THE ROLE OF IBU NYAI FOR THE DEVELOPMENT OF LOCAL COMMUNITY-BASED PUBLIC HEALTH SERVICES

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Abstract

People with mental disorders are continually increasing every year. However, they are very few who seek treatment. The causative factor is the limited mental health services. One solution is to develop services based on Islamic boarding schools or pesantren. For pesantren, mental health is part of da’wah bil-irsyad or counseling. This paper aims to describe the role and potential of ibu nyai (female scholars of pesantren) in developing local community-based public health services. The study used a qualitative method with an ethnographic-hermeneutic approach. The results show that firstly, ibu nyai had the potential as leaders for female students, many are highly educated, some have colleges and health facilities, and some have sizeable social capital.
Second, ibu nyai had a concern for health services because of her theological motivation and passion for da’wah. Third, ibu nyai has a powerful social network, which is expected to be helpful as a communication strategy for strengthening public health. Islamic boarding school-based public health has its own appeal and market share. This research is useful for developing public health science based on local wisdom.


Keywords: health services; ibu nyai; local wisdom; networking; social capital

Introduction

People who experience mental disorders every year always increase. According to the 2018 Riskesdas Survey, seven out of 1,000 households have mental disorders. However, 7% live in rural areas, and very few tried to seek treatment. The contributing factor is the limited health services.
Also, the number of mental hospitals throughout Indonesia is only 45 in big cities with a limited number of psychologists and psychiatrists (Sari et al., 2020).

This fact showed that it needs local community-based services to overcome the scarcity of mental health services. Experts offer services that integrate multicultural, multilingual, and multiregional. The study of mental disorders cannot be separated from the traditions and culture of the community; so that people's lives are happier (Novianti et al., 2020). By integrating cultural understanding, linguistic diversity, and community engagement, individuals can access the support they need to lead fulfilling and happier lives. As we continue to recognize the importance of local community-based services, we move towards a more inclusive and equitable mental health system.

Pesantren also provide mental health services to their students because Pesantren are educational institution as well as da'wah services. Mental health includes the *bil-irsyad* da'wah section or counseling (Arifin, 2021; Arifin et al., 2022). The most crucial figure in the pesantren’s life is kiai and ibu nyai. Their role is huge. Ibu nyai plays a role in enlightening their students, female guests, and the surrounding community (Amalia & Arifin, 2018; Ibrahimy & Arifin, 2019). Many ibu nyai act as representatives of pesantren caregivers in several pesantren. They act as the leaders for female students. The pesantren separates male and female students. Ibu nyai is the determinant in making several pesantren decisions concerning female students. She also holds the baton as a leader in several pesantren, specializing only in female students.

The role of religious leaders is vital to reorient culture and carry out transformations, significantly to strengthen public health. The roles of kiai and ibu nyai are not stagnant but are transforming. According to Nursyam, kiai not only act as cultural brokers, mediators, or both but can also act as community developers in a broad sense (Nursyam, 2005). By embracing their evolving roles as community developers and leveraging their influence, they can foster positive change, reduce stigma, and promote community well-being.
The success of developing the issue of community strengthening in Indonesia is due to incorporating the issue of strengthening into the local Islamic style. Therefore, efforts that continue to socialize health issues by the pesantren-based community movement are optimistic that they will succeed. According to the study results, local institutions are strategically positioned to participate in discourse and community-strengthening programs, including public health issues. The examples are pesantren, art groups, other social institutions, and social figures (Isfandari et al., 2019; Lestari & Wulansari, 2018). However, local health institutions, such as Posyandu, need to be optimized. Some poor and remote rural communities still need to entirely have good access to facilities related to basic health services. Likewise, doctors, nurses, and midwives have not been evenly distributed, even in many areas where the ratio of midwives is below the standard (Ambarita et al., 2019).

Several research results on health services have yet to focus on the participation of ibu nyai. Most of these studies are about the characteristics of health campaign messages (Basri & Darmajaya, 2016); the health communication campaign model (Wahyudin, 2016); the use of campaign media either through print media, Instagram, or YouTube (Marfa et al., 2019; Novita et al., 2020); community-based mental health service (Ruud & Friis, 2021; Youwei et al., 2020); as well as in terms of health campaign management (Pratiwi, 2019). While these studies offer valuable insights into various aspects of health campaigns, they often need to pay more attention to the unique perspectives, contributions, and potential involvement of ibu nyai in promoting and addressing community health issues. The role of ibu nyai within religious communities and their close connection with community members position them as influential figures who can contribute significantly to health promotion efforts.

This paper leads to three focus studies on the role of ibu nyai in developing local community-based health services. First is the potential of ibu nyai, who can be involved in strengthening public health services with local wisdom. Second is the concern of the ibu nyai of pesantren for public health services. Third, the ibu nyai’s social network is expected to be helpful as a communication strategy for strengthening public health.
Method

The location of this research is in Situbondo Regency, as it has hundreds of Islamic boarding schools, one of which is the Pondok Pesantren Salafiyah Syafi’iyah Sukorejo. The reason is that the Pesantren Salafiyah Syafi’iyah has a faculty of health and cares for public health. Besides that, Pesantren Sukorejo has 16,247 students and hundreds of thousands of alumni from various regions, even abroad. The population of Situbondo is 99.18% of the total 690,368 Muslims. In addition, there are 667 mosques, 4,311 prayer rooms, 410 madrasas, and 186 Islamic boarding schools. Because of this, Situbondo is known as the city of "santri (students)" and "bumi shalawat (the earth of shalawat)" (BPS, 2020; Pangkalan Data Pendidikan Pondok Pesantren (PDPP) Kemenag RI, 2020).

Strengthening community-based public health services in Situbondo Regency needs to be optimized. However, it can work together with ibu nyai because the population with monthly health complaints reaches 40.59%. Health facilities also need to be improved. Situbondo Regency has five hospitals from seventeen sub-districts; one maternity hospital; nine polyclinics; twenty health centers; fifty-one sub-health centers; thirteen pharmacies; 925 Posyandu, and 101 Ponkesdes. Meanwhile, the number of health workers is 169 doctors, 552 nurses, 330 midwives, and 51 pharmacists.

This study used a qualitative research method with an ethnographic-hermeneutic approach. The data of this study were sourced from field notes of observations and in-depth interviews during the study. This research took four months. The data collection method involves fundamental informant techniques and purposive sampling techniques. There were fifteen informants in this study. The stages of data analysis can be simplified into three streams of activities that coincide, namely data reduction, data display), and conclusion drawing.

Finding and Discussion

The Potential of Ibu Nyai Pesantren

Ibu nyai pesantren in Situbondo Regency has great potential to strengthen local community-based public health services actively. Some
potential ibu nyai, among others: First, many ibu nyai have a college education. Almost all of the ibu nyai at the Pesantren Salafiyyah Syafi’iyah became lecturers at Ibrahimy University with an educational background of magister and doctoral degrees.

Second, there is one ibu nyai whose pesantren has a Faculty of Health Sciences and health facilities. For example, Ibu Nyai Juwairiyah was once the Faculty of Health Sciences dean. She also owned the As'adiyah Clinic.

Third, some ibu nyai are active in the political arena. For example, Ms. Nyai Khoirani, the caretaker of the Miftahul Ulum Besuki pesantren, is now the Deputy Regent of Situbondo. It showed the potential of ibu nyai to transcend traditional boundaries and actively contribute to the political arena. Their involvement brings unique perspectives, experiences, and a deep connection to the community.

Fourth, the ibu nyai has significant social capital. This social capital is because the people of Situbondo are very religious and fanatical about their kiai and ibu nyai. Ibu nyai, with her potential, plays an active role in every student's decision maker. Almost every pesantren policy concerning female students and the female environment must involve and have the blessing of the ibu nyai. With all the potential of the ibu nyai, it can be used to strengthen pesantren community-based health.

Fifth, Ibu Nyai protected and maintained the health of her disciples through prayer and riyadah 'ubudiyah. The worship practice at Riyadah 'ubudiyah or Pondok Sukorejo is known as 'gerbat.' In the context of counseling, gerbat is one of the essential behavior modification techniques for Islamic boarding schools (Arifin & Munfaridah, 2018). 'Gerbat' technique decision-making because gates are used to maintain mental health. One of the wisdom of 'gerbat' is the process of healing a broken heart. Ibrahim Al-Khawwas offers his five recipes for enlightening the mind, specifically, reading the Qur'an while contemplating its meaning, emptying the stomach, praying at midnight (qiyam al-lail), praying at dawn, and making friends with pious people, praying yourself (Yasid, 2007).

Mental health is essential for Islamic boarding schools. Because the focus of Islamic boarding school counseling is on the individual and the community, not on the issue of the person seeking advice, the human
mind (personal and social) needs to be addressed, not the problem. This guidance is because we believe that if people become a khaira umma person, their problems will resolve themselves (Arifin, 2020). In addition to mental or spiritual health, Islamic boarding schools greatly emphasize physical health. According to Kiai As'ad, health is a personal duty (fardhu 'ain), similar to maintaining a healthy body. In fact, according to Kiai As'ad, the first duty of the prosecutor of knowledge is to maintain good health. Kiai As'ad also seeks knowledge of the supply of medicines and health sciences. In addition, Kiai As'ad says piety and worship require a strong and healthy body (Hasan, 2003).

With a clean soul and lots of dhikr and thinking, a person becomes calm, serene, peaceful and feels very good. The Sukorejo Islamic Boarding School considers that if the gerbat is done properly and correctly, it will affect the behavior of the person doing it. Gerbat generally has two parts—first, the birth format (shurah zhahirah), namely all acts of worship. Second, the innermost nature (haqiqah bathinah) is the essence that does not appear as sincere, humble, and khudhu' before God. Because worship, etymologically, means al-khudû' wa al-tadzallul, submission and humility. From several documents of Kiai As'ad's letters to the pesantren administrators regarding gerbat, there are several keywords: ridha, sincere, khusyu', and istiqamah so that his prayers and wishes are accepted, fulfilled, and mustajabah. Therefore, if we are righteous in worship (ritually righteous), we will automatically be righteous socially. If not, it means that in performing worship, we only practice the aspects of shurah zhahirah and do not touch the aspects of the inner truth. Thus, in worship, we lose the "soul."

An external effort by an Islamic boarding school as a mental health is to keep students' minds at peace. It corresponds to the counseling focus of Islamic boarding schools. Islamic boarding school counseling focuses on the individual and the community rather than counselor issues. The human mind (personal and social) needs to be addressed, not the problem. The ministry believes that problems can be solved naturally if people become their personal khaira ummah (Arifin, 2020; Arifin & Munfaridah, 2018)
The strengthening of public health services in Situbondo district should be scaled up because 40.59% of residents had health problems in one month. Medical facilities also need to be improved. There are 169 doctors, 552 nurses, 330 midwives, and 51 pharmacists. Most importantly, there is no mental health service in Situbondo District (BPS, 2020). Thus, the Islamic boarding school nyai women have potential in education, politics, facilities, and other social capital to develop public health.

Concern for Health Services

The concern among pesantren, especially ibu nyai, for health services is considerable. Caring is a person's ability to pay attention, serve, and help others to perform health services. However, the concern in this paper is more directed at rationalizing the religious meaning of the ibu nyai (Arifin, 2020). The reasons for the concern of pesantren to have concern for health services, among others, are, first: in the view of pesantren, maintaining health is included in the five universal principles (alkulliyāt al-khams) to realize the benefit of society.

According to K.H. Asifuddin Muhajir from the Salafiyah Syafi’iyah, all benefits should refer to these five principles, for example, health. Spiritual health refers to the principle of maintaining religion (hifzh al-dîn), mental health refers to the existence of reason and freedom of thought (hifzh al-‘aql), body or physical health refers to the principle of safety of the soul and all members of the body (hifzh al-nafs), economic health refers to property ownership (hifzh al-mâl), and social health refers to maintaining honor (hifzh al-nasl and hifzh al-‘irdh). The reasons for the five universal principles to realize these benefits have motivated ibu nyai to take care of health services (Interview, Ibu Nyai Rom, 21 October 2021).

Second, one of the obligations of an ibu nyai is to pay attention to the health of her students and provide health facilities. One of the ibu nyai, an alumnus of Pondok Salafiyah Syafi’iyah Sukorejo, quoted the opinion of K.H.R. As’ad Syamsul Arifin that one of the obligations of the kiai or nyai’s is to pay attention to the health of his students and provide health facilities (Interview with Ibu Nyai Nurul, 4 December 2021).
According to ibu nyai, health is human nature. If someone is unwell, it must be because something is damaged or not working correctly. Humans account for a substantial proportion of natural, environmental, and self-destructive injuries. It was achieving a healthy life through two patterns: prevention and treatment. Ibu nyai promotes a comprehensive approach to achieving a healthy life by emphasizing prevention and treatment. This approach recognizes the multifaceted nature of human health, encompassing physical, mental, and spiritual dimensions. It acknowledges the significance of addressing internal and external factors influencing well-being, such as environmental conditions and personal choices.

There are two patterns of prevention: “do something” and “do nothing”. Doing something means striving to be healthy, strong, and disease-resistant, eating enough, eating regularly, exercising enough, and keeping things clean. Inaction does not mean destroying the system or order God has perfected—pollution, littering, drinking, smoking, overeating, irregular eating, etc. In the meantime, the curative effort to live a healthy life consists of repairing what has been damaged—the disease when it actually spreads. It involved first aid, medication, doctor visits, etc.

Third, providing health services is part of worship because worship requires physical strength and a healthy soul. Health is one of human nature. If someone is not healthy, it must be because something is broken or not functioning. Humans have an immense contribution to natural damage, environmental damage and self-destruction. Healthy living is obtained with two patterns of prevention and treatment. That is why health services are needed.

Worship requires physical strength and a healthy soul. The ibu nyai agree that we must maintain a healthy and clean lifestyle because taqwa to Allah requires excellent health. In the view of ibu nyai, Islam is not just dealing with spiritual or physical problems but taking care of both together. There must be a balance between something physical and spiritual because mental and physical health mutually influence.
Ibu Nyai's Social Network

A pesantren's ideal ibu nyai mother figure is expected to have a solid mass base at the bottom (grassroots) and a strong network. One of Kiai As'ad’s messages to Salafiyah Syafi’iyah Sukorejo students who will stop staying is that he practices his knowledge in the prayer room around his house (Hasan, 2003). One of the meanings behind the message is for Sukorejo's students to master the center of a strong network and interaction with the community. The mosque or mushalla in the countryside is one of the communication centers and a community gathering place. The mosque or mushalla is a cultural sphere that brings together various segments of society, which can produce a distinctive culture (Nursyam, 2005).

In community strengthening, competence in communicating and building networks must be owned by someone, including public health workers. It must have a strong mass base below or within the community and, simultaneously, have a strong network to the top or other organizations. Several networks of pesantren nyai women—in the context of direct interaction with the community—are still well-maintained in Situbondo regency.

The first is the network of routine activities. This routine activity is held monthly and organized by the ibu nyai of the pesantren. For example, dhikr events, istighatsah, and regular recitations. Members of this activity across regions. The greater the influence of an ibu nyai, the more members and broader the reach. For example, Ibu nyai Uswatun Hasanah, the holder of the Nurul Qoni' Pondok Salafiyah Syafi’iyah Dormitory, has a Samawi dhikr activity every Friday or Jum’at Legi. Ibu nyai Zainiyah As'ad, initiated this activity. The members of the dhikr reach thousands of people. The place is at the Pesantren Al-As'adiyah Balikeran.

Another routine activity is the commemoration of pesantren holidays. There is also a network of routine activities for the women of the prayer room. In the mushalla network, the routine activities are organized by students, alumni, or followers of particular ibu nyai. Usually, the leader of this activity is the nyai mushalla or the nyai at the village level. They are alumni of certain pesantren or have studied the Koran to a certain ibu nyai. In some areas, the teachers of the Koran in the mushalla are not only men, but many women are involved. They teach female students. They not
only have an influence on the mushalla students but also their parents. They also lead several activities in the village. These activities include *jam'iyyah maulid diba’, yasinan*, and *sawrah* (recitation of tahlil for ancestral spirits). Its members are only limited to that area.

Second, a network of temporary activities organized by the ibu nyai. This activity usually involves hundreds to thousands of people from several regions, depending on the influence of the ibu nyai's or the pesantren she cares for. The community organizes another network of temporary activities and invites ibu nyai, for examples, *walimah* circumcision, bridal, and recitation events. Ibu nyai acts as a speaker. Most of the participants are around the place. However, if the speaker is well-known, the people attending the event can reach hundreds or thousands.

Third is the network of pesantren students. Pesantren santri network is a network of activities held by educational institutions, santri, and Pesantren alumni. This network of activities is in the form of social services carried out by students, especially during the Ramadan holiday. Ibu nyai acts as a speaker at some of these activities. Ibu nyai's involvement contributes to the holistic development of students, fostering their personal growth, leadership skills, and a deeper understanding of their role in promoting health and well-being within the pesantren.

Fourth is the traditional medicine network. So far, many kiai is trusted by the community to offer solutions to their inner problems. However, it is more than the kiai who do this. Ibu nyai is often asked for help by the community. Within the community, kiai has long been regarded as trusted figure offering solutions to various inner problems. However, it is also essential to note that ibu nyai also frequently receives requests for help from the community and plays a significant role in providing assistance.

The empowerment movement, including linking to public health services carried out by ibu nyai, is significant in influencing the socio-religious transformation of the community. At least two important reasons pesantren are centers for strengthening public health. First, the number of pesantren spread throughout the archipelago. According to data from the Ministry of Religion of the Republic of Indonesia, in 2020, the number of pesantren was 27,722 with 4,173,586 students (Pangkalan Data...
The Role of Ibu Nyai

Pendidikan Pondok Pesantren (PDPP) Kemenag RI, 2020). Second, regarding human resources, pesantren as workers are ready to be empowered as agents of community strengthening because, so far, they have volunteered to serve and fight for their community (Arifin & Zaini, 2014).

The figure of the ibu nyai is recognized as not as a public figure with a relatively high level of face-to-face with the community. The recitations and networking conducted by the nyai are public spaces that become an effective medium for conveying ideas, including strengthening local community-based public health services. Through their sphere of influence, the ibu nyai can become a significant intermediary for both parties, the ibu nyai and the community (Ibrahimy & Arifin, 2019; Machfutra et al., 2018; Nursyam, 2005; Zaini & Arifin, 2016).

Ibu nyai are known as figures who are good at bridging the interests of the people and the authorities. The role of this mediator has been described well by K.H.R. As'ad Syamsul Arifin is like a good tree, one with strong roots, branches that soar to the sky, and fruit that can be picked at any time. It means the pesantren must have roots in the lower society. As for the branches, the pesantren must have access to the top (bureaucratic elites and politicians). As a result, the existence of the pesantren is felt by all parties (Hasan, 2003).

At a certain level, the pesantren also functions as a "mouthpiece" of the community or a mediator between the interests of the community and the government. Sunan Kaligojo formulated this ideal picture. Sunan Kalijogo gave a symbol by building mosques, pavilions, and squares that always sided by side with the Javanese government from the center to the district. The mosque symbolizes the ulama, the pendopo symbolizes the ruler, and the square symbolizes the people. Its location is always side by side without any domination. Both the pesantren who empower the community and those who act as mediators for the people and rulers, their position must be neutral (Hasan, 2003). From a historical and sociological perspective, the kiai and ibu nyai who organize the people from the real steps in front of their eyes are a true picture of him as a religious figure. A nyai mother will make changes in her community. There will be interactive communication, not one-way communication. It is one of the keys to the
successful leadership of an ibu nyai (Arifin & Zaini, 2014; Ibrahimy & Arifin, 2019).

Pesantren care about health; there is a balance between physical and non-physical health. According to Kiai As'ad, health is classified as an individual obligation (fardhu 'ain) as well as maintaining body health. In fact, according to Kiai As'ad, the first task of the student of knowledge is to maintain health. Kiai As'ad also obliges the students to provide medicines and know health sciences. In addition, Kiai As'ad says piety and worship require a strong and healthy body (Hasan, 2003).

The pesantren's view of this physical and spiritual balance aligns with the Javanese view, namely that humans consist of physical elements and spirit or soul. The spirit gives power, strength, and power, while the physical stores and maintains the spirit. The interpretation of Islam in the context of Javanese culture is everything that is composed of the container (lahiriyyah) and content (batiniyyah). The purpose of the container is to preserve, hold, and limit the content, but the purpose of the content is precisely to "break down" it. Javanese mystics believe content is more important because it is the key to mystical unity. However, by accepting the cosmological and metaphysical relationship between the concept of container and content, both cannot be ignored (Zaini & Arifin, 2018). In other words, there must be harmony between the container and the contents.

The pesantren's view of this healthy lifestyle has similarities with members of the ibu nyai network, both theologically and sociologically. Several studies on communication psychology show that some aspects of psychology are decisive compared to others. Social networks in the psychological context are known as relationships, while in the social context they are known as social networks (Arifin & Baharun, 2022; Wulandari & Rahmi, 2018). Relationships in the pesantren network are not only physical networks but also spiritual ones. This spiritual relationship is the key to therapeutics among pesantren (Arifin, 2020).

The findings of this study have certain potential limitations. As it included a relatively small number of informants, it may restrict the diversity and representativeness of perspectives within the Situbondo community. Besides, the unique characteristics of Situbondo, such as its
high concentration of Islamic boarding schools and religious institutions, influence the results and may not be fully transferable to areas with different demographic or cultural profiles. This study also had a limited timeframe, which was done in four months, which may have restricted the depth of data collection and the ability to capture long-term patterns and changes in the community's health landscape. In addition, the interpretations and analysis of the data are influenced by the researchers' perspectives, experiences, and preconceptions. Steps were taken to mitigate bias through an ethnographic-hermeneutic approach, but it is essential to acknowledge that some level of subjectivity may still exist. Despite these limitations, the findings of this study still offer valuable insights into the potential for optimizing community-based public health services and collaborating with ibu nyai in Situbondo Regency. Furthermore, they serve as a starting point for further exploration and development of strategies to improve health outcomes and enhance the delivery of healthcare services in the region.

Conclusion

Ibu nyai pesantren has great potential to be utilized in strengthening public health services with local wisdom. They act as leaders and decision-makers for female students. Many ibu nyai have received higher education. They also became academics and politicians. They have a large enough social capital.

Ibu nyai has a high health concern. For pesantren, health services are an obligation because it is included in the five universal principles (al-kulliyât al-khams) to realize the benefit of society. Moreover, providing health services is part of worship because worship requires physical strength and a healthy soul. Therefore, in the view of pesantren, there must be a balance between physical (body) and spiritual (heart and mind) health. In this case, ibu nyai is a role model for female students in developing health concerns.

Ibu nyai has a very close social network, including outward and inner relationships with her followers. In addition, there are social networks that are routine and temporary, social networks organized by students and the general public, and social networks for traditional medicine.
The potential of ibu nyai, their concern for health, and the large social networks of ibu nyai should be used to strengthen community-based public health services. The government can work with mothers to strengthen community-based health services, especially for women. For example, the government can work with ibu nyai through the pesantren health center to educate female students.

On a broader scale, the Health Institute belonging to the Nahdlatul Ulama Executive Board is superior in seeing the opportunities and potential of Islamic boarding schools by mobilizing Islamic boarding schools to improve and develop public health services. PBNU Health Institute to cooperate with several parties to develop public health services initiated by Islamic boarding schools.

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