

Tangos Therapy: Health Behavior as the Result of Normalizing Power in Medicating Symptoms of Malaria on the Community of Sebesi Island

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Abstract: *Tangos* is a health therapy by using potion made of some types of medicinal herbs. The study aims to examine *tangos* therapy as a health behavior carried out by the community of Sebesi Island to heal malaria symptoms. This study also purposes to interpret the type of power which results health behavior of *tangos*. This study is an important contribution regarding malaria in Indonesia. Also, cross-cultural study on malaria is important to carry out to document the response of the population to malaria symptoms, as a measure of disease control. Data collection was done through participation observation, interview, and literature study. To explain health behavior, data were analyzed by using types of health categories, while the analysis of types of power was employed to see whose power which results normalizing power. The results show that *tangos* is a form of health behavior categorized as response to disease and preventive, protective, and safety behavior. It is discovered that normalizing power is carried out by the community. This normality is reproduced and legitimized through *tangos* therapy. The people's knowledge about this therapy can be viewed as a control instrument contributing to individual's choice in treating symptoms of malaria.

1 INTRODUCTION

In Foucault's view (1980), power is closely related to knowledge, there is no knowledge without power, and vice versa there is no power without knowledge. In terms of the relationship between power and knowledge, (Foucault, 2003) for example, sees medical science as developing a set of criteria to describe what is called normal, healthy, and abnormal in an individual. The use of this specialized medical terminology strengthens the position of health professionals to be at the top. In this study, the form of power as a result of knowledge is seen in the use of *tangos* by the people of Sebesi Island to heal symptoms of malaria.

Sebesi residents still experience malaria symptoms. When facing them, the people prefer to cure it through self-medication, which is *tangos*. *Tangos* is a form of traditional medicine originating from the original culture of Lampung and has become

the health behavior chosen by the Sebesi community for symptoms of malaria.

Sebesi Island is located in Lampung Bay and is an administrative area of Tejang Village Sebesi Island, Rajabasa Subdistrict, South Lampung Regency. According to (Jedrusik, 2011), the characteristics of the community of an island also can be viewed from the dominating activities namely relating to water (fishery, inter-island trade, tourism). Fragility is also a characteristic of people living in an island (Lewis, 2009). The remoteness, smallness, and its isolated characteristic are those which are the most noticeable of an island. This remoteness is also owned by Sebesi dues to its natural condition. With this characteristic, the people of this island have developed the mechanism to survive and adapt to the threats, one of which is disease, with traditional knowledge. It acts as a crucial role and they rely on this knowledge, particularly to decrease the risk of disaster and diseases.

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Malaria is a life-threatening disease caused by parasites transmitted to human through mosquito bite, the infected female *Anopheles*. In 2019, there were approximately 229 million malaria case in the world. The estimation of death rate reached 409,000 in 2019 (World Health Organization, 2021). Malaria can attack people in all ages. The period between 2020-2024 is important and it determines the efforts in reaching *Indonesia Bebas Malaria Tahun 2030* (Indonesia is Free of Malaria in 2030) (Bureau of Communication and Community Service, 2020). There are about 4 percent or 23 districts / cities and around 1.1 percent or 2.9 million Indonesians who are still living in areas with high potential for malaria infection (Pranita, 2020).

Malaria is a disease of particular concern in Rencana Pembangunan Jangka Menengah Nasional (RPJMN) during 2020-2024, as well as heart disease, stroke, hypertension, diabetes, cancer, tuberculosis, malaria, HIV/AIDS, emerging diseases, the diseases with potential to cause extraordinary events, neglected tropical diseases (leprosy, filariasis, schistosomiasis), mental disorders, injuries, vision problems, and dental and oral diseases.

Indonesia becomes a home for more than twenty malaria anopheline vectors which transmit the four species. In Lampung, especially South Lampung Regency, in 2020, there were seventeen cases caused by malaria (Statistic Indonesia, 2021).

One of the islands in South Lampung is Sebesi Island. It is the largest island in this regency (4643 acres), included in Rajabasa Subdistrict. Although according to a report from the Puskesmas (Health Service) UPT Rajabasa Subdistrict that malaria cases have decreased, in fact it still occurs. Moreover, malaria is a threatening disease, especially for people living in coastal areas.

Several studies related to malaria have been carried out. An overview of ethnobotany studies of the types of plants used to treat malaria by (Willcox et al., 2004). The book explains the types of medicinal plants to prevent, treat, and control malaria. Research on malaria in Indonesia was conducted by (Elyazar et al., 2011). In this study, malaria and its control in Indonesia were studied, both by the community and by malaria experts in the colonial Dutch East Indies until after 1998 (the period after the fall of Soeharto). Other research on traditional malaria treatment in Indonesia has been conducted by (Suswardany et al., 2017). It was revealed that most people with malaria symptoms in Indonesia used traditional medicine as part of the treatment and used free antimalarial drugs.

Taek et al. (2018) conducted research on traditional medicine in areas of high malaria endemic

in Indonesia, namely in West Timor. The Timor region has long been attacked by various dangerous diseases such as malaria and cholera. A total of 96 plant species from 41 families were documented as medicinal plants for the treatment of malaria by the indigenous people of Belu and Malacca Districts. Based on this research, knowledge about traditional medicine still persists among elderly people, on the contrary, it is getting lost among youths. In Pesawaran Regency, Lampung, research on malaria was carried out by (Ritawaty & Supranelfy, 2018). It was explained that the habit of going out at night was related to the incidence of malaria and also discussed community resistance to malaria drugs; the distribution of *Anopheles* spp., mosquitoes, in Pesawaran Regency; the community has the behavior toward malaria such as the habit of going out of the house at night, installing gauze, the density of the walls of the house, the use of mosquito repellents, and wearing body coverings.

From studies related to traditional treatment for malaria that have been carried out, traditional treatment for symptoms of malaria has never been seen as a health behavior. In addition, the form of power in health behavior to treat symptoms of malaria has not been studied. For this reason, this study aims to analyze tangos as a health behavior and investigate the power of health behavior by the community on Sebesi Island for symptoms of malaria. Also, this study is another important contribution regarding malaria in Indonesia, in the form of ethnographical research.

2 METHODS (AND MATERIALS)

This research is a part of a dissertation research that took place on Sebesi Island. The initial survey of this island was carried out on 2nd-4th August 2019. The ethnographic fieldwork method began on 12th October-18th October 2020 then continued from 11th April until 30th May 2021. The purpose of this study was to analyze the form of power in the use of tangos by the Sebesi community to treat symptoms of malaria. This form of power is seen from the perspective of the theory of power by Michel Foucault. Furthermore, the analysis of health behavior will be seen through Gochman's concept of health behavior.

Data collection techniques were carried out by unstructured interviews, field observations, and literature studies. Informants are one of the important elements in a study, namely data sources that are able to answer the formulation of the problem. Therefore,

the researchers chose informants using the purposive method, namely village officials, traditional healers, health workers, community leaders, and the general public.

To get information about village profile and its history, interviews conducted with Mr. Miftahuddin (Kepala Desa), Mr. Firdaus (Sekdes), Mr. Andi (Kaur Pemerintahan), and Mr. Rojali (former Sekdes), Mr. Busri and Mr. Muchtar (both are the community leaders). To answer the perception of disease and malaria for the Sebesi community, interviews were conducted with traditional healers, community leader, and midwife. Some of these traditional healers are considered to be 'orang pintar' on Sebesi Island, namely Mr. Muchtar (as well as community leader), Mrs. Sati, Mr. Fuad, and Mr. Saleh to obtain information about traditional medicine on Sebesi Island.

In addition, an interview was also conducted with the midwife Mrs. Elis Sari to answer questions about the malaria case. Interviews were also done with Mr. Budi at Dinas Kesehatan Provinsi Lampung; Mr. Budi Riyanto and Mr. Minak Wardan at the UPT Puskesmas Rajabasa Subdistrict who administered malaria treatment directly on Sebesi Island to obtain information about malaria cases that occurred there. Interviews were also carried out with several people who had experienced malaria, namely Mr. Agus and Mr. Akhyar.

To find out and experience *tangos* at the same time, we asked Mrs. Rohani for help, who often did *tangos* if one of her family members gets sick. Interviews were also conducted with Mr. Sahrul, Mr. Hayun, and Mr. Andi as representatives of residents who often do *tangos*. Another method used in this research was literature study. The literature used is those related to traditional medicine in Lampung, people's perceptions of malaria, the community's response to malaria, and the types of herbs used to cure malaria.

3 RESULTS AND DISCUSSION

3.1 Overview of Sebesi Island

Tejang Village Sebesi Island is located in Lampung Bay and is part of the administrative area of Raja Basa Subdistrict, South Lampung Regency. Sebesi Island Tejang Village consists of four *dusun* (hamlets), namely Dusun Bangunan, Inpres, Regahan Lada, and Segenom. Most of the population lives from gardening, the rest work as fishermen, civil servants,

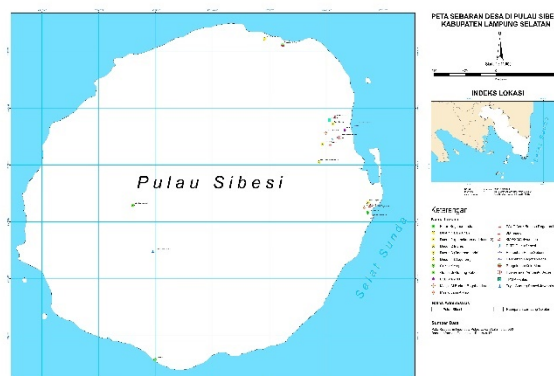


Figure 1: Sebesi island. Source: Research Center for Biology-LIPI documentation and reprocessed by Geospatial Information Agency.

and honorary teachers. The land area is used for plantation/agriculture, namely 61.47%; around 0.38% of the area is used for rainfed rice fields. The forest area is around 35.42% on the slopes of Mount Sebesi, with an altitude of 535 – 845 meters above sea level. Settlements occupy an area of 2.69%. Sebesi was damaged by an eruption in 1883, but not as large as Krakatau.

The lowland vegetation, including some of the plantations, was badly affected by the ash rains and the tsunami in 1883 (Thornton et al., 2002).



Figure 2: Mount Sebesi seen from a soccer field in Tejang Village Sebesi Island.

As discovered in the 15th century Banten had begun to establish cooperative relationships and expand its economic activities to the Lampung area. Sebesi Island by the Sultanate of Banten was established with its owner, called Prince Cecobain (*coba-coba*). The title of prince is given by the Sultanate of Banten as a reward for giving pepper

products. After Prince Cecobain died, the ownership of Sebesi Island was under Prince Singabrata.

On 23rd August 1624, the VOC decided to occupy Sebesi Island and build a house there. However, due to chaos and disease, the island was abandoned in 1625 (Historical and Cultural Center, 1997). It was once a rest area for British ships docked before entering Banten, precisely in the 17th century. At that time, there was legal and illegal trade between the kingdom and the sultanate. Sebesi Island also became one of the islands where Danish and British ships rode. The island had facilities for finding inns, lodging, where people could unload goods, and also had fresh water facilities, and all of them took place consistently (Ali, 2021)

After Prince Singabrata died from the eruption of Krakatau, Sebesi and Sebuku Islands fell to his nephew, Prince Minak Putra. Then, he was overwhelmed because he also owned a large island, but with a lack of financial capacity, where finally it was sold to Haji Djamaludin (who at that time both served as village head, Prince Minak Putra was the head of the Rajabasa village, while H. Djamaluddin is the head of Kalianda village) in 1896 (Hasanuddin, 2021).

Sebesi Island was forest (and inhabited) before 1883 (Hasanuddin, 2021). After being affected by the Krakatau eruption, Sebesi was increasingly developed for agriculture, forestry, and urbanization (Thornton et al., 2002). With further opening and planting, coconut plantations have expanded to the highlands, where coffee is also grown. During H. Djamaluddin's tenure, people outside the island were prohibited from entering, except for the excerpts from H. Djamaluddin who were brought from Banjarmasin and Banten. After he died, the management of Sebesi Island was under Saleh Ali (son of H. Djamaluddin) where the management began to change, allowing outsiders to plant using a profit-sharing system (1938).

The wave of people coming to Sebesi Island can be said to have gone through several stages. According to Mr. Busri (a community leader in Dusun Segenom), Mr. Busri's grandfather, H. Abdullah, started to enter Sebesi Island around the 1920s to plant coconuts and oversee the northern area of Sebesi. The owner of Sebesi brought workers to the island in 1920s for the temporary settle. This is in line with the story of Mr. Rojali (one of the officers at the Tejang Village office), Mr. Rojali's grandfather, Tubagus Nawawi, who started clearing land on Sebesi Island in 1932. The entry of people to Sebesi Island is suspected for two reasons, namely being taken as temporary coconut pickers and people who asked for land using a profit-sharing system. Since

then, population development there has started to flourish.

The composition of the population is dominated by Banten, (Serang Java, Sundanese Java), Lampung on Kalianda coast, Bugis (one or two people), Batak, Padang. The Javanese culture of Serang (Banten) and Lampung are the cultures used on the island. The latest data for 2021 shows Sebesi Island is inhabited by 2,795 people, 787 families.

Most jobs are plantation farmers, fishermen as much as 150 families, 6 people of state servants (PNS), teachers, midwives, honorary teachers. Most of the people also have additional businesses, namely stalls, traveling trades, and goods collectors. In 2019 in Sebesi, electricity has been on for 24 hours. The educational facilities in Tejang Village are Early Childhood Education (PAUD), Elementary School (SD), Junior High School (SMP), and Senior High School (SMA). PAUD is located in three *dusun*, namely Inpres, Regahan Lada, and Bangunan, while the Elementary School is located in two *dusun*, namely Dusun Inpres and Dusun Segenom. The facilities for worshipping in Tejang Village have three mosques and four prayer rooms, as well as sports facilities, there are three soccer fields, three volleyball fields, and one badminton court.

In terms of health facilities, there is a Puskesmas Pembantu/Pustu (supporting health service) which has been established since 1997 and two midwives. This pustu serves nearly 3,000 people from Sebesi Island, most of whom handle minor illnesses. When experiencing serious illness, the community will be referred outside the island to the hospital in Kalianda, Rajabasa Subdistrict, South Lampung.

3.2 Malaria and Its Handling Program on Sebesi Island

Malaria is a disease caused by the bite of the female Anopheles mosquito, which can transmit the Plasmodium parasite. The symptoms that appear are having a body temperature of more than 38° C, chills after a fever, sweating like after exercising, especially at night. Patients with *falciparum malaria* experience fever every other day, while *vivax malaria* has a fever every 3 days. Malaria sufferers who have frequently been exposed to malaria already have immunity, so that the usual symptoms do not resurface, what appears is aches and headaches. After getting these symptoms, the patient is required to undergo laboratory tests to determine whether there is *plasmodium* in the red blood cells.

The government is targeting by 2024 as many as 405 agencies/cities to achieve elimination of malaria.

In this case, in Lampung, there are 11 malaria-free areas, 3 low endemic areas, 1 moderate endemic area. Elimination means that 1/1000 population in one year, the four districts that have not been eliminated are South Lampung, Pesawaran, Pesisir Barat, Bandar Lampung City. For areas that are still confirmed as malaria endemic areas, the Ministry of Health has carried out a strict surveillance program, in this case through the Directorate of Prevention and Control of Vector-borne and Zoonotic Diseases under the Directorate General of Disease Prevention and Control.

Rajabasa subdistrict, where Sebesi Island is located, had a malaria explosion coinciding with the entry of the hatchery in 1994. The hatcheries came from Cilacap, Pati, and Eretan, Indramayu. They carried transmission of infection to the Rajabasa area which already has malaria endemic status (dos Reis et al., 2015) argue that fish ponds function as important and productive breeding grounds for malaria vectors. For malaria cases, in Rajabasa in 2016 there were 105 cases, in 2017 there were 89 cases, 2018 there were 35 cases, 2019 there were 18 cases, and in 2020 there were 17 cases.

In Sebesi itself, in 2007-2008 there were quite high malaria cases and in 2010-2014 there were still malaria cases on the island. It is in line with the report from Mrs. Sari, the midwife, that during nine years of carrying out duty in Sebesi (2011-2020), there were three malaria cases that she handled and being transferred to Puskesmas Rajabasa (Sari, 2021). In 2018, malaria cases no longer occurred on Sebesi Island (Riyanto, 2021) but Sebesi people still feel the symptoms of malaria. Malaria cases in Sebesi Island can be occur due to sanitation, housing, namely the absence of toilets, the indiscriminate behavior of defecating on the beach, and poor drainage.

Some of the handling programs carried out by the UPT Puskesmas Rajabasa are periodic larva monitoring, socialization of the use of mosquito repellent lotions every night, and the provision of free mosquito nets, encouraging the breeding of fish that like to eat all mosquito larvae, making visits to villages in Rajabasa Subdistrict. Village malaria posts (Posmaldes) were also opened to handle malaria cases more quickly. This Posmaldes was opened in endemic villages in Rajabasa Subdistrict, South Lampung Regency.

3.3 Perceptions of Malaria for the People of Sebesi Island

The Sebesi people are dominated by the Javanese culture of Serang (*Jaseng*) and Lampung. The *Jaseng*

culture considers illness to be mystical and medical causes. They think that serious and frightening illness is a disease caused by witchcraft, because they do not know what to face, which results in a thin body, while minor illnesses are headaches and chills. The people of Lampung divide diseases into two categories, namely serious illness (*bahaban*) and mild illness (common illness) or *makhing*. Severe and minor illness can be caused by germs and witchcraft, this type of disease can be contagious and not contagious. The difference is that serious illness is generally dangerous, while minor illness is generally not dangerous. There are dangerous diseases that can be treated by yourself and others, namely 'orang pintar'. In the understanding of Lampung people, infectious diseases are common, non-communicable, harmless, and can be treated on their own (Sirat et al., 1990).

Malaria is deemed as a mild disease commonly experienced by the Sebesi community. It is also often called 'tolaut' or 'hantu laut', where a sudden feeling of dizziness, malaria that comes from the sea consists of cold 'hantu laut' and hot 'hantu laut'. Another perception about malaria states that there are two types of malaria, which can be seen from the symptoms. The first type is having high fever, other types have symptoms of chills, and if it is very severe it will trigger vomiting. The next perception is that malaria has almost the same symptoms as typhus. The symptoms that appear are heartburn, unwellness, high fever, bitter mouth, and headaches. These attacks can occur suddenly, usually due to wrong eating or drinking. Another perception states that apart from chills, malaria also has symptoms of yellow eyes and a yellow body.

The old endemic disease itself gave rise to empirical experiences from the Sebesi people themselves, especially with very limited health facilities, of course, with traditional methods used, the people believe that to treat symptoms of malaria is by using traditional medicine with herbs that have a bitter taste. Based on their knowledge, malaria is a disease caused by mosquito bites. For this reason, people often treat with bitter tasting leaves to treat symptoms of malaria and avoid mosquito bites.

Based on these perceptions about malaria, the people of Sebesi chose *tangos* as a health behavior to treat malaria. Based on the experience that has been faced over the years, malaria is no longer considered a threatening and frightening disease. With the symptoms of malaria that are felt, namely fever, headache, the people of Sebesi do *tangos* therapy. This therapy is carried out on the basis of the knowledge of the Sebesi community that has been owned and learned.

3.4 Tangos Therapy

In Sebesi Island, *Jaseng* and Lampung cultures influence each other, especially in terms of traditional medication. In the Lampung language, *tangos* means 'bergarang', to evaporate the body. The majority of people in Dusun Segenom are Lampung people, who regularly practice tangos. It is a form of native medicine from Lampung which has been used in Sebesi Island until now. It consists of 3 types, namely medicinal *tangos*, marriage *tangos*, and *rukayah tangos*. For treatment, tangos (*iting bayu*) is a therapy for removing 'keringat basi' by using boiled water from a type of medicinal plant leaves. It is called 'basi' because the sweat does not taste salty. In addition, tangos is also useful for neutralizing the body.

For wedding *tangos*, the ingredients used are cempedak flower (*Artocarpus integer* (Thunb.) Merr.) pandanus flower (*Pandanus* sp.), then they are boiled. The method is the same as the treatment *tangos*, where the difference is the leaves and the mats used. The mats should preferably be those made of pandan leaves because they smell good and absorb in the pores. After it is done, scrub the body with turmeric. Wedding tangos are conducted so that the make-up on the bride's face does not fade with sweat.

For *rukayah tangos*, the types of leaves used are those attached to wood, coconut leaves (*Cocos nucifera* L.), cananga leaves (*Cananga odorata* (Lam.) Hook.f. & Thomson), *paku tanduk rusa*, *seleser*, *mahar* stalks, *tali arus* (seaweed), its use is the same as the other tangos, accompanied by verses of *rukayah* and white incense. This is to treat people who are 'possessed', to drive away spirits.

The knowledge about *tangos* is mostly obtained from elderly people, except for Mrs. Rohani from Dusun Segenom who deliberately studied tangos directly from the traditional healer with the aim of treating a sick family. When she lived in Kalianda, tangos therapy was also widely used. Mrs. Sati, one of the traditional healers on Sebesi Island also performs treatment with *tangos*. Similar with other traditional healers such as Mr. Fuad and Mr. Saleh who performed tangos for themselves through their children. Mr. Wardan, who had experienced 'recurrent' malaria, also carried out *tangos* as a prevention and protection against symptoms of malaria and other diseases. *Tangos* does not always use leaf ingredients. This is based on the experience of Mr. Sahrul in Dusun Regahan Lada who replaced the ingredients with a can that had been burned with kerosene.

To treat malaria, *tangos* is applied after the body feels cold, not hot. It is to treat symptoms of chills that malaria has. *Tangos* preferably use bitter leaves. The

types of core leaves used are ginger (*Zingiber officinale* Roscoe), *alang-alang* root (*Imperata cylindrica* (L.) Raeusch), lemongrass (*Cymbopogon citratus* (DC.) Stapf), *sembung* (*Blumea balsamifera* (L.) DC.), turmeric (*Curcuma longa* L.), and papaya (*Carica papaya* L.). Additional leaves that are also often included are *lagun* leaves, *dringo* (*Acorus calamus* L.), *sekala* (honje), *bangle* (*Zingiber montanum* (J.Koenig) Link ex A.Dietr.), and *kelaras* leaves (dried banana leaves) (*Musa* sp.). *Bangle* leaves are used to prevent other creatures from sticking to the leaves or the term rejecting bad luck.

The first stage of *tangos* therapy is to clean the pot that will be used, then prepare the leaves needed, each leaf is taken as needed, the leaves are then boiled.



Figure 2: The leaves to be used in tangos (from left to right) are starfruit leaves, sembung, ginger leaves, lemongrass leaves, galangal leaves, and turmeric leaves.



Figure 3: Tangos herb leaves ready to be boiled.

The method of inserting leaves is also different, some include the leaves first before water, but some are the opposite. While waiting for the water to boil, prepare other ingredients, namely a mat or tarpaulin, sarong, *dingklik* or small stool.

After being boiled, put the stew in the pot into the mat, then the person who is going to be given *tangos* also enters the mat. People who will be given *tangos* should not wear anything, only wear a sarong as a cover, so that the heat directly touches the pores. To get rid of the stale sweat earlier, the person in the chair sat while stirring the potion in front of them while praying. The duration is 15 minutes. The potion can be used twice. The feeling after that is that the body feels light and fragrant. After that, the person would fart quite often. *Tangos* should not be done too often; the recommended time is once every 3 months.



Figure 4: Mrs. Rohani was doing *tangos* to researcher.

3.5 *Tangos* as Sebesi Community Health Behavior against Symptoms of Malaria

A distinctive component of health behavior in developing countries is the importance of individual, household, and community activities associated with tropical diseases. Although not the main cause of adult mortality, tropical diseases such as malaria, yellow fever, filariasis, schistosomiasis, dengue fever, dracunculiasis (guinea worm), onchocerciasis, and trachoma are significant causes of morbidity and mortality in developing areas (Coreil, 1997). Furthermore, knowledge and perceptions of disease influence treatment-seeking behavior, which is an important component of disease control. In this study,

the factors that drive the treatment chosen by the Sebesi community to cure malaria will be explained through the theory of health behavior.

According to (Gochman, 1998) health behavior does not embrace clinical improvement or physiological recovery but it includes analysis of specific behaviors that have an impact on improvement or recovery. Behavior denotes something that people do or do not do, even if it is not always consciously or voluntarily, not something that is done to them. Gochman views that health behavior is also distributed into a population which can be determined by several factors, namely risk behaviors; responses to illness; care seeking; lifestyle; preventive, protective, and safety behaviors (Gochman, 1997a)

The health behavior of the Sebesi community to perform *tangos* is a form of response to symptoms of malaria. This response is based on their perception of malaria. According to (Foster & Anderson, 2006), each community group defines disease in different ways. Symptoms of chills are a symptom of malaria that is accepted by them. The World Health Organization (WHO) stated that malaria is a life-threatening disease, in fact the people of Sebesi Island consider malaria a very common mild disease. On the basis of this understanding, their response to malaria prevention is to treat the symptoms that appear, one of which is by doing *tangos* therapy. Before going to a midwife, the Sebesi community first performed *tangos* therapy to prevent, treat, and restore the condition of the body.

Tangos therapy is a form of health behavior in the preventive, protective, and safety category. "Preventive, protective and safety behaviour" refers to specific actions to reduce the risk of disease, condition or disease hazard (Gochman, 1997b). There are some determinants in this category, namely personal determinants, family determinants, social determinants, institutional determinants, cultural determinants, and health provider determinants. *Tangos* therapy is the result of several determinants. Based on the research conducted, the *tangos* carried out by the Sebesi community is driven by several determinants, namely family determinants, cultural determinants, and health provider determinants. According to the family determinant, the treatment of malaria symptoms using *tangos* is related to the frequent use of *tangos* by the family. In terms of cultural determinants, it can be said that the use of *tangos* is mostly done by the indigenous people of Lampung who live in Sebesi, because *tangos* is the native medicine of Lampung. *Tangos* therapy is also a form of health behavior in the preventive, protective,

and safety categories with the determinants of health provider (Gochman, 1997a). Based on this determinant, the Sebesi people choose *tangos* based on the accessibility, availability, and affordability of health services. The health facilities on Sebesi Island are two midwives who work at the Pustu who have to serve nearly 3000 Sebesi residents. Midwives are not always on the spot, because they have to fulfill the call or other administrative work that demands to leave the island. For this reason, self-medication with *tangos* therapy is also the choice of the community.

3.6 Normalizing Power in *Tangos* as against Malaria Symptoms

Foucault notes the novelty of reflection on power in terms outside the realm of power, two antitheses of the conception of power that conjunction and disjunction determine the basic rules of most modern political thought. On the one hand, the benign model of sociological power as an agent of social cohesion and normality, serves to ensure the conditions for the existence and survival of society (normalizing power). When defining the effect of power as repression, power must be identified with the law that says no to power alone, and contains the power to prohibit (Foucault, 1980).

For Foucault, it is the formation of subjectivity that is the rationale for all disciplines and techniques of punishment. The emphasis is on how people participate in their own subjectivity and then recognize themselves, assess and monitor themselves and others in an attempt to conform to society's norms. Treatment of malaria's symptoms using *tangos* therapy is produced by normalizing power carried out by the Sebesi community. In this case, normalizing power is carried out, this power is received without coercion, without being ordered. People look for alternatives and use traditional knowledge in the form of *tangos* for malaria as a reference for curing symptoms of malaria.

In Discipline and Punish (Foucault, 1977) shows that the 'power of normalization', the standard of normality, is not practiced by prisons alone, but is also established in schools, hospitals, through human science. Such normality is reproduced and legitimized through claims and practices of knowledge, for example nurses, teachers, doctors, judges, and social workers (Foucault, 1977). The subsequent development and ownership of objective knowledge and truth has resulted in the emergence of 'expert' groups such as psychiatrists, social workers, and doctors in the health care system (Cheek & Rudge, 1993).

In normalizing power or discipline, each individual is his/her own supervisor. In this research on malaria in Sebesi Island, the Sebesi people control and discipline themselves by agreeing to their claim of knowledge and medical practice, namely the knowledge to cure symptoms of malaria with *tangos* therapy. This knowledge generates power which ultimately results in normalizing power. This normality is produced and legitimized through claims and practices of *tangos* therapy that can cure symptoms of malaria. That is, when the symptoms of malaria, namely when chills come, they do *tangos*.

Furthermore, despite the normality of power, in the context of the future power relations of patients and healthcare workers, (Haug, 1988) argues that more and more people are learning to manage their chronic conditions, monitoring their health condition day by day. This manifests itself in the form of personal health care, from attention to diet and exercise to self-medication of symptoms without the attention of health workers.

4 CONCLUSIONS

Based on the results of the study, it can be seen that *tangos* is a health behavior chosen by the people of Sebesi Island. The health behavior of the Sebesi community to perform *tangos* is a form of response to symptoms of malaria. *Tangos* therapy is also a form of health behavior in the preventive, protective, and safety categories.

In this study, the relationship between power and knowledge is seen in the use of *tangos* by the people of Sebesi Island to heal symptoms of malaria. People do not choose to treat symptoms of malaria first to a doctor. That is, the people here as ordinary people in medical science are considered to have an equal role with health workers. This is very different in modern medicine, where in modern medicine the power relations formed between the two are very contrasting. Doctors with all the knowledge of the modern medical world can determine whether a patient is sick or healthy.

It can be seen that the use of *tangos* to treat malaria symptoms begins with the Sebesi community's perception of malaria. In other words, the definition of disease is determined by culture. In addition, it can be viewed from this study that knowledge is related to power, when people have knowledge about malaria symptoms treatment, namely by *tangos* therapy, this is what results in normality power. Public knowledge of *tangos* therapy can be viewed as a control tool that contributes to

individual choices in treating malaria symptoms. Although modern medicine can be said to be quite dominant on this island, in fact traditional medicine is not just marginalized. Furthermore, public knowledge about tangos therapy to cure symptoms of malaria limits the knowledge of health workers. This also leads to neglect of the health sciences owned by midwives or further examination through the laboratory.

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