Knowledge Construction on Traditional Massage Healer in Sipirok, Tapanuli Selatan District

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ABSTRACT
This paper examines the health culture system of a community with a focus on the knowledge-construction process in traditional medicinal practices, called massage healers. The villagers still choose traditional practices as the main or alternative treatment in dealing with their illness with various explanations. This explanation is also related to the side effects of chemicals and the relatively high cost of modern medical treatment. The primary methods for collecting data were qualitative, including participant observation, in-depth interviews with key informants, and four months of fieldwork (February and May to July 2022). A holistic analysis is carried out on all field data to unravel the knowledge construction on the research subject. The findings of this study showed that the knowledge construction process within traditional massage healers persists throughout their clinical experience and is related to cosmology, and accumulates over time and from one patient to the next. The method of acquiring knowledge also varies; through stories from other people in the village or pharmacists, experiences in treating patients, dreams, and whispers from ancestors, villagers, relatives, and other healers. Experience and information from all sources of knowledge provide feedback on the enrichment of existing knowledge, techniques, and better healing strategies for patients.

Keyword: Knowledge Construction; Massage Healer; Sipirok, Tapanuli Selatan


ABSTRAK

Kata Kunci: Konstruksi Pengetahuan; Penyembuh Pesan; Sipirok, Tapanuli Selatan
1. Introduction

The idea for this article was based on observations from early February 2022 which showed that traditional healing practices in the form of massage therapy were still found in South Tapanuli District, Sipirok Sub-District, especially in Paran Julu Village. There are four traditional healers in the village. This paper refers to the four traditional healers as massage healers. From an emic point of view, villagers differentiate massage healers into two different categories; namely massage and finger tap on the patient's body. Massage is practiced by placing the hands on the patient's body with a slow pace of stroking movements. Healers who use massage techniques are Mr. Rudi, Mrs. Nuri, and Mrs. Mira. Meanwhile, Mr. Andi did the finger tapping. He simultaneously tapped his finger on the patient's body using the tips of the fingers; index, middle, and third fingers. The location, strength, or softness of the massage and finger tapping are adjusted to the results of the healer's diagnosis. Traditional massage healers in Paran Julu claim that the traditional practice of massage healers has existed in the village since the 1940s. It can be said that historically, this practice has been part of the tradition of the health system in the village for generations. All informants' names are pseudonyms. This is intended to maintain their good name and respect the trust they have given during this research process.

The villagers chose this traditional method for primary healing as well as an alternative treatment option. Preliminary research shows that people still use traditional medicine because they are worried about the side effects of modern medicines and modern medical costs. Thus, the choice of traditional massage therapy is not only because it has been part of the healing tradition for 82 years ago (since 1940).

One of the writings related to the survival of the medical tradition was conveyed by Yitno, that the survival of traditional medicine continues to this day and is inseparable from the existence of cosmological concepts that influence people's perspectives on people's behavior to avoid illness and efforts to obtain healing (in Rostiyati 2010). Wardani (2021) also stated that people's trust in traditional medicine was relatively high, amounting to 85.8% using a quantitative approach and only mentioning the factors of knowledge and experience as one of the reasons for its existence. The interesting context of this study in Sipirok (Paran Julu Village) shows that there is another indicator that needs to be added, namely the existence of knowledge regarding considerations regarding the effects of modern medicine and the economic side which is one of the reasons for the continuation of this traditional medical practice. Aini et.al (2021) has written from their study of the Sasak tribe in East Lombok, that the practice of rituals at sacred tombs is part of the intention to get healing and one of the reasons is because the results of modern medical treatment have not provided optimal results according to patient expectations. However, Aini et.al (2021) did not direct their writing to the knowledge construction of healers.

The focus of this study is to explain the knowledge-construction process of massage healers in the health system of a village community. This focus is also based on the results of preliminary studies on the etiological processes of the disease carried out by traditional healers. The etiological process reveals that the exchange of question and answer between the healer and the patient reveals that there is a series of information gathering by the healers from the patient regarding the symptoms of illness and the method of treatment that the patient has taken before they choose to seek treatment on him/her (the traditional healer).

Several researchers have previously conducted studies on traditional medicine. These researchers generally concentrate solely on the mechanism of knowledge acquisition. Sinaga et al. (2021) wrote about traditional healers’ knowledge of diseases and how to make traditional medicines in Medan City. The article describes a mechanism for acquiring knowledge through experiments that combines knowledge handed down from generation to generation with knowledge acquired from books on medicinal plants to create medicinal ingredients. Another study is Kasniyah's research project (2009). Kasniyah discusses the mechanism for acquiring knowledge of shamans (*dukun priyai*) and Jawi Islamic healers in the city of Yogyakarta and highlights that the acquisition of knowledge is through lineage and performing *tirakat*; fasting on certain days, disciplined ascetic practices, and meditation. Other studies discuss the process of transmitting shamanic expertise in traditional healing. According to Jannah and Zurinani (2017), transmission is also based on genealogy and is related to religious aspects and myths, and religious practices as a means of healing. Thus according to Syuhudi et.al (2013) in their ethnography of shamans in Makassar City, the ability to heal is not only passed down from generation to generation, but also the healer experiences several significant events in his life cycle, such as being serious ill to the point of suspended animation, and having magical dreams. The various studies of these studies have so far not described the processes and variations of knowledge construction on the research topics.

Several studies have stated that an understanding of the cultural, social, and economic factors that shape the context of traditional healthcare practices is critical to scrutinize in order to properly explain the practice’s persistence and even provide an improvement in its services (Mullany et.al 2005). The discussion conducted by Pham et.al (2020) confirms that traditional healing practices play a role in improving health through trust,
social support, soul satisfaction, and symbolic narratives from community members. The ethnographic findings of Pham et al. (2020) show that traditional healers have a big role in the process so that patients can accept their situation through dialogue using what he calls "cultural models of distress". Several authors in the article agree that culture plays a role in a region’s survival of traditional medicine, and the contextual aspect is an important factor in the analysis. These health practices are deeply rooted in the culture of the supporting community. Pham et al. (2020) also argued that the orientation of the concept of cosmic balance in terms of cosmological knowledge—both patient and healer knowledge—is an important material for explaining the etiological process as well as an explanation of health and illness conditions (see also Sembiring 2002).

By focusing on the knowledge construction process, this study uses Spradley’s (1980) cultural framework, which states that culture is a system of knowledge acquired by humans through a learning process, and used to interpret the world around them and generate behavior. By borrowing a concept from Ward Goodenough, Kalangie (in Zamzami 2013) applies it in his study by saying that shaman treatment has become part of society's cognitive system which consists of knowledge, beliefs, ideas, and values that are in the minds of individual members of society (see Zamzami 2013).

This study explores how the process of an individual receiving and transforming information to form an understanding as a kind of knowledge (Cahyati 2020). According to Ardiyanti (2020), knowledge is actively constructed by subjects and cognitive functions in order to adapt to and make sense of experience, rather than to ascertain the ontological nature of reality. Piaget (in Ardiyanti 2020) said that learning is a process that includes creating one’s understanding of everything through experience.

Studies on the construction of knowledge also suggest paying close attention to the language used by healers. Collins and Gentner (in Winarto 2014) argue that language is rich in metaphors and analogies. According to Kuhn (in Winarto 2014), metaphor has always been essential in creating a bridge between scientific language and the real world. Then Collins and Gentner (in Winarto 2014) argue that analogy is a powerful way to comprehend how something works in a new domain. This concept was chosen in an effort to understand the concept of health and illness from traditional healers in Paran Julu Village.

In a community medical system, the concept of health and illness is absolutely essential. Foster and Anderson (2018) divide the medical system into two broad categories, namely illness theory systems and health care systems. According to Foster and Anderson (2018), the health theory system includes beliefs about healthy characteristics, causes of illness, medication, and other healing techniques used by doctors. System theory of illness about causality, explanations given by residents regarding the loss of healthy conditions, explanations regarding taboo violations, explanations regarding the ‘stealing’ of people's souls, related to disturbances in the balance between hot and cold elements in the body or failure of the immune defense of human organs against other agents, pathogenic agents such as germs and viruses. Foster and Anderson (2018) emphasized that, from an anthropological point of view, health and illness are conditions that are both biological and cultural aspects.

This study considers what is meant by knowledge transfer when explaining the focus of this research. The transfer of knowledge is important to observe because it is related to how the subject constructs knowledge. Studies on knowledge transfer suggest that field activities should consider and investigate the relationship between the owner of the source of knowledge and the recipient of the knowledge (Rizki et al. 2022; Kusuma 2015). Knowledge transfer according to Rizki et al. (2022), tends to occur in the immediate environment—such as the family—and the process is through communication between parents and children. Kusuma (2015) also mentions that knowledge transfer can occur planned and unplanned. Planned knowledge transfer will occur in a systematic manner, whereas unplanned knowledge transfer will take place naturally, either through daily observations of what is happening in their environment or through other means. Gallois et al. (2018) expressed a similar viewpoint, claiming that in small-scale societies, knowledge is mostly acquired from an early age through observation, imitation, and other forms of social learning embedded in everyday experiences. The operational framework of the concepts mentioned above served as a guideline in conducting this study in Paran Julu Village.

2. Research Method

This study employs qualitative methods to create an ethnography of traditional healers. Researchers were able to create immersion with the study subject. The process became convenient because the researchers understood the local language. Understanding local metaphors and vocabulary are helpful in the process of the taxonomy of field data (see Spradley 1980). Folk taxonomy, according to Aborri (2017), is the community’s traditional classification. According to Escalada & Heong (in Aborri 2017) states that the basis of folk taxonomy is generally based on cultural systems, local community observations, and social functions.
Primary data was gathered through a process of observation participation and in-depth interviews. The key informants were the massage healers at the study site, which included up to four people, several patients, and several villagers who were familiar with the history of the village and traditional healing practices, and local cosmology. Field notes are used to organize field data and determine field findings’ coding and themes (see Brewer 2000). This research process lasted four months, starting with preliminary research in February 2022, and concluding with full research activities from May 2022 to July 2022. Secondary data were collected from the village chief's office, the library, and literature.

Data analysis was carried out on going during the research. The process was carried out by thoroughly reviewing the finding of the field notes, which included both the form of interview transcripts and jotting notes, as well as the participant-observation results.

3. Result and Discussion

The findings of this field study indicate that the knowledge construction process is inextricably linked to the historical side of massage healers' initial source of knowledge acquisition. The next construction mechanism is related to how the healer interprets experiences and what is happening in the world around him and the results of his interactions with various individuals in his community. The healer's interactions and experiences become a source of information that will help them bring up new knowledge to use in their healing practice.

Discussion of field findings and discussions will be organized into sub-topics: (a) the origins of traditional massage healers acquiring the ability to cure disease, (b) the concept of illness and health according to traditional healers in Paran Julu Village, and (c) sources of knowledge and mechanisms knowledge construction of traditional massage healers.

Origin of Being a Massage Healer

The results of this study found three forms of their history of acquiring abilities as healers, namely: (1) acquiring abilities from generation to generation, (2) a combination of generations, and learning from others. (3) based on a unique self-birth process.

Two of the four healers in Paranjulu Village have had their healing abilities passed down from generation to generation. Mr. Andi got his healing skills through his grandfather (his mother's father). Mr. Andi's grandfather was someone who had mysticism. Local people call it 'ilmu suluk'. With another meaning, "ilmu suluk" is referred to as knowledge relating to efforts to get closer to God. Then, Mr. Mira got her skills through her grandfather (her father's father). Mrs. Mira's grandfather was a healer (massage healer and traditional midwife). Local people call it 'datu'. The two healers had their skills passed down through generations.

The healer who gets his skills from generations and learns from other healers is Mr. Rudi. He got the origin of his skills from his father and he learned to deepen his knowledge specifically from his fellow nomads, named Mr. Tarjo. Mr. Tarjo is a massage healer too.

Another healer is Mrs. Nuri. He said that his skill in curing diseases was based on his special position when he was born. Locals call it a 'lahir sungsang' (breech presentation; a birth in which the baby turns around in the womb and comes out head last instead of head first. This category is also referred to as a gift from an extraordinary power, or as he calls it expertise that comes from God (according to his religion, Islam). Babies born with breech presentation are considered special children, having special abilities that are different from other children born in a normal position. Mrs. Nuri did not have parents with a traditional healing background nor did she learn from others. The special expertise that Mrs. Nuri obtained because of her birth position is similar to that stated by Sembingir (2002) in her writing about teachers to the Karo people. Sembingir (2002) mentions that there is a general opinion and also includes healers who say that; if by birth a person is not special, or if he lacks certain physical characteristics, he cannot become a healer of any kind.

According to public belief in Paran Julu, someone born with breech presentation can have the expertise of a massage healer. Mrs. Mira—a traditional massage healer and midwife—also said that a baby born naturally through a breech presentation, the baby will later have massage skills. That expertise will not exist if the breech presentation is deliberately arranged or manipulated by a midwife. The massage skill will also be lost from someone if the natural breech percentage has been corrected by the midwife so that the baby can be born normally. The breech presentation is considered special, not normal, and considered a special sign or gift from God.
The Concept of Illness and Health According to the Traditional Massage Healer

In explaining the concept of sickness and health, traditional massage healers in Paran Julu Village use the concept of balance in the human body. According to the beliefs of the people in the village, the human body consists of three parts, namely *tondi* (soul), *mudar* (blood), and *pamatang* (body). This concept is following the statement of Torsch and Ma (in Arji et al. 2018), that in traditional medicine, the human body is considered a holistic entity. Imbalance on the outside and inside of the body is considered a disorder. This concept of balance was also discovered by Sembiring (2002) among the Karo people (in Karo District, Province of Sumatera Utara), where a ritual will be performed if there is an imbalance between body and soul (*tondi*), soul and feelings, as well as breast and mind. One’s self as a small universe (micro-cosmos), and that situation will cause various losses such as *bangger* (illness), *mara* (disaster), and *kematen* (death).

Following the findings of Sembiring (2000) above, the healers at Paran Julu also perform the treatment to re-balance the small universe (micro-cosmos) that exists in the patient’s body. This is in line with the views of Foster and Anderson (2018) as well as Eisenberg et.al (in Winkelman 2008), namely that the theory of disease or the causes of disease greatly influence the decisions and actions taken by actors to cure patients.

The concept of health for Mr. Rudi is that a person’s face is bright. Brightness can be seen from the lips that are red and not pale. In terms of physical condition, a healthy person has a well-built body and his movements are not tilted and limp, he can sleep soundly. According to Mr. Rudi, sleep is an indicator of health and illness.

Pak Rudi uses two metaphors for illness and health, namely flowers and houses. He analogizes the balance of the body with a flower. If the roots of the plant are in good condition, the flowers that appear will bloom and be beautiful. In the case of patients with stroke, he said it happened because there was no communication between the nerves and the brain, and blood was not connected to the brain. This condition results in the brain not being able to regulate the body and there is a balance disorder in the body. He analogizes the nervous situation to the condition in a household; if there is no communication among family members in one house, all individuals do as they please, then the situation in the house will be chaotic.

Mr. Andi gave a different explanation regarding the concepts of health and illness. He conceives that a sick condition can be seen in a person’s body, precisely in the movement and behavior of a person; whether the person can get out of bed, is just sleeping, or is still able to walk. From Pak Andi’s statement, it appears that the illness is divided into two parts, namely ‘severe’ illness and ‘mild’ illness. A ‘severe’ condition is when a person is unable to get out of bed and cannot walk. While the ‘mild’ category is a condition in which a person feels pain in one part of the body, he is still able to carry out his daily routine work.

A similar concept to Mr. Andi was also conveyed by the female massage healer at Paran Julu, namely Ms. Mira. She means that a person is unhealthy judging from his behavior. An unhealthy body will affect the heart or soul (spirit) to behave lazily to get out of bed. Laziness is caused by a person feeling his body aches and pains. The concept of illness and health from Ms. Mira has something in common with Mr. Andi’s concept, namely the elements of body movement.

Of the four traditional massage healer answers, there are differences and similarities in the concepts of health and illness. The difference lies in Pak Rudi. According to Mr. Rudi, a person who is sick will be restless and not sleep well. However, according to the answers of Mr. Andi, Mrs. Mira, and Mrs. Nuri, people who are sick just want to sleep. The four healers had the same thing, looking at the condition of the patient’s movement abilities, although they differed regarding the patient’s sleep problems, difficulty sleeping, and just wanting to sleep.

Knowledge Construction Process and Knowledge Sources: Field Finding Cases

The source of knowledge from traditional massage healers in Paran Julu Village comes from four things, namely; (1) knowledge from other people’s stories, (2) experience with previous patients, (3) dreams and whispers of deceased ancestors, (4) knowledge from other healers. All of these sources become material for the construction of new knowledge or the enrichment of previous knowledge. Innovations can also occur as a result of knowledge construction. The following description is the source of knowledge and the mechanism of the knowledge construction process obtained from the cases found in this research field.

a. Knowledge from other people’s stories

The healers who get the source of knowledge from others people’s stories are Mrs. Nuri and Mr. Rudi. The “others” are; pharmacists at one of the pharmacies in Sipirok Market, neighbors, relatives, and villagers who met at the tavern. Interaction with ‘others’ occurs when talking at several locations visited by healers, as well as when meeting with villagers, and is not done specifically to seek or acquire new knowledge. This is as stated by Kusuma (2015) who states that the acquisition of unplanned knowledge proceeds in a flowing
manner. In this case, healers use their sensory experience to 'steal' knowledge from residents (or other individuals). Senses experience according to John Hospers (in Rusmini 2014) is a source of knowledge.

In Mr. Rudi's case, an important event when he received various sources of information was when he talked with villagers in a coffee shop. He said that a friend of his was discussing herbal medicine while they were sitting in a coffee shop. His friend said that herbal is a medicine that can be used to cure Covid-19 and he also discussed the benefits of shallots (Allium cepa L. var. aggregatum) and garlic (Allium sativum) as medicine. Mr. Rudi already knows the benefits of shallots and garlic as medicine. He said, shallots or garlic if mixed with cooking oil as a massage oil will be more effective in expelling wind in the body. This is because both types of onions produce a feeling of warmth in the body. The warm process will remove the wind from the patient's body. The results of the discussion stimulated Pak Rudi's existing knowledge and enriched his expertise in massage oil.

Mr. Rudi also said that he often advises his patients to drink a decoction of the cat's whiskers plant (Orthosiphon aristatus). According to Pak Rudi, a cat's whiskers plant has many benefits, such as stabilizing blood pressure and removing cysts. This knowledge was obtained by his relative. Some time ago, Mr. Rudi's relative came to him for treatment and asked for his cat's whiskers plant while explaining the benefits of the plant as a kidney medicine. Information from his relative enriched Mr. Rudi's knowledge of the benefits of these herbs; not only does the drug stabilize blood pressure and remove cysts, but it also treats kidney problems.

Mr. Rudi's case shows that knowledge enrichment is formed from external factors and enriches the subject's existing knowledge. Mr. Rudi already knows the properties of onion and garlic plants and cat's whiskers. Then after hearing stories about the other properties of onions and the cat's whiskers plant from other sources, he became even more convinced that onions were efficacious for the human body.

In Mrs. Nuri's case, she obtained a new source of knowledge from talking to pharmacists at the pharmacy and neighbors in her village. According to her, talking with neighbors while sitting relaxed provides the benefit of a new source of knowledge regarding the efficacy of several types of massage oil. New information about the types of massage oil was obtained when he bought something at the pharmacy at Sipirok market. The pharmacist recommended, “Gandapura Oil” to relieve body aches or cold symptoms (in the local language called 'masuk angin'). She tried the new oil on her body and felt its benefits, feeling warm faster than the 'wind oil' he used to use. Ibu Nuri then tried the oil on her patients. The patient response also varies; some say it feels good and comfortable on the body, then some others prefer it because it is hotter in the body so it is considered to heal faster. Another incident when she got new knowledge was when she was sitting and talking with some of the neighbors (the women) on the terrace of her house. Some of the women complained about their illness, then other women responded and suggested certain plants (without mentioning the names of the plants) to be consumed as medicine.

In that case, Mrs. Nuri enriched her existing knowledge regarding the efficacy of massage oil to expel wind from the body. Information from the pharmacist convinced her that the massage oil she has been using can be replaced with a type of oil that has a hotter/warmer effect, especially if the patient needs that kind of oil during the healing process. From the patient's response, Mrs. Nuri builds her knowledge about the various properties of different types of oil. She was even more convinced that the cold symptoms in the body would go out faster because the heat generated by the Gandapura oil was much stronger. The cold symptoms came out, and the patient recovered. The balance of the body is disturbed because there is colder in the body. Mrs. Case Nuri has also described an element of experience in treating patients as a source of knowledge construction and also a trial-and-error mechanism on herself when he first received information about Gandapura oil. The following explanation more fully describes this based on the cases of other massage healers, Mr. Rudi and Mr. Andi.

b. Knowledge derived during the process of treating patients

In the process of healing illness, Mr. Andi and Mr. Rudi can differentiate between diseases caused by spirits and diseases caused by imbalances in the body due to physical conditions. The difference can be seen in the patient's condition. Therefore, the treatment of the disease given will also be different. They get that knowledge based on experience treating their patients.

The explanation of the two traditional massage healers has also been revealed by Foster and Anderson (2018), that the etiology of the disease is divided into two parts, namely; personalistic and naturalistic. Personalistic illness occurs due to the intervention of an active agents such as supernatural beings (supernatural beings or gods), non-human beings (such as ghosts, ancestral spirits, or evil spirits), or human beings (sorcerers). Then, naturalistic illness is related to systemic terms that are not personal. Naturalistic systems are seen based on the balance in the body. Health occurs because the elements that remain in the body, such as heat, cold, body fluids, and yin-yang, are in a state of balance according to the age and condition of the
individual in their natural environment and social environment. If the balance is disturbed, the result is illness (Foster and Anderson (2018).

Mr. Andi explained the personalistic element. According to him, the patient's gaze and the burning feeling he feels after touching the patient are important indicators that the source of the patient's pain is caused by a ghost/spirit. Another healer, Mr. Rudi also said that the gaze, eye color, and behavior of the patient were the main criteria for causing personalistic illness. They named the disease with these criteria as possession or trance—a condition in which the body is possessed by a supernatural spirit—and requires special treatment. They gained an understanding of these characteristics in dealing with several patients who did not recover only with ordinary care.

Local people of Paran Julu Village believe that humans can use the power of spirits or ghosts to harm others. This type of disease is called 'transmitted illness', and sufferers are referred to in the local language as 'tarpangan'. The symptoms experienced by patients are: pain in the chest and the nails on the fingers (and sometimes the toes) will turn white. Regarding the change in finger color, Pak Andi only mentioned that the patient's fingernails would turn white. Meanwhile, according to Mr. Rudi, based on the results of observations on some of his patients, he was able to look into more detail and said: "The patient's whitened fingernails look like the hands of a dead person, the whites are like white pus, the color is not pure white."

The cases of the two traditional healers show that they already have personalistic knowledge about types of disease and have treated several patients before. The presence of new patients, and the dialogue process regarding the source and what patients feel with different symptoms provide a new understanding of enrichment or accuracy in analyzing the source of pain and being able to choose the right treatment method. The ability of the two healers to observe the characteristics and symptoms in detail from one patient to another allows them to distinguish the source of the illness; is it caused by spirits (personalistic) or caused by an imbalance in the body (naturalistic).

Mrs. Case Nuri heals his sprained patient as a source of information that gives her knowledge that the difference between 'hot' and 'cold' can be a reference for the source of pain and that becomes one of the references for determining the healing process. Mrs. Nuri admits that he cannot cure patients with the element of personalistic illnesses directly. In the case of healing a patient with a sprained leg from a fall, she feels that she has healed the faulty tendon back to its normal position. However, she felt strange holding it in the early stages of healing; she touched and felt the feet were 'cold'. As far as she knew, a sprained leg would feel hot when touched because of swelling of the veins in the leg. After Mrs. Nuri stabbed the patient's leg, the tendons had returned to normal but the patient still felt pain and the feet were still 'cold'. Based on his belief, the cold feeling in the dislocated location can be caused by the role of spirits. She will ask the patient's family whether the place where the patient fell has been doused with water. If not, she will ask for water to be poured into the scene of the incident while mentioning the name of the patient at that location. The ritual will reunite the spirit (soul) of the patient who is 'captured' by 'other forces' in that place. After the ritual was performed, the patient's condition began to improve.

Another experience of Mrs. Nuri was when she felt that she was healing patients by properly fixing the position of the veins (blood vessels). She has massaged the patient 3 times and according to his knowledge, the condition of the veins is normal, not wavy. With that condition, the patient should have recovered. However, in reality, complaints of pain still exist. In this case, Mrs. Nuri suspects that the illness has something to do with the power of supernatural beings. She also asked the patient to perform a ritual of pouring water on the accident site which caused the patient to get ill. This method has helped previous patients. The treatment method tends to be done by Mrs. Nuri in patients who are dislocated due to falls/accidents. The case of Mrs. Nuri shows that knowledge construction develops from time to time and from one patient to another. Experience of the senses during massage and interpretation of the development of pain complaints teaches him that the disease/illness has something to do with supernatural powers (personalistic elements). The beliefs that exist in her village about the magic-religious world have become part of Mrs. Nuri's knowledge-construction process.

In the case of Mrs. Mira, she got new knowledge about the benefits of the parasite plant (Loranthus) which is called 'sarindan' in the local language. The plant is a parasite that grows on coffee plants. She had heard about the benefits of this plant from others but had never put it into practice. Once when her younger sibling had a backache, she did a massage from the waist to the soles of the feet and asked her siblings to drink ginger and honey. She also suggested drinking the boiled water of sarindan. She remembered hearing that information before. It turned out that after drinking the sarindan, the younger sibling admitted that his back pain subsided more quickly. Since that day, Mrs. Mira started recommending sarindan to patients who had back pain. In the writings of Sintayehu et.al (2020), this type of knowledge about medicinal plants is referred to as ethno-medicinal plants which develop in various communities to treat various illnesses.
Mr. Mira's case shows that the information that has been received does not become instantaneous knowledge, but it is stored in memory and reactivated when there is stimulation of a new situation related to a certain disease. This case shows that the knowledge construction process requires a special event to reactivate the knowledge that has been stored in the subject’s mind. His experience treating his younger sibling is evidence of information that eventually becomes new knowledge. Knowledge construction also requires empirical evidence through patient treatment.

c. Knowledge through dreams and whispers of ancestors

Dreams and whispers of ancestors are two things related to elements of magic and religion. Two healers, namely Mr. Andi and Mr. Rudi explained who had come in a dream and whispered something to them. Mr. Andi explained that he got information about his patients through whispers and dreams. He dreamed that he was visited by someone whose face could not be seen; that person came and sat in the front room of his house, right where he used to do therapy. The person in the dream tells of his illness. The next day, a patient came with the same type of illness as what was in his dream.

Mr. Andi explained that he also heard ‘whispers’ in his ear. The whisper told him that someone was sick in his village. He can know someone is sick even though the person does not come to seek treatment for him. According to Mr. Andi, the dream and the whispers came from his grandfather. Andi's grandfather was a traditional healer and he received massage healing skills from this grandfather. His grandfather had passed away and dreams were where he communicated with his grandfather. According to the belief in Paran Julu Village, if a human who is still alive dreams of meeting someone who has died, it means that person wants to tell something.

Mr. Rudi also had a dream after he finished treating a patient who was sick due to interference from personalistic elements (supernatural beings). This disease is a human "transmitted illness", in the form of a magic poison that is invisible and enters the human body. He began to treat the patient by massaging; starting from the bottom of the armpit to the back, then finally to the back of the neck while reciting holy verses according to the teachings of his religion (Islam), and begging for healing from the patient. The holy verses are recited silently, without being heard by other people or the patient. After the back of the neck has been massaged, the patient will vomit (containing water and food waste).

After treating the patient, Mr. Rudi had a dream at night. In his dream, he saw three people standing in front of him in an atmosphere like the early morning (dawn). The three men were wearing white robes and their faces were not visible, and one of them said to the others in a local language "ma ro do si Rudi, napola be da i" which means "Rudi has come, it doesn't matter anymore." The three people walked and left, shortly after the dream Mr. Rudi snapped out of his sleep. According to Mr. Rudi, his father used to say that if you dream of seeing someone whose face is invisible and wearing white clothes, it has something to do with mystical things. The next day, Mr. Rudi visited his patient, and the complaints of pain in his chest were gone, his nails were red, and the patient had recovered.

Dreams and whispers are also clues to carry out the healing process. The dreams and whispers are linked to the source of her abilities as a traditional healer. According to him, he would not dream if the source of the patient's pain was due to naturalistic elements. Based on his experience, a dream is also a sign that the patient will recover. For him, dreams are a means of communication between generations, from humans who have died to those who are still alive.

d. Knowledge from other healers

Mr. Rudi's case is an explanation that confirms that the process of learning intensively from other healers is a means of constructing knowledge for him. His knowledge grows daily because he has a mentor, Mr. Tarjo. Tarjo is another traditional healer, a friend of his when he was overseas. He learned through observation and practice that it is not justified to do massage on parts of the body where patients complain of pain, or on parts of the body that experience swelling. Mr. Tarjo taught him to trace the roots of pain. It was a piece of new knowledge for him. He combined this knowledge with other knowledge he had previously, especially in the management of patients who are very sensitive to pain.

Mr. Rudi also received knowledge and wooden tools for massage from a relative who is also a healer. He also got this process through direct observation and practice under the guidance of his relative (Mr. Rudi did not mention the name of the relative). The wood is about 15cm long, 3cm in diameter at the base and it tapers in diameter—a bit blunt like a pencil—at the end. The narrow end of the wood is adapted to its use, namely to reach the tendons/muscles that are difficult to massage when using your hands. The small piece of wood is still used by Mr. Rudi to massage his patients to this day.
In the case of Mr. Andi, he will contact other healers if he has handled massage 3 times without showing improvement in the patient's complaints. He would refer his patients to meet healers in other villages. After the patient recovered, Mr. Andi went to the other healer and asked several things, such as; what mistakes or deficiencies he did so that the patient did not recover in his treatment. The dialogue added new information to Mr. Andi. Reflection on the process he was carrying out and the new information gave rise to a knowledge of his weaknesses and ways to overcome them. He used this new knowledge when dealing with the next patient with the same pain.

4. Conclusion

The four traditional massage healers in this research case show the process of knowledge construction as a mechanism for filtering new information from the surrounding environment and adjusting it to the knowledge they already have. The feedback from that process gave birth to a new form of knowledge that can be used to carry out healing practices on patients today. New knowledge can be a modification of previous knowledge elements which are stimulated to appear by some new information. The new information comes from new events the healer is experiencing; try and error on oneself, watching other healers treat patients, other people's experiences—through discussions with patients, information from fellow healers, from pharmacists—or stories told by other people in their village about the healing process that they know.

The result of this knowledge construction creates new knowledge that the healer will adapt to the patient's disease conditions to help him become healthy. In this context, the conception of the disease system and health system becomes important for the healer to help ensure that the patient achieves a healthy state. Metaphors, beliefs, and traditions are used and reactivated by the healer to increase the patient's desire for good health. The cultural-based approach of the massage healers is an indication of the continuation of this traditional medical system in Paran Julu. The knowledge construction will continue from time to time and from one patient to another. Such a situation is confirmed by Borosky (1987) with knowledge in the making. This phenomenon is an affirmation that culture is not static, but dynamic.

References


