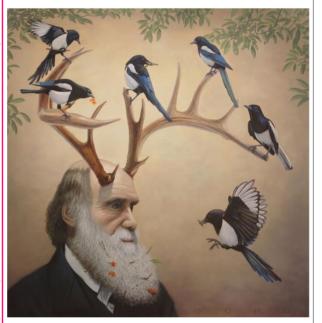
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Women And The Cultural Practice Of Anti-Birth Control Pills In The Islamic Community In Surabaya

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Abstract

This study focuses on the cultural practice that is against the use of birth control pills by poor families in the central of Surabaya's metropolis city within the classical Islamic culture and its associated rules. Social relations and the "Islamic culture" is felt in this place. For example, women must wear a veil in every day, the man wear sarongs and koko shirts and reading the Holy Quran is a habitual activitiy. Men and women of Kyai descent in Sidosermo are called "Mas". Kyai is a term for men who are religious experts and who become leaders in the Islamic community. In fact, the families in this place do not use birth control pills to maintain the number of births. Reproductive health, especially for women, is not an important thing for them. The methodology used was qualitative. We conducted in-depth interviews with men and women who got married. We also found influential figures who deeply knew about the culture of that community. Using the theoretical model of social reproduction by Pierre Bordieu, social action arises because of habitus and the capital in a given arena. There is a dialectic between the actors and social systems. The study found that the practice within the culture of being anti-birth control pill takes place. The parents always pass on to their children classical Islamic values. This is strengthened in various study groups, that family life must follow Muhammad's textual teachings. The family system and social environment always try to preserve the surrounding culture. This phenomenon is real and it occurs in the central of a metropolitan city of Surabaya.

Keywords: Women; Islamic Community; Social Reproduction; Anti-Birth Control Pills

Las Mujeres Y La Práctica Cultural De Las Píldoras Anticonceptivas. En La Comunidad Islámica En Surabaya

Resumen

Este estudio se centra en la práctica cultural que está en contra del uso de píldoras anticonceptivas por parte de familias pobres en el centro de la ciudad de la metrópoli de Surabaya dentro de la cultura islámica clásica y sus reglas asociadas. Las relaciones sociales y la "cultura islámica" se sienten en este lugar. Por ejemplo, las mujeres deben usar un velo todos los días, el hombre usa pareos y camisas koko y leer el Sagrado Corán es una actividad habitual. Los hombres y mujeres de ascendencia Kyai en Sidosermo se llaman "Mas". Kyai es un término para hombres que son expertos religiosos y que se convierten en líderes de la comunidad islámica. De hecho, las familias en este lugar no usan píldoras anticonceptivas para mantener el número de nacimientos. La salud reproductiva, especialmente para las mujeres, no es algo importante para ellas. La metodología utilizada fue cualitativa. Realizamos entrevistas en profundidad con hombres y mujeres que se casaron. También encontramos figuras influyentes que conocían profundamente la cultura de esa comunidad. Utilizando el modelo teórico de reproducción social de Pierre Bordieu, la acción social surge debido al habitus y la capital en un ámbito determinado. Existe una dialéctica entre los actores y los sistemas sociales. El estudio encontró que se lleva a cabo la práctica dentro de la cultura de ser una píldora anticonceptiva. Los padres siempre transmiten a sus hijos valores islámicos clásicos. Esto se fortalece en varios grupos de estudio, que la vida familiar debe seguir las enseñanzas textuales de Mahoma. El sistema familiar y el entorno social siempre intentan preservar la cultura circundante. Este fenómeno es real y ocurre en el centro de una ciudad metropolitana de Surabaya.

Palabras llave: mujeres; Comunidad islámica; Reproducción social; Pastillas anticonceptivas

1 INTRODUCTION

This study focuses on the cultural practice of anti-birth control pills among poor families in the central of Surabaya's metropolitan city within the classical Islamic culture and rules. Social relations and the "pesantren culture"

is felt in this place. Women must wear a veil every day, a man must wear sarongs and koko shirts and reading the Holy Quran is a habitual activity. In fact, the families in this place don't use birth control pills to maintain the number of their births. Reproductive health, especially for women, is not an important thing for them. The women do not use contraceptives usually because of fear, one of which is taking pills which if they forget they can get pregnant (FITRIANI, 2016). Efforts have been made by the government to control the actual population growth through family planning programs. This program has been running since 1970. Family planning programs are implemented to fulfil the family's reproductive rights so then the families can set the time, number and the distance of births of the children ideally in accordance with the parent's wishes and without the element of coercion from any party (BKKBN, 2013).

The family planning program based on the quantity control profile of the population of East Java has achieved success. The success of the family planning program has been marked by a decline in the Population Growth Rate (LPP), a decrease in the Total Fertility Rate (TFR), and an increase in the Contraceptive Prevalence Rate (CPR) (BKKBN, 2013). The number of active family planning users has continued to increase by 33.7 million from the target of 28 million, which means that the number of active poor family planning participants has increased by 14.3 million (BKKBN, 2013).

An interesting phenomenon is that the use of family planning does not apply in the Sidosermo area of Surabaya. The community is famous for the anti-birth control pill culture so the government program does not run there. The consequences obtained are that the rate of population growth in this region is very high. One family can have up to seven children, and even more. The problem that is often experienced especially by women is a lack of awareness regarding their reproductive health. They ignore the government programs and local health teams involved in maintaining their reproductive health. They are not used to conducting routine checks at hospitals or being around other medical personnel. Reproductive health care is carried out as little as possible. The most common effect is that women in this region often experience unhealthy pregnancies and childbirth processes. This is evidenced by the births of babies who are lacking in nutrition and health. Mothers also often experience prolonged pain during labour. This culture has been passed down from generation to generation. Women

are very susceptible to receiving diseases surrounding their reproductive organs. Maternal health problems in Indonesia, especially when to do with pregnancy and childbirth, are not a major issue for men (WIBOWO, 1993).

The study of women and reproductive health has been widely discussed by previous researchers. They focus on family planning and contraception. Another previous study only examined the use of family planning and population control (HARTANTO, 2015). There has been no discussion of the cultural practices that are against the use of birth control pills. Some studies on the women's health and family planning issues focused on women as family planning users (HERAWATI, 2015). There were no studies, so far, that have focused on the cultural aspects of being anti-birth control pill, especially when this social reality is in a metropolitan city of Indonesia.

The ongoing practice of anti-birth control pills always makes women subordinate. This is because reproductive health is not a major concern. Women are not required to perform labour properly, or to undergo routine health checks and postnatal care. tHe conditions are even more difficult when men do not pay attention to the problem because they are busy with their own affairs as kyai. The patterns of understanding that make men always the main focus are very strongly held so the problem of maintaining women's health is not the responsibility of men. The issue of gender is redirected to the formulation and interpretation of the traditional laws produced by the previous interpreters. This has experienced a kind of shift because it is influenced by the socio-cultural context, subjectivity, economic interests, and the political elements of certain parties (FAQIH, 1997).

The methodology used was qualitative. We conducted in-depth interviews with men and women who were married. We also found influential figures who know deeply about the culture of that particular community. Using the theoretical basis of social reproduction (PIERRE BORDIEU, 1977 & 1993), social action arises because of habitus and the various capital that fight in a societal arena. There is a dialectic between the actors and the surrounding social systems. Parents always emphasise that their children should follow the teachings of Islam and the example of the prophet Muhammad. The family system and social environment is focused on always trying to preserve their culture.

2. RESEARCH METHOD

This study applied a qualitative research aim with the intention to dismantle the meaning of reality in which qualitative research methods produce far more in-depth research than quantitative (NEUMAN, 2013). To answer the question of how the anti-birth control pill process works, the subjects of this study and the informants were married women and men who lived in the Islamic poor community, namely Sidosermo in the city of Surabaya. The religious informal leaders, kyai and nyai, were also informants in this study since they become central figures in maintaining tradition. Kyai is a term for men who are religious experts and who go on to become leaders in an Islamic community. Nyai is the same as a kyai, only for women. There were a total of 14 informants as the subjects in this study. Since this region is very Islamic and patriarchal, the researcher had to wait to be accepted by the local leaders. We knew one of the young local leaders who became our key informant. They were willing to provide important and significant information, especially on who could be interviewed. In fact, he was willing to go around to the homes of the intended informants.

3. RESULTS AND DISCUSSION

The study found that family is the main medium for preserving the cultural practice of being against the use of birth control pills. Social groups such as majelistaklim are a form of cultural reinforcements. Majelistaklim are religious study groups within the Islamic community and they are usually run informally. The Holy Qur'an becomes a source of legitimacy to maintain this reality. The pattern of community development through non-formal education is very strong. Through this analysis, the theory of social reproduction is very compatible with this issue. This study tried to open up the process of running the culture, by looking at the habitus owned by the residents and the various capital possessed by the community. The anti-birth control pill culture thus becomes very strong.

Table 1. Profile of informants at the research location

| No | Name | Age | Formal Education | Work | Marital Status | Number of biological children |
|----|---------|-----|-----------------------------------|---|-------------------|-------------------------------------|
| 1 | Mrs. N | 47 | MTs (Junior High School) | Housewife | Married | 7 |
| 2 | Mrs. H | 40 | MTs (Junior High School) | Wet cake maker | Married | 5 |
| 3 | Mrs. R | 45 | MI (Elementary School) | Fried food seller | Married | 5 |
| 4 | Mrs. F | 50 | MAN (Senior High School) | The head of the women's boarding school (pesantren putri) | Married | 6 |
| 5 | Mrs. Ai | 53 | SMA | Housewife | Married | 4 |
| 6 | Mrs. Am | 45 | MTs (Junior High School) | Housewife | Married | 6 |
| 7 | Mr. R | 50 | MAN (Senior High School) | Ustadz | Married | 7 |
| 8 | Mr. K | 72 | Pondok | The head of the men's boarding school (pesantren assalafiyah) | Married | 9 |
| 9 | Mr. A | 43 | MAN & Pondok | The head of the boarding school (pesantren at tauhid) | Married | 4 |
| 10 | Mr. C | 35 | SMA (Senior High School) | Ustadz | Married | 4 |
| 11 | Mrs U | 37 | MAN | Housewife | Married | 4 |
| 12 | Mrs H | 45 | MAN | Housewife | Married | 3 |
| 13 | Mr. B | 49 | MTs (Junior High School) | Head of RT | Married | 5 |
| 14 | Mr. S | 52 | MTs (Junior High School) | Head of RW | Married | 6 |

Looking at the data, it is clear that all of the informants are married with a minimum age of 35 years old and a maximum age of 72 years old. If we look at the number of biological children that they have, it is clearly that

they have 4 children and there are even 9 children like those owned by Mr K.

The study found that people in this region are very dependent on the giving of zakat by the rich for their daily survival. There are no fathers or men who work permanently in a company or government office. They work odd jobs and rely on lecture and recitation invitations. This results in a very minimal economic income. From the poor, the desire to apply Islamic teachings is very strong in this region. Indeed, the pattern of Islamic teachings applied is far from rational teachings and it tends to be textual. In fact, they are from the poor and have a lack of education, resulting in the flow of information not being criticised. The people in this poor community have accepted this as a cultural necessity. This fact is in accordance with another previous study which showed the relationship between the family income and the economic situation of the population. This will affect the progress of the family planning program. This has to do with the population's ability to buy contraceptives (HANDAYANI et al., 2012). Therefore, the economic factor is one of the reasons behind the success of the family planning programme. In addition, there was a previous study conducted by WAHAB (2014) stating that families with a sufficient income are better able to easily accept, follow, use, and make contraception a necessity, whereas low-income families consider contraception as not being a necessity.

3.1 The Family and the Running of Cultural Practices related to Anti-Birth Control Pills

This study reveals that the majority of families in the Sidosermo region are poor. Therefore they will have difficulty buying contraceptives such as birth control pills. As told by Mrs. N:

Apart from the Islamic rules which do not allow them to end pregnancy, there is also the middle to lower economic category. Sometimes for the main needs of eating and drinking, it is always difficult and they rely on zakat. To buy contraceptives, it is clearly difficult (Mrs.N)

Although there are many from poor families, in fact there are still informants who are categorised as being financially capable. They do not use birth control pills because they believe that all of them are against their

religious orders. As told by Mr. A (the head of the boarding school (pesantren at tauhid):

We should fully apply the teachings of Islam ... and maintain it at any time ... including in my family and my students, ... All of them are always taught to follow the procedures of the Koran ... must not hold pregnancy in any way let alone use birth control pills ... Clearly they do not fit the example of the prophet Muhammad ... (Mr. A)

Therefore, it is clear that the religious understanding factor is the strongest foundation for being anti-birth control pills in stance. When they are given the choice to leave the teachings of their religion, the Sidosermo residents will refuse. Seeing this is alarming because the education received by the community residents is relatively low. None of them went to college. In fact, most are only MTs graduates (at the junior high level) and they prioritise pondok salaf education. Mrs. H said the following:

I graduated from MTs and used to be one with a cottage ... I am from an Islamic family ... and women are not required to go to high school ... other than minimal costs ... The important thing is that religious studies are the main grip (Mrs. H)

In this way, it is clear that formal education is lacking in the community area. They prioritise salafi boarding school education. For the people of the community, religion is the main goal to defeat any other interests. Although they are living in poverty, not leaving the teachings of their religion behind is nobler

Regarding the age of the informants, it turns out that when they got married, they were often in the early marriage category. This is because when they were 18 years old, they were married off by their parents. As explained by Mrs. N:

I was married at the age of 18 and up until now, I have 7 biological children ... My parents set me up with one of the kyai's children ... I cannot fight because this is the order of my parents (Mrs. N)

This way, it is clear where the pattern of matchmaking becomes one of the steps in the community to marry off their children. Children, especially

women, do not have the free space to determine their own match. As a result, they are often not quite ready to get married and they are not ready to have financial and spiritual sufficiency. For families in the community, human fortune is already set up so then we don't need to worry. The proof is that community has a long tradition of no one working in a company or government office, but the family can still survive, eat and go to school even though it is not to a high level. This is one of the strong reasons why this is a unique community in the middle of a metropolitan city that is still strong when it comes to adopting ancestral traditions. They are very close to the cultural heritage of their ancestors, who they consider to be very Islamic.

Seeing the reality on the ground in poor and very Islamic regions, coupled with a low education culture, individuals will be seen as irrational if they do not become accustomed to accepting ther situation. When new discourses emerge that contradict the everyday culture of community, there will be rejection. This character is easy to find in those who have a low education as in the community region focused on in this study. Nobody went to college and they relied on a salafi-based pesantren education pattern. The nuances of the community are very visible in the form of textual Islam aka rejecting everything that has not been done by the Prophet Muhammad.

The reason why the informants refused birth control pills is more due to the factor of there being a very strong patriarchal culture. Based on the interpretation of religion, women are placed in a less equal position. The previous research conducted by KIRANI HERAWATI (2015) explained the relationship of patriarchal culture with understanding family planning and contraceptive participation. It was explained that women are the parties who must take birth control pills and use contraceptives. Men are not obligated to do so. The research provides a real picture where women are always affected by this system. In Sidosermo, the current system does not install family planning for either men or women. The process of women's health care has not become the main discourse in Sidosermo. Men do not have any focus here and all of the responsibility is on the women to take care of their reproductive health. This is an action that looks unfair.

Previous studies on cultural practices have also been conducted by IPA, PRASETYO, KASNODIHARDJO (2015). They focused on the cultural practices of pregnancy care and childbirth among the Bedouins. In the

process, it is almost the same as there are figures and values that are held, sticking to traditional systems and rejecting modern medicine. Only in Sidosermo did the reverse process occur. They initially refused the family planning process to preserve the traditions and social values of their area. The anti-birth control pill and contraception culture has been running as long as this region has been established. They hold this culture strong because of the textual doctrine of Islam. This community, up until this moment, has entered the eighth generation.

This region is famous for textual Islamic culture and it is very patriarchal. The strong argument made is for them to follow the behaviour of the prophet Muhammad. Actions that have never been done by the prophet will not be done. This has a very textual basis for community construction, as it also shows a pattern of life that is also less healthy. This is especially related to the problem of maintaining reproductive health, especially for women. For a long time, women have been prohibited from taking birth control pills and men should not use contraception during sexual activities. The impact seen is the position of women being vulnerable to various reproductive diseases, especially during pregnancy and childbirth. Their health is not taken care of. Nor are routine visits of the doctor done, so the women often get diseases. Textual Islamic habitus that prohibits the use of family planning makes women prone to reproductive diseases, most often related to giving birth. This is because the usual handling is not professional and it is carried out independently. Control being relinquished to the doctor is also minimal. This makes them often encounter difficulty in labour. Ms. N stated the following:

Here I am used to being anti-birth control pill, so there are many children. Because I often give birth, I have experienced pain several times in the female area. Because checking into the doctor isn't routine, the economic conditions are mediocre. I am sure that of all this is for God. Because women are made by nature for giving birth and this should not be inhibited by birth control pills. (Mrs N)

With this condition, it has become a habit in this region for generations that women often give birth. This is until the treatment becomes difficult because they are from poor families. The existing cultural process is passed through the generations through social media in the form of taklim assemblies and daily family life. The delivery process is not like what has hap-

pened in the Baduy tribe (MARA et al, 2015) and the Bugis tribe (HESTY et al, 2013) who still use the power of the shaman to help the women. In this place, the Sidosermo residents still come to the nearest puskesmas or midwife. The frequency of maintaining postpartum health is not routine. Mrs.H stated that:

During the delivery process, we came to the nearest midwife ... Only after giving birth, as we did not have the cost for routine medical treatment ... For health checks, there was no time due to economic limitations ... so we did it ourselves at home (Mrs.H)

To perpetuate the tradition of anti-birth control pills, majelis taklim is on a large scale. Majelis Taklim, who is very active in this region, has made the process of fostering Islamic thoughts even stronger. Majelis taklim is done by managing the kyai and nyai. Their position is as a central figure in perpetuating the tradition of anti-birth control pills. They have pesantren and taklim assemblies that try to foster the community from an early age in order for the people to get used to living the Islamic way. Religious capital is owned by them. The taklim assembly is divided into two main parts, namely men and women. From an early age, the study group in the community has been sex-segregated. Not only are the sexes separated, but several groups are created according to age. Some of the groups are as follows:

a. Jamiatul Rohim

This group contains fathers who are married. There are routine activities every Tuesday night. They have a fixed agenda of recitation, lectures, yas-intahlil and deepening the interpretation of the Quran and Hadith.

- b. Fatayatdan Musimat (together with PKK)
- This group contains married mothers. Because the focus is on women, the activities are combined with PKK. Every Thursday, routine activities are held together.
- c. ORISSA (Organisasi Remaja Islam Sidosermo Dalam Surabaya)
- d. Khotmil Quran

This group is for young women. They are set apart and separated from the men. This is because women, especially children and adolescents, will be highly guarded in this area.

The groups operate in community and hold routine activities once a week.

Some even do so twice a week. The activities carried out are neatly arranged both in their organisational system and in the coordination of events. There are monthly meetings at the beginning of the month and every three months as an evaluation of the activities is carried out. In the process of these activities, they are a medium for the transfer of Islamic culture, especially concerning contraceptive law. They are given the early knowledge that it is haram for Muslims to consume birth control pills and the like. Haram is a statutory provision in Islam for what is not permissible. It is contrary to the behaviour of the Prophet Muhammad. In every lecture related to marriage and child ownership, each group emphasises holding to strong values and Islamic law. They are not allowed to go their own way such as by inhibiting the birth of a baby.

It follows BORDIEU dialectic (1993) which states that education is one of the main strategies in the process of cross-generation cultural inheritance. In the Sidosermo region, there are majlistaklims making the process of inheriting the anti-birth control culture easier and quicker. Therefore it is not surprising that the 8th generation is still strong.

3.2 Kyai-Nyai as the main actors perpetuating the culture of Anti-Birth Control Pills

Mr K is one of the senior kyai in the community and they very closely hold to the concept of Salafi Islam. He had been educated since he was a child in an Islamic environment and he completed his education at an Islamic boarding school. Until now, he has been the leader of the As Salafiyah Islamic boarding school in community. Due to textual Islamic thought, he is thinks that it is forbidden for the family to consume family planning medicines. According to him, if it inhibits the process of descent, then this means inhibiting the regeneration of Islam. In the past, the Prophet Muhammad never set an example for consuming or using contraceptives. He said the following:

We as a people of the Prophet Muhammad should imitate everything he does. Including when creating a new generation ... We cannot inhibit the birth of our children ... because by inhibiting the generation of Islam will also be a little (Mr K)

The reason given by Mr K, who is a senior kyai in the community, shows

that the textual understanding of Islam is very pronounced. This makes the application pattern look very textual. Not only men give the view that contraception is forbidden; even women also agree with these ideas. This is like what was said by Mrs. N, a housewife with seven biological children. Following her narrative:

Many children are actually a source of sustenance and we preserve the Islamic traditions brought by the Prophet Muhammad long ago ... If the Prophet's people leave such traditions, then obviously the next generation of Islam will be increasingly reduced ... (Mrs. N)

This person is poorly educated, just to the level of elementary school. Too many live in homes with many children in poverty. All of the information from the study is related to halal haram (may or may not to do), the former of which is something that is always held to without giving a critical opinion. This is even with women who are leaders of the women's boarding school in communities like Mrs. F. She very openly refused the use of birth control pills and contraceptives because they were never taught by the Prophet and Islam. With this mindset, it is very clear that the main keyword is due to the use of contraceptives not being exemplified by the Prophet Muhammad. When it inhibits the birth of a baby, it will thus inhibit the number of Islamic cadres. Therefore, the idea of contraception is very much shunned in the community region. No wonder then that the number of children owned is so large.

The social capital possessed by the characters in the anti-birth control pill culture is very strong, starting from the social capital in the form of a broad network connected to every household. Cultural capital is in the form of good Islamic ability and the symbolic capital that the kyai is the successor of the prophets. They occupy the main strata. When there is a taklim assembly, it has always emphasised textual Islam and the community people have accepted this. Every mother and father in this area is part of a social group commanded by a kyai and nyai. As stated by BURNS D (2000), traditional leaders have several roles in terms of building community life including harmonising the rules regarding regulating, managing and maintaining security and establishing rules according to their respective territories.

Kyai foster male groups while the nyai foster groups of mothers. Activities

run regularly every week and they are grouped by age. Young mothers are under fatayat and old mothers are under Muslimat. The two groups are very intensive in terms of fostering the worship of mothers. It should be noted that the fatayat and Muslim groups in this region are different from the fatayat and Muslimat in other regions. This is because full autonomy is given to the Muslimat fatayat in the community. They can design their own lecture material and set up activities according to the local community. This is especially related to the process of preserving the culture of anti-birth control pills that is always echoed during the recitation process. Every month they are always reminded to hold fast to the culture of their ancestors who are deeply rooted in the community.

The recitation group has always been stressed to get used to living according to the community's rules. This is because maintaining the culture of our ancestors here is one of the blessings in service. This culture cannot be changed or rejected by all children and their grandchildren (Mrs K)

Mrs. K is one of the senior clerics in the community. He always reminds every young generation to maintain their ancestral culture. This is a rewarding practice. In the social group managed by the kyai, they hold regular events once a week. Men make up one group and women are in another group. They are separated from the beginning. The study model was carried out in a one-way form with textual Islamic material. Discussions about family life are important topics that are always emphasised every month. This includes the problem of maintaining the tradition of anti-birth control pills and contraception. This is a reflection of the Islamic values and this must be maintained. However, there are some who refuse, especially educated young people. That said, they still cannot fight tradition. Besides being given social sanctions, those who refuse will also be excluded from daily life. It is therefore not surprising that the community is famous for its textual and interesting Islamic culture. Meanwhile, government programs to maintain reproductive health through family planning programs have been unsuccessful.

I am actually one of the people who reject the anti-birth control pill culture. It's just that due to my position as a junior in the community, I can't change the existing social order. Because it's hard to tell them. Because it has become a doctrine if maintaining the tradition of community is an obligation (Mrs. U)

Mrs. U is an educated young woman and she does not fully agree with the idea of being anti-birth control pills. According to her, it is very difficult to change the paradigm that has been running for hundreds of years in this region. Moreover, the community's social capital is seen from the existing kyai and nyai. They strongly believe in the value of textual Islam as being the best values. Plus there is the network includes all of the families in the community area. Therefore it is visible in each family that there are many children. As for the severity, women's reproductive health is less noticed.

Although there are those who oppose it, it will be very difficult to put up a fight. This is because the cultural system in the community is so well established with a set of rules and sanctions for dealing with violators. When she refuses, the residents are ostracised and they are invited to leave the village or to look for another place.

Aside from the fact that the traditional system is firmly rooted in society, the position of the kyai and sangi is very central and heeded. The residents consider their main source of knowledge in this life as being the kyai and sangi, and not from books or public school. When joining the kyai and sangi, life is there that directs the individual the farthest from the wrong path. This is like the statement from the congregation recitation of the gentlemen by Mr C, which is as follows:

Kyai and nyai are the main sources of knowledge ... They lead us on the right path ... Knowledge in public schools will be inferior to the knowledge of the kyai ... especially the senior kyai in the community. They have very high knowledge ... so we are obliged to follow them (Mrs C)

With the mothers in the community, they prioritised the kyai and nyai and trusted and followed them. It is clear that the position of the kyai and nyai is very strategic in the process of daily social life, including in the process of maintaining Islamic traditions. This includes anti-birth control pill culture. When we want to make a cultural change, for example, the main figure of the kyai and nyai is as an agent of change. Even the food leftovers that are not finished by the kyai, if eaten by ordinary people, will obtain a great blessing.

So in that way, the kyai, as a symbol of society and a symbol of religion, has a major position in terms of maintaining the Islamic construction of

being against birth control pills. They are very instrumental in the process of preserving the anti-birth control pill culture because in each Islamic group carrying out the activities, the kyai and sangi are the main lecturers. If the group is male, then the kyai becomes the source of knowledge and a source of lectures, while for the women's group, the nyai is a lecturer in every activity and they become the main source of knowledge for the mothers and young women in the community.

4. CONCLUSIONS

The strong tradition of being anti-birth control pills is due to the established process of cultural inheritance by each social group, especially that of the families and taklim assembly groups. Both of them become the main media reproducing the idea of anti-birth control pills. The variety of capital that is owned makes the tradition lasting up until this moment. Kyai and Nyai are the main bastions of cultural defence from the attacks of modernism. This is strengthened in each family as a daily form of media so then the process of cultural inheritance is very easily accepted across the generations. Bordieu's theory of social practice, which sees education as an effective medium in the process of cultural inheritance seen in the social process, promotes the tradition of anti-birth control pills in the community. Bordieu said in his thesis that education is a powerful strategy in terms of inheriting existing cultures and social structures. The majelistaklim and the family in the community showed that they was one form of education that informally educated individuals in the community. The improvements that need to be emphasised in the community seek to significantly change the community's habitus. Once again, the source of the problem that appears is caused by the perspective on Islam that is still primarily textual. The actions that are raised actually further aggravate social conditions. Women are always the ones who are dominated and they accept the stigma of being the target of the problem, especially concerning the issue of women's reproductive health.

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