writing, the record of the folk beliefs of Murut community in Agnes Newton Keith's first book, *Land Below the Wind* (1939/2010), is analysed. Keith noted many aspects of the Murut people through her observation of her servants, who are the Muruts, and there are many elements of Murut folk beliefs covered in her book. Here, we will only reiterate what Keith has mentioned in her book. The folk beliefs of this ethnic group could not be explored as the Muruts mentioned in Agnes Keith's book has gone through a lot of transformations since 80 years ago. For the purpose of comparison, we have selected another community, namely Bajau Laut, to study the similarities and differences of the folk beliefs in relation to childbirth of these two groups as both groups are originated from Sabah. The record of folk beliefs of Bajau Laut people is obtained through the interviews with a local midwife, her daughter, and a pregnant woman in Kampung Bangau-Bangau, Semporna. The introduction of modern medical care has slowly diminished the role of village midwives; thus, making it difficult to search for a midwife who still conducts the traditional obstetric practices. However, there is one community in Semporna, Sabah, which is the community of Kampung Bangau-Bangau. The people of Kampung Bangau-Bangau, who are from the ethnic group of Bajau Laut, still rely on their village midwife to help mothers during childbirth. Therefore, this ethnic group is selected to be studied on as their folk beliefs are still practiced by the midwife and the people of Kampung Bangau-Bangau. It is interesting to note that these records are years apart, and this study will illustrate the unchanging practices of traditions and customs in relation to childbirth among some Sabahan communities.

LAND BELOW THE WIND (1939)

British's expansion of her empire had seen many British officers sent to serve the empire in many lands under her rule, Borneo included. The long-serving period, which lasted for many years, had caused many men to bring their wives to Borneo and settled on the foreign land. Usually, a British household in Borneo did not consist of only the man and his wife, but there were locals from various races served as the servants in this household. Agnes Newton Keith is the wife of a British officer in Semporna, Borneo, and she had spent many years in Semporna documenting her life and also the lives of the people around her. The Keith's family employed many local servants who came from different races such as Murut, Dyak-Murut, Java, and Chinese.

Land Below the Wind is an autobiographical work which recounts the life led by the Keiths in Semporna, Sabah. The book explores Keith's experiences with the cultures and customs of the locals whom she met while accompanying her husband who served as the Conservator of Forests and Director of Agriculture of North Borneo. Keith addressed several issues in her book, and one prominent issue highlighted by Keith is the issue of childbearing and childrearing according to the Murut's customs, which has inspired for this paper to be written. Through Arusap, the servant in Keith's household, and his wife, Kuta, Keith noted Kuta's pregnancies and how the customs of Murut people in pregnancy and birth.

Kuta was from the Murut ethnic group, which at that point of time did not expose to the knowledge of modern medical care. Even among other Sabahan or Borneo ethnic groups, this knowledge was strange to them. Therefore, when she was pregnant with the first three of her children, Kuta seeks the expertise of her local midwife and people, and she never considered the practice of visiting a doctor for medical check-up and getting help from the doctor and nurse during childbirth. After the premature death of her children and getting pregnant again, Kuta was persuaded by the Keiths to practice the modern obstetrics.

THE BAJAU LAUT COMMUNITY AT KAMPUNG BANGAU-BANGAU, SEMPORNA

Although the advancement of medical care such as obstetrics has reached many parts of Sabah, the traditional customs and taboos which should be followed by a pregnant woman and people who are involved directly or indirectly with her, are still being practised within some Sabahan communities until today. To illustrate the traditional medical care practiced for pregnant women and their children, before and after delivery, interviews with a Bajau Laut midwife and her daughter, and a pregnant woman in Kampung Bangau-Bangau, Sempornawere conducted. The interview with Harabiah, the Bajau midwife was conducted with the help of a nurse and a doctor, who are stationed in Sabah in April 2017 (see index). Luhaya and the nurse also helped to translate the questions and answers in Bajau and Malay languages as Harabiah is unable to speak and understand the Malay language. The interviews, which were held at Kampung Bangau-Bangau, will be an important element in discussing the traditional customs and taboos for pregnant women and their significance in the lives of the Sabahans.

HarabiahbintiBuldani, 87 years old, is a midwife in Kampung Bangau-Bangau, Semporna with experience in delivering babies for more than 20 years. Harabiah has no formal obstetric training and she was not taught by anyone. Her experience with assisting

during delivery started when her neighbour wanted to give birth but there was no midwife in the village. Harabiah who had the experience of being a midwife to her own children was called to help the neighbour as she had experiences of giving birth. Her knowledge of traditional obstetrics accumulated as she helped pregnant women in Kampung Bangau-Bangau who were in need of assistance during childbirth. Harabiah has helped in delivering hundreds of babies for Kampung Bangau-Bangau community.

Sitti Laita binti Md Sali, 34 years old, is an immigrant from the Philippines who has spent many years in Sabah. She has given birth to five children and was preparing to deliver her sixth child at the time of the interview took place. Previously, Sitti Laita's children were born with the help of village midwives as she did not yet receive Malaysian citizenship. In Malaysia, a person has to own a Malaysian Identification Card (IC) to gain access to services provided by the government or else they will be charged at a higher rate (RM2 for local with proper document, RM40 for migrants per visit). This condition had prevented her from receiving modern medical care, and she opted to use midwives' expertise instead. Similarly, Harabiah's daughter, Luhaya, who is without proper document is too scared to go to clinics and get modern medical care. She also gave birth to her three children with her mother's help.

Therefore, it is important to discuss the customs and practices of childbirth of Sabahan locals as explored by Keith through *Land Below the Wind* together with the current practices which are still taking place among Sabahan communities. This approach will highlight some similarities and differences these two communities possess in their beliefs in relation to childbirth. Although almost 80 years have passed since the book was written, the data obtained from the interviews indicates the presence of the traditional obstetrics in the present communities of Sabah.

MORTALITY RATE IN SABAH

According to Department of Statistics, Malaysia, for the 2016 mid-year population of Sabah, it is reported that the current population of Sabah is estimated to be 3, 813.2 million. From the statistics, the number of children between the age of 0 and 4 is estimated to be 313 thousands, and this number is higher compared to the number of children in the previous year, which is 304 thousands. The rise in the number of children may be due to the access to modern medical care, which reduces the mortality rate in Sabah. However, it is undeniable that the access of this modern medical care is still limited for some parts of Sabah, especially the remote areas of Sabah due to difficulties in accessing the medical services provided by the government. Based on the report released by Child Rights Coalition Malaysia (16-17),

there is still a gap in accessing the health care services provided between the urban and the rural areas, and the mortality rates of infants and children under five years old are still high in the remote areas as the access to health care is limited and the quality of services provided is lower compared to the urban areas. In Semporna alone, the prenatal death cases for 2014 are 42 cases, for 2015 are 42 cases and for 2016 are 60 cases and the mortality rate under 5 years old are 87, 102 and 104 respectively (inclusive of prenatal). Based on these numbers, it can be said that the mortality rate among infants is increasing alarmingly. According to Professor Dr Osman Ali from Universiti Malaysia Sabah (UMS), in Sabah, the mortality rate for women during pregnancy and childbirth is still quite common (Sandra Sokial 2010). The major reason for the mortality rates of infants and mothers in Sabah is still evident is due to the inaccessibility of the medical services and infrastructures for the people living in the rural areas.

PREGNANCY AND CHILDBIRTH IN SABAH

In this section of the paper, the pregnancy and childbirth practices of the Murut and Bajau Laut communities are observed and analysed by referring to the extracts taken from the book *Land Below the Wind* and the interviews with the people of Kampung Bangau-Bangau. The book highlights the childbearing practices of the Murut people while the interviews are to observe the practices conducted by the Bajau Laut people.

In the book *Land Below the Wind*, Arusap, one of the servants in Keith's household, brought his wife, Kuta to live with him in Sandakan. Keith noted Kuta's pregnancies in her book, and how the couple had lost all their children due to unsanitary and dangerous traditional methods of prenatal and postnatal care. The book, which was written in 1939, describes some customs and taboos for pregnant women and her baby among the locals specifically the Muruts. However, similar or same customs and taboos are still being practiced by the people of Kampung Bangau-Bangau, Semporna in 2017. The similarities of the past and present are highlighted in this section of the paper.

In *Land Below the Wind*, during the first three of her pregnancies, Kuta, being a woman of Murut, insisted on being sent back to her village. Keith noted this situation in the excerpt below:

And each time before the birth Kuta had prevailed upon Arusap to send her back to her village where pregnancy taboos and birth customs could be observed, and where her female relatives might administer the appropriate poundings of the abdomen and massage preliminary to childbirth (99).

In the Murut community as noted by Keith, there were specific customs and taboos administered to the pregnant women of Murut. Violating this customs and breaking the taboos were believed to cause misfortunes such as death. Based on Keith's experience with Kuta, it was customary for Murut women to receive massages on their abdomens before childbirth. Similarly, in Kampung Bangau-Bangau, the custom of visiting the village midwife for massage is still practiced by the villagers. Harabiah's daughter explained that the massage is usually done to check the condition of the baby before giving birth. Mothers would come to Harabiah, who is the sole midwife at the village, to get her expertise in massaging. The excerpt from the interview taken to indicate this situation is as follows:

- Luhaya : *Mamaku cakap juga bersama diorang tu kan macam diorang mau bersalin sudahkan... Betul juga bahasa Bajau, di... digoncang perut diorang supaya sihat anak diorang, dirasa mama aku.* (My mother also talks with the women who want to give birth. The Bajau language is right. My mother goncang(massages) their stomachs to feel and check the condition of the babies.)
- Nurse : *Diurut* (Massage?)
- Luhaya : *Iya. Diurut.* (Yes, massage.)
- Nurse : *Bukan digoncang, diurut.* (Not shake, but massage.)
- DrRashidi : *Diurut? Di sini digoncang itumaknanyadiurutlah?* (Massage? Here digoncang means massage?)
- Nurse : *Tengok keadaan anak.* (To check the condition of the child.)

Therefore, it is common among some communities in Sabah to visit village midwives to get their "expertise" and knowledge in determining the condition of the baby. Some prenatal massaging techniques are also believed to help prevent breech and correct the posture of the baby if the baby is in the breech position. The prenatal massage is often practiced by the indigenous people, not only in Borneo but other parts of the world as well (Stillerman 3). This prenatal massage is not only to correct the breech presentation, but it is also administered to help in reducing labour pains. Doran (33) noted this practice, which is done by a British doctor in colonial era to his patient is common in Malay community during birth pains.

In *Land Below the Wind*, Keith noted that all four babies of Kuta had died prematurely. Kuta and Arusap believed the deaths of their children are due to the violation of some taboos or the doings of evil witchcraft. It is believed that the violation of such taboos

would cause misfortunes to anyone who violated the taboos. The taboos differ from one community to another. This belief is explored by Keith in her book as she told the story of Kuta, Arusap, and their babies. Kuta's first pregnancy did not go well, and the six-month baby was born still.

This, Kuta and Arusap reasoned, must have been owing to the fact that one night during the time of her pregnancy the fire had been allowed to die down under the house roof, and with the death of the flame the child had died in her womb (99-100).

As indicated above, Kuta and Arusap believed the death of their first baby was due to the violation of a taboo, which was keeping the fire alive in the house. This Murut belief was used to rationalise the death of their child. The second baby's death, who only managed to live until two weeks, was also rationalised with the same reason.

This death, thought Kuta, was probably due to Arusap's carelessness, for while out hunting with the Tuan he had forgotten one of the taboos which, as an expectant father, he ought to have observed - he had eaten the head of a deer (100).

Kampung Bangau-Bangau is a small village floating on water, where most of the population work as fishermen. Sitti Laita, who lives at Kampung Bangau-Bangau said that there is no specific taboo, which she has to follow, except that her husband must not be out working in the sea for too long before her due.

The death of Kuta's third baby, however, was believed not due by the violation of taboos, but rather an intervention of some wicked power. The baby died after three days although traditional methods for its survival were done during the delivery Keith noted in her book:

...This in spite of the fact that the village midwife had cut the umbilical cord with a sharp piece of bamboo, the same piece of bamboo on which she had impaled the entrails of a buffalo, which should have given the child the strength of an animal. So, Kuta and Arusap could only believe that there must have been witchcraft exercised against the child by some enemy (100).

As stated above, the baby's umbilical cord was cut with a piece of bamboo, which was used in the killing of a buffalo. This practice is believed to grant the animal's strength to the baby. Unfortunately, the baby also died, following its other siblings, and the devastated couple could only blame their enemy's evil doings. However, the death of this baby was probably due to an unhygienic delivery, which could be the cause of other fatalities as well. The use of bamboo to cut a baby's umbilical cord is still practiced in some parts of Sabah. When interviewed, Harabiah explained that she sometimes uses a sharp and thin bamboo to

cut the umbilical cord although she prefers to use a knife for the process. This depends on the family's preference because the family of the pregnant woman is the one who usually prepares the tools to be used during the delivery. Another tool which is needed during the delivery is some strands of thread, as the thread is used to tie the baby's attached umbilical cord after separating it from the placenta. The excerpt of the transcript when Luhaya explained the tools used in childbirth, is as follows:

- Luhaya : *Yang baru dibeli lah. Yang potong daging lah, potong anu. Pun tidak apa. Tak tahu lah. Memang tidak... kadang-kadang bulong.* (Just newly bought. The ones used to cut meat, cut the umbilical cord. It's okay. I don't know. Indeed not... Sometimes bamboo.)
- Nurse : *Apa? (What?)*
- Luhaya : *Bulong. Itu yang dikasi nipis lah.* (Bamboo. Bamboo that is made thin.)
- Nurse : *Oh bulong? (Oh bamboo?)*
- Luhaya : *Iya, kadang-kadang itu.* (Yes, sometimes that.)
- Nurse : *Kalau buluh itu... (If the bamboo...)*
- Dr Rashidi : *Buluh juga masih dipakai? (Is bamboo still used?)*
- Luhaya : *Iya. Jadi pakai benang lah. Kalau sudah dikasi putus kan dia punya anu itu tali kan dia pakai ikat benang.* (Yes. So, use thread. After the umbilical cord is cut, it is tied with thread.)
- Nurse : *Oh... (Oh...)*
- Luhaya : *Macam orang anu lah.* (Like how people cut and tie the umbilical cords.)
- Dr Rashidi : *Tapi proses pemotongan masih menggunakan macam buluh juga. Ada juga?* (But the cutting process still use something like bamboo too. Is it true?)
- Luhaya : *Iya. Kadang-kadang itu, kadang-kadang pisau-pisau.* (Yes. Sometimes that, sometimes knives.)

Sitti Laita who has given birth five times mentioned that she used a piece of bamboo to cut her children's umbilical cords. This piece of bamboo was used during the delivery of her first child and was kept to be used for the deliveries of her other children.

Luhaya mentioned that before giving birth, a pregnant woman is given a glass of water. A prayer or incantation is read to the water, and this water functions to help a mother who suffers from a bloated stomach (*busung* in the Malay language). This action of reading a prayer or incantation to a glass of water is called *bertawar* in the Malay language. It is believed to 'neutralise' any bad essence in the body of the drinker. The bloated stomach is

usually said to be caused by some diseases or evil spirits. The water is believed to reduce the bloating and ease the process of giving birth. The excerpt when Luhaya explained the process of *bertawar*, is as follows:

Luhaya : *Tak adalah. Cuma bawa (inaudible) lahmacambiasakanmacambertawar. Betul juga bahasa Bajau. Bertawar-tawar sahaja. Dikasi minum air. Macam ada kan kesilapan bagi ibu bapa. Dikasi (inaudible) dijampi-jampi kan. Baru dikasi minum bagi orang bersalin itu. Kadang-kadang betul juga bahasa Bajau. Dilotok. Ha itu. Sekali itu kan dia baca sajalah ditawar sedikit. Mana tahu kan ada kena busung oleh ibu bapa. Sekali dikasi minum. Syukur Ahamdulillah. Bersalin juga orang yang bersalin itu. (There's nothing much. Just (inaudible) like bertawar ('neutralising'). Bajau language is right. Just bertawar-tawar ('neutralise the water'). Read some incantations to the water. Just give water to drink. Like there are some mistakes done by the parents. Sometimes Bajau language is right. Dilotok. Yes, that's right. Just read something to neutralise the water. Who knows if the parents have busung (bloated stomach). Gave water to drink. Praise be to Allah. The woman who wanted to give birth finally gave birth to the baby.)*

The story of Kuta and Arusap's children continued with the couple having a fourth child, who survived the deadly childbirth due to the modern medical care of that time. After Bayong's birth, the people involved during the delivery prepared some sorts of traditional countermeasures against evil spirits:

After the birth of Bayong the doctor and the nurse made small gifts to him in order to ward off possible danger incurred by their attentions, attentions which would attract the noise of an evil spirit who might harm the child (103).

The "gifts" might be in the form of charms or amulets, and this is related with charms (*tangkalor azimat* in the Malay language) used by Malay or native folks, which serve to dispel evil spirits or to gain some occult or spiritual qualities. Delivering a baby is often said to be associated with evil spirits such as "vampire ghost" (*langsuyaror penanggalan* in the Malay language) which comes to the house of a woman delivering her baby to suck blood (Mohd Taib Osman 1989). Protective charms which are believed to be the defence against any evil spirit that could harm mother and child are given. It is interesting to note from the excerpt above that although doctors and nurses are people who utilise modern medical care, they understood the traditional taboos and such in dealing with the locals of Borneo. Sitti

Laita of Kampung Bangau-Bangau was also given an amulet in the form of a black bracelet made from a strand of string and a lead charm by her husband. This amulet is believed to protect a pregnant woman against evil spirits that might harm her and her baby during pregnancy (see index).

According to Keith, bringing up Bayong was never easy. Keith faced challenges in persuading the couple, especially Kuta to put hygiene before tradition as she called it "...the war of hygiene against superstition and tradition" (103). Kuta fed her baby various food, which is not suitable for a newborn. Keith jotted down the incidents happening inside Keith's household:

"Kuta was terrified that the child would starve, so she secretly fed him tinned milk from a long rubber feeding tube attached to an unwashed ginger-ale bottle (104)."

Besides the incident with the milk, there were other incidents such as when Kuta gave Bayong "...morsels of a more "strength-giving" nature such as rice, pork, fish, and sweet potato" (104).

However, the practice of feeding solid food to the baby at a young age is still continuing until today. According to the doctor and nurses at Semporna, Sabah, it is common among Bajau community, especially among non-Malaysians and mothers, who do not go to the clinic, to feed their babies with porridge made from only blended rice. Fully breastfeeding in this community, meanwhile, is commonly practiced until the baby reaches four months old, and then the baby is introduced to the solid blended food. Some parents also have introduced their babies to food such as oats, which is harder to be digested compared to the rice porridge. Introducing blended diet before the baby reaches six months may cause bowel dysfunction such as intussusception; a condition where "a portion of the digestive tract becomes telescoped into the adjacent bowel segment" and causes intestinal obstruction (Del-Pozo et al 300), which can lead to death.

It is advisable for the parents to feed their babies with blended solid food after they reach six months as their bodies can digest such food at that age. However, the practice of fully breastfeeding the babies for six months is highly encouraged by Malaysian Breastfeeding Policy. The knowledge and awareness received by attending regular check-up for mother and child may help to reduce the mortality rate among infants.

In *Land Below the Wind*, Keith also noted Kuta and Arusap's perception with the idea of exposing their child to the public. Keith described this situation in her book:

Both parents were apprehensive about [placing the child outdoors daily in the early morning sun]. They feared the child would be stolen, or, if not stolen, strangers would

gaze too closely upon him and attract the attention of an evil spirit who might harm him (104-105).

Based on the excerpt above, it was unthinkable for Murut people at that time to place their children outdoors. The fear of practising something new had plagued the locals in the past. Any practice which was out of the norms and customs of their people was often associated with evil spirits and such.

In Bajau community, a woman who has just given birth has her own diet which she has to follow. She must not eat food which can harm her body or slow the healing process. Harabiah's daughter mentioned that some women also asked for their food to be read some prayers or incantations. This is to purify the food and avoid the women from eating "bad" food; food that might contain evil spirits. Mothers in Kampung Bangau-Bangau are given morning bath by the village midwife for three days in a row, while the babies are taken care by the families themselves. The babies are given bath soon after they have been born with warm water.

Harabiah, Luhaya, and Sitti Laita shared their personal thoughts on modern medical care. According to Harabiah, she does not feel threatened by the modern obstetrics and medical services provided by the government. Her service as a village midwife is more towards helping the villagers, and she does not expect monetary rewards for her help. Usually, the payment she received is in the form of money or food. This is because the people of Kampung Bangau-Bangau are living in poverty, and some of them could only pay Harabiah's services using food such as fresh fish.

Harabiah does not only help other women at Kampung Bangau-Bangau. As mentioned earlier, she also helped to assist her own daughter, Luhaya during childbirth. Harabiah helped Luhaya to deliver her children for three times. Luhaya had gone to the government clinic for her first pregnancy but she was turned down because she does not have any documents. Below is the excerpt of the conversation with Luhaya regarding the issue:

Luhaya : *Dulu aku pernah ke klinik tapi saya tidak dilayan sebab aku tak ada IC tu.*

(I've gone to the clinic in the past, but I couldn't get the treatment because I don't have an Identification Card.)

Nurse : *Oh... (Oh...)*

Luhaya : *Sudah aku pinjam laki orang, semua aku buat keputusan lah supaya anak akuboleh dapat pergi sekolah. Sanggup aku pinjam sepupu ku sendiri aku buatsuami. Membikin aku surat nikah tu... untuk surat nikah yang tidak original lah supaya aku disambut pergi klinik, tapi diorang tidak sambut lah.*

Diorangpun bermasalah dari aku dia bilang. (I've borrowed someone's husband and I've done everything I could so that my child can go to school. I even borrowed my cousin to act as my husband. I made a marriage certificate. A fake marriage certificate so that I can use the clinic's services, but they did not let me. They said they will get in trouble if they allowed me.)

Nurse : *Tidak diterima mungkin sebab tiada dokumen. (Probably you're not being allowed to because you don't have any document.)*

Luhaya : *Iya. Satu kali... Enggak ada (inaudible). Aku bilang biar pun aku kena bayar asalkan anak aku surat lahirkan. Tapi diorang tidak mampu kasi masukkan aku sebab diorang bilang aku ni tiada IC tu. (Yes. Don't have (inaudible). I said I don't mind paying as long as my child gets the birth certificate. But they could not let me in because they said I don't have Identification Card.)*

So, Luhaya turned to her mother to help her in giving birth. Similarly, Sitti Laita used village midwives to help deliver five of her children. Before moving to Kampung Bangau-Bangau, Sitti Laita stayed with her sister in Kudat. She had no document then; therefore, the only option she had was to get help from the local midwives in Kudat and Semporna. In 2010, Sitti Laita finally received her identification card as the citizen of Malaysia and is now able to use medical services provided by the government. She prefers to use modern prenatal and postnatal care as she believes modern medical care is more hygienic and safe for her and her children. Any complication before, during and after delivery can be handled more efficiently in the hand of the professional medical doctors and staff.

OF THE TRADITIONAL AND MODERN OBSTETRICS

There are several concerns identified from the interviews with Harabiah, Luhaya and Sitti Laita regarding the traditional and modern obstetrics. The concerns are the changing of perception and preference towards traditional practices, the cost medical bills for non-citizens, and the concern of losing the knowledge of traditional medical care for pregnant women.

People in the rural areas of Sabah such as at Kampung Bangau-Bangau are now choosing modern health care services and facilities rather than going to traditional medical practitioners. The increase of awareness especially in obstetrics regarding the high risk of delivering without any supervision of the professionals probably causing more women, like

Sitti Laita, to go to the clinics and hospitals for check-up and delivery rather than visiting village midwives. However, the services for these areas are still limited and not easily accessible to all Sabahans.

From the interview with Sitti Laita, it is discovered that some women at Kampung Bangau-Bangau prefer to go to their village midwife, Harabiah although they have access to modern medical care. They are in the same situation like Sitti Laita. They have given birth to their children with the assistance of a village midwife. Later, once they receive their Malaysian citizenship, they still ask for the village midwife's help during delivery. The reason for this situation is the women, who have received their Identification Card, probably feel comfortable and at ease with the presence of someone whom they know rather than delivering their babies with the help of doctors and nurses who are strangers to them. Therefore, the familiarity of the whole process of giving birth without any medical support has caused them to opt for the traditional obstetrics for their coming children.

Although the traditional medical care might not be fully safe for the mother and child's health, this knowledge is somehow losing its place among the Malaysians in general. Mothers opt to deliver their babies at clinics and hospitals, and they go for medical check-up after the delivery. The advance of medical care has diminished the role of traditional medical care, and this knowledge might not exist anymore in the future. The lack of village midwives might be one of the reasons why this traditional medical care is no longer practiced by the people.

CONCLUSION

This paper utilises two methodologies, which are analysing a colonial text written by Keith and the interviews with a midwife, her daughter and a pregnant woman of Kampung Bangau-Bangau to explore the Murut and Bajau Laut beliefs respectively, with regards to pregnancy and childbirth. There are some practices which are practiced by both communities such as the prenatal massage and the tools used to cut umbilical cords. However, there are some practices of the Murut people which are introduced in *Land Below the Wind* but are not practiced by the Bajau Laut community in Kampung Bangau-Bangau. This is probably due to the fact that many years have passed after the practices of the Murut people was recorded in the book; therefore, many practices are no longer practiced at present. The influence of religion such as Islam which is subscribed by the Bajau Laut people may also cause these practices are no longer common today.

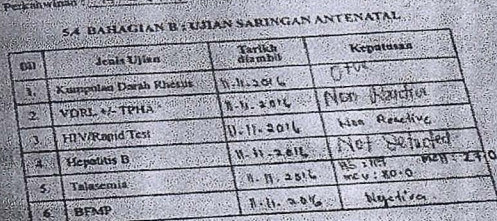
Besides the traditional practices explored in the text and the interviews, the concerns in regards to modern and traditional obstetrics are also observed. The concerns are the changing of perception and preference, the cost medical bills for non-citizens, and the concern of losing the knowledge of traditional medical care for pregnant women. These concerns are observed based on the interviews especially with Luhaya and Sitti Laita, the young women of Kampung Bangau-Bangau.

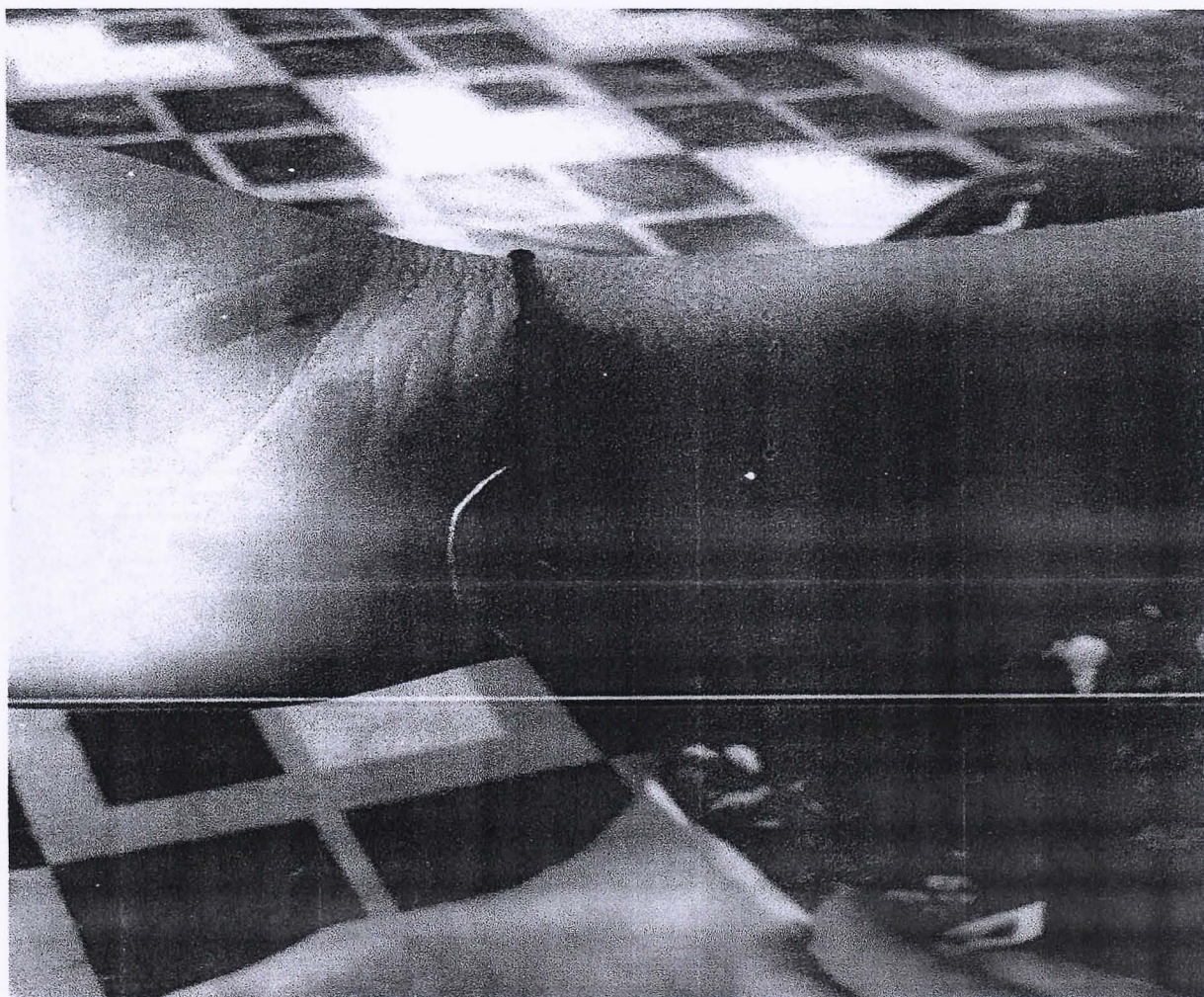
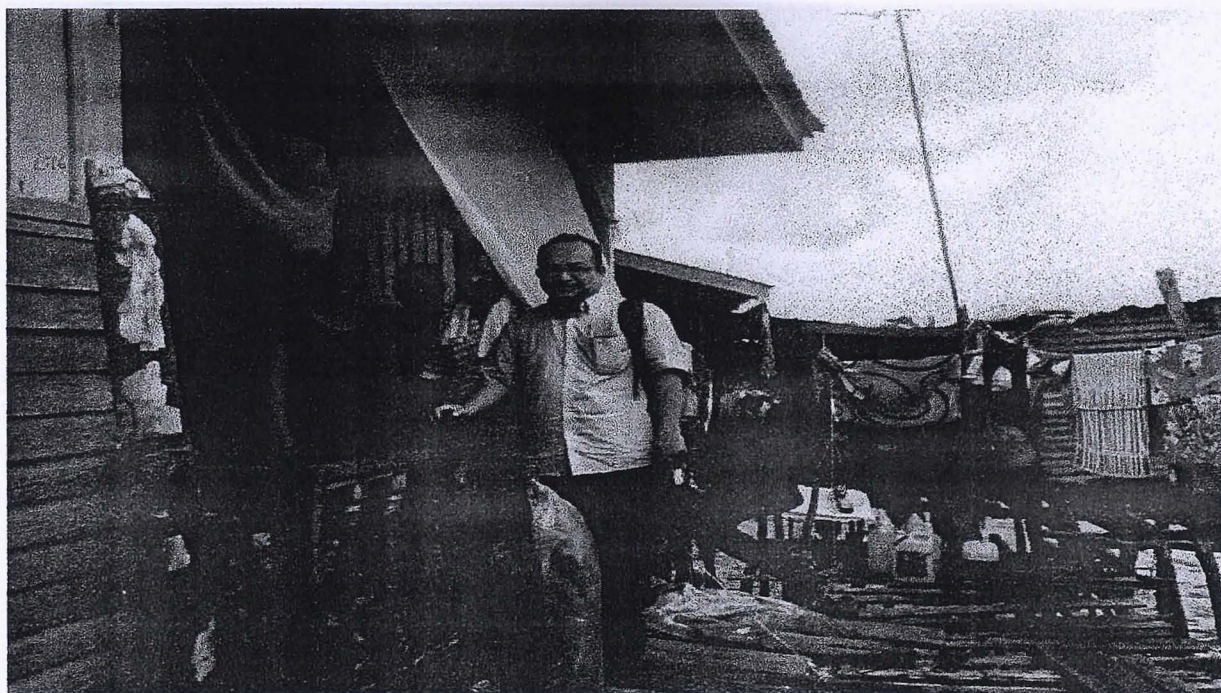
It is important to note that although the focus groups for this paper are two different ethnic groups in Sabah, there are some practices which are practiced by both groups. Besides that, the time difference of almost 80 years between the records of practices obtained does not mean the practices are no longer available at present. However, the recent trend of opting for modern medical care might slowly diminish the role of village midwives and the traditions and customs that they have been steadfastly hold on to.

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REKOD KELAHIRAN

Tempat kelahiran: Semporna

Tgl lahir: 07/04/2017

Jantina: ♂

Berat: 3.5 kg

Tempat: Semporna

Tidak lengkap: ☐ Berat: 3.5 kg

Breast: ☐ Assisted Breast: ☐

Vaccuum: ☐

Emergency: ☐ Classical: ☐

Retained Placenta: ☐

1st degree: ☐ 2nd degree: ☐ 3rd degree: ☐

Intact: ☐

5.20 BAHAGIAN G : REKOD KELAHIRAN BAYI

Bayi: 4.0318 Jantina: Boy

Massa badan: 52 sm Lilitan kepala: 35 sm Lilitan dada: 32 sm

Kardinal: 9600 (falan)

Lahir mati: ☐ Vit K: 8100 (falan)

1 minit: ☐ 5 minit: ☐ Nyatakan: 8100

Aliran Darah Kongenital: Ada ☐ Tiada ☐

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REKOD KESIHATAN IBU

NO. PENDAFTARAN: 3770012

NO. KAD PENGENALAN: 606312123456

50817 / 2015

P (Natal)

4/2017

REKOD KESIHATAN IBU

SIMPANAN KLINIK

Cop dan No. Tel. Klinik: 3770012

Nama Ibu: Btiti Latta Papi Ind. Sari

Kumpulan Etnik: Bajau

Warganegara: Philippines

Tahap Pendidikan: Tidak

Pekerjaan: gaji

Alamat Rumah (1): K. Bangau - Bangau

Sambutan C. E. H. (Kampung Laka)

Rumah Bata (Kakak)

No. Tel: (R) 3770012

(HP) 3770012

(P) 3770012

Alamat Rumah (2): 3770012

No. Tel: (R) 3770012

(HP) 3770012

(P) 3770012

Faktor Risiko: 3770012

THA (LMP): 09/02/12

TAL (EDP): 09/05/12

TAL (EDD): 11/04/12

Gra: 09/05/12

Tarikh lahir / umur: 14/02/12 (34) th

Nama Suami: Francis Leo Macatang

NO. KAD PENGENALAN SUAMI: 3770012

Pekerjaan: gaji

Alamat tempat kerja suami: K. Bangau - Bangau

No. Tel: (R) 3770012

(HP) 3770012

(P) 3770012

Simpan buku ini ditempat yang selamat.

Bawa buku ini setiap kali anda pergi ke klinik/hospital

untuk mendapatkan pemeriksaan

Pejabat Kod Warna Postnatal: 3770012

Faktor Risiko: 3770012

Alamat Semasa Postnatal: 3770012