

# Maternal Mortality and Rituals: Exploring Agency of the Dead Through a Haunted Malay Doctor

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**Abstract:** This paper discusses a belief narrative collected in 2018 that revolves around a Malay Muslim student doctor being haunted by the spirit of a woman who died in childbirth. A ritual was described as being performed by the doctor on advice from her mother who was a traditional midwife. In Islam, requesting for assistance through supernatural help other than the Islamic God is frowned upon and thus this usage of ritual would be considered “un-Islamic” in practice. After examining the history of Malay beliefs in birth spirits and rituals, alongside cultural as well as workplace expectations for student doctors, this paper suggests that traditional rituals such as the ones used in this belief narrative allow agency to the dead, which in turn, assists the living in coming to terms with unexpected deaths.

**Keywords:** ritual, belief narrative, Malay, Islam, ghosts, spirits, the dead, agency, maternal mortality

## INTRODUCTION

In traditions of disbelief, narratives focus on “rationalizing” unexplained circumstances that could be attributed to supernatural phenomena. In Europe, the “dominant” framework is that of disbelief (Bennett 1999: 151) where in studies from England and Denmark, for example (Bennett 1999 and Raahauge 2016 respectively), interviewees were cautious about how they framed their experiences with the supernatural because of the general disbelieving tendency of the population. This does not mean that traditions of belief are absent in Europe; indeed, in all the studies mentioned earlier, respondents show that they take part in such a tradition, where they believe in the existence of the supernatural. However, folklorists are careful with the manner in which they broach the topic of the supernatural, as certain terms may provoke defensiveness. Malaysians, on the other hand, are not only open to believing in the existence of the supernatural; they are also not shy in talking about it. As a Malaysian Malay woman myself, I have had many late-night chats with friends about various types of *hantu* (roughly translated as “ghost”), and when one tells of a supernatural experience, one is almost always met with support. To disbelieve in the otherworldly is seen as strange. But believing is not a straightforward process. For the Malays, who are indigenous to Malaysia, belief is complicated because of the way their culture has developed and negotiated with new belief elements throughout history.

In the field of folklore, the concept of “belief” in relation to categorizing folk narratives has been widely discussed and debated. I am particularly drawn to the idea that believing is a “way of knowledge”, allowing for understanding how people “apprehend and discuss reality” (Motz 1998: 340). This enables a more respectful approach to the cultural phenomenon being studied, instead of grouping the practices as “other” to the researcher. For the contents of this paper, I am using the term “belief narrative” as outlined by Valk (2024) which refers to “genres with pronounced fantastic and supernatural elements, such as myth, legend, related miracle stories, and folktales, but also to more realistic genres, such as oral history, [and] personal experience narrative” (Valk 2024: 181). Referring to a belief narrative in this paper is more appropriate as the story told to me is part of the Malay folkloric category of *cerita hantu* (ghost story), which in this instance consists of a haunting through a personal experience narrative.

Nicholas and Kline (2010) describe the *cerita hantu* as being “ubiquitous” in Malay culture and tied to the “mystical world view that has and continues to pervade this society” (Nicholas & Kline 2010: 197). The authors argue that the ghosts that are prevalent in these stories are not to be dismissed as being fictional; rather, they are thought to “really” exist. It is important to note that as a belief narrative, the story is considered true to the storyteller and thus worth investigating. But perhaps, arguably, more noteworthy are Nicholas

and Kline's later remarks that "*Hantu* manifest in reality; they have actual and pragmatic effects on the lives of living individuals" (Ibid.).

In their research, the authors investigated the effects of the *pontianak cerita hantu* as propagating gendered constructs of the subjugation and control of women. According to Nicholas and Kline's (2010) informant, the *pontianak* has two forms: its monstrous form and its human form. In its monstrous form, the *pontianak* is considered as irrational/uncontrolled; with the phallic nail driven into the back of her neck, the *pontianak* is subdued, becoming a beautiful human woman who is then seen as rational/controlled (Nicholas & Kline 2010: 202–203). For this study, however, while the *cerita hantu* being analyzed finds its roots in the *pontianak* story, it is told from a different perspective – that of the ritual to contain this ghost born of maternal mortality. I propose that in addition to the containment of the ghost, another effect returns agency to the dead from which the ghost originated, providing release to the community that is being haunted by the ghost.

With an understanding of the usage of key terms that will be used in this paper, it would be useful to explain the origins of the story found here. In 2018, I conducted a project collecting stories by Malaysian women. Over a hundred stories were told, covering a range of genres. Some were morality tales, others were romantic, and quite a few were *cerita hantu*. This paper will focus on one story that falls under the category of *cerita hantu* told by a Malay respondent from Bangi, Malaysia. Before going into the story narrated to the author, we provide background on the Malaysian Malays and their beliefs, including the belief in malevolent birth spirits that inform the backdrop of the story.

## THE MALAYS AND BIRTH SPIRITS

The Malays in Malaysia today are made up of many different indigenous groups from across the Malay archipelago, conveniently named as such by the various European powers that had colonized the area (Milner 2008: 5). Though customs and traditions might differ between Malaysian states and tribal groups, the Malays in Peninsular Malaysia (or West Malaysia) have all been historically animistic, before embracing Hinduism and Buddhism, and then later Islam from as early as the 13th century (Ibid.: 14). This history is reflected in the Malays' traditions and narratives, where elements of the Islamic faith are present, but so are pre-Islamic elements that vary depending on the geographic source. Indeed, it would be of no surprise to folklorists that there does not exist a monolithic version of Malay traditions and practice; Malay historian Anthony Reid has noted that though "Islamic law books were becoming influential" in the 16th and 17th century Malay courts, "local oral tradition continued to be interpreted by the village elders" (Reid 1988: 137). One particular oral tradition that is of interest to this paper is the Malay birth tradition, which includes

a belief in malevolent birth spirits. One can find early records of this tradition in Skeat and Blagden's influential *Malay Magic* (1900)

In the chapter dedicated to "Birth Spirits", the authors describe three types of spirits that were a source of fear in childbirth: the *langsuir*, being the spirit of a woman who has died of childbirth, the *pontianak*, as the stillborn child ghost of the *langsuir*, and the *penanggal* that sucks the blood of newborn children. The authors give detailed descriptions of the ways these spirits look and sound, but rather than the actual spirits themselves, this paper is interested in locating the source of the fear they induced in their audience. These spirits can thus be summed up as the ghosts of devastating outcomes of childbirth: the death of the child and the death of the mother. A short description is given of the rituals that surround the prevention of such ghosts:

*To prevent [a woman from becoming a langsuir] a quantity of glass beads are put in the mouth of the corpse, a hen's egg is put under each arm-pit, and needles are placed in the palms of the hands. It is believed that if this is done the dead woman cannot become a langsuir, as she cannot open her mouth to shriek (ngilai) or wave her arms as wings, or open and shut her hands to assist her flight.*  
(Sir William Maxwell in Skeat & Blagden 1900: 312)

More than 80 years after the publication of Skeat and Blagden's *Malay Magic*, Carol Laderman's *Wives and Midwives: Childbirth and Nutrition in Rural Malaysia* (1983) provides an updated account of the roles of these spirits in the birth traditions of Malay women. Laderman's main thesis concerns childbirth practices in Merchang, Terengganu, and she also has a chapter dedicated to local beliefs on the supernatural and childbirth. Here, the *pontianak*, *langsuir* and *penanggal* make another appearance. But the naming of the spirits has changed; the *pontianak* and *langsuir* are both considered to be the ghosts of women who died in childbirth, and the *penanggal* has become merely a disembodied head dragging along its entrails. It seems that from Blagden and Skeat's publication until Laderman's 1983 study, the belief in these figures remained strong and rituals were still in place to protect mothers and their children at childbirth. Indeed, the *bomoh* (roughly translated as shaman) in Laderman's study appeared more confident in his capabilities to contain the spirits, mentioning that though the *langsuir* had been a problem in the past, the community now knew how to deal with them; the *bomoh* advised piercing the ghost's neck with iron or steel while repeating the appropriate spell (1983: 129). While the *bomoh* is usually a popular figure to mention when discussing Malay magic and beliefs, an equally important figure in childbirth rituals is the *bidan kampung* (village midwife). In Laderman's book, she is indispensable the moment a woman in the village becomes pregnant and her role includes not only attending to the physical

delivery of the newborn baby, but also psychologically supporting the mother and family before and after childbirth.

According to Ali and Howden–Chapman (2007), the main role of the *bidan kampung* today continues to be to provide emotional and physical support for pregnancy and birth, and they are seen as an option especially for rural women without access to modern “Western” facilities in urban areas. It is important to note that a *bidan kampung* is a traditional role and, unlike a government midwife, does not have medical training and is not considered a legal alternative to a hospital birth. While training had been given to *bidan kampung* prior to 1979, it was stopped because of “bad practices” that were supposedly harmful to mothers and children. It was alleged that *bidan kampungs* did not practice germ theory, though in reality, they were very aware of keeping the birth spaces clean for the safety of delivery (Ali & Howden–Chapman 2007: 279). Perhaps medical institutions (and the ruling Islamic establishments<sup>2</sup>) were less enthusiastic about the beliefs that were supported by the *bidan kampung* (Laderman 1983: 105). For example, the *bidan kampung* and other traditional Malay healers were concerned about a person’s *semangat* (roughly translated as spirit or life force); in the case of a pregnant woman, her *semangat* would be in a weaker state and thus more susceptible to attacks by spirits (Chen 1981: 127–128). This case of a weakened *semangat* meant that the *bomoh* or *bidan kampung* would sometimes use rituals that were not considered “scientific” or Islamic to combat the spirits.

Michael Peletz’s *Reason and Passion: Representation of Gender in a Malay Society* (1996) sees the accessibility of modern medicine as a crucial development in relation to belief in spirits and traditions of childbirth among the Malays. Peletz, while focusing on the subject of Malay dispositions, provides a crucial development in the belief in spirits and the traditions of childbirth amongst the Malays: the accessibility of modern medicine. Peletz explores this topic through a chapter on pregnancy and birth in a village in the state of Negeri Sembilan. He describes very briefly a few things that pregnant women should be careful of, such as forests, as they are considered dangerous places. Again, they need to obtain protection against “ravenous blood-sucking spirits (*pelisit*<sup>3</sup>, *langsuir*, etc.)” (Peletz 1996: 216). In his fieldwork, he notes that all births were now conducted in hospitals, where the *bidan kampung* may be in attendance, but only to assist (Ibid.: 218). This is an important development in Malay birth rituals as we see that within a decade, birth has become more medicalized; though the setting for delivering children has changed, the role of the *bidan kampung* still exists.

The previous works by Skeat and Blagden (1900), Laderman (1983), and Peletz (1996) had collected stories from ritual practitioners, having worked with the *bomoh*, *bidan kampung*, or mothers directly. To the author’s knowledge, such an ethnographic study has not been conducted since. The topic of birth spirits persists, however, but from a different perspective. Rather than

focusing on how to manage the spirit, the focus of research turned to the figure of the ghost. Indeed, most research tends to focus on one iteration of this ghostly figure, now popularly referred to as the *pontianak*. In an ethnographic study by Cheryl L. Nicholas and Kimberly N. Kline from 2002 to 2006, the authors recorded a belief narrative from Makcik<sup>4</sup> Salimah in Taiping, Perak. Here, the interviewee is not a shaman or a midwife usually in attendance at a birth, but an everyday woman in her 50s who was eager to tell the interviewer about the dangers of the *pontianak*. She describes the *pontianak* as the ghost of a person who has died in childbirth, and states that to avoid the corpse from becoming this ghost, one had to place needles in the joints of the corpse (Nicholas & Kline 2010: 209).

This shift in focus from the spirit being a real source of danger to it being a mostly fictionalized figure that scares in a *cerita hantu* is perhaps emblematic of the gradual change in the dangers of childbirth. Before the advent of modern medicine, giving birth was an event that could cause worry amongst potential mothers as well as their family members. Tracing this history in Malaysia, the maternal mortality rate was around 600 deaths per 100,000 births in the 1950s, when modern maternal healthcare was still only available in the city, dropping to 300 in the 1960s, and finally nearing zero from the 1990s onwards (Pathmanathan & Liljestr and & Martins 2003: 3). We see this trend of decreasing maternal mortality rates all over the world where mothers can safely access modern medical institutions. Still, these rates could change depending on historical circumstances. For example, though Malaysian maternal mortality rates were at an all-time low of 21 deaths per 100,000 live births in 2019, the rates more than tripled to 68.2 during COVID lockdown measures because of a lack of medical assistance and communal involvement (Department of Statistics Malaysia, 2024). Also, while there are fewer dangers in childbirth in present-day Malaysia, the mortality rate is still higher than that of more industrialized countries such as Japan or Estonia where the maternal mortality rate is 4 and 5 deaths out of 100,000 live births respectively. Perhaps because there is still a considerable maternal mortality rate in Malaysia, birth spirits such as the *pontianak* still linger in the collective consciousness of the Malay people.

## SYNCRETIC MALAY BELIEFS

Earlier, Makcik Salimah's account of meeting and dealing with a *pontianak* was discussed as part of Nicholas and Kline's (2010) research. An element that stuck out was the ease with which Makcik Salimah told of the rituals involved in subduing the spirit; the interview was conducted within the confines of telling a *cerita hantu*, which perhaps accounts for Makcik Salimah's comfort at describing the ghost as well as the ritual involved. This comfort is strange considering the way traditional rituals are viewed by Malay Muslims in Malaysia. Indeed, all the rituals outlined by the authors mentioned earlier could be

considered strange as in all four cases by Skeat and Blagden (1900), Laderman (1983), Peletz (1996), as well as Nicholas and Kline (2010), the Malays would have been professing the Muslim faith and dealing with *bomoh*, and spirits would be considered a form of *syirik*<sup>5</sup>, a practice heavily disapproved of in today's Malaysian Muslim society. Due to the fact that many Muslim Malays continue to seek supernatural assistance despite this help being considered un-Islamic, the Malaysian government has outlined rules to ensure that assistance from *bomoh* remained within the confines of Islam:

*(a) practice should not use any form of magic or witchcraft; (b) it must be based on the principle of Oneness of God (tawhid) and the belief that there is no power other than God capable of bringing good or bad to anyone; (c) one cannot slaughter animals in the process of treatment unless it is done in an Islamic way; and (d) it must not violate any principle of Islamic law (Abdul Halim 1999 in Haque 2008: 692). Although bomohs may violate these rules, they nearly always claim that they practice within the boundaries of government regulations, giving a sense of security to their clients. (Haque 2008: 692)*

This attempt to create Islamic boundaries within Malay traditions is a relatively new phenomenon that can be traced back to the 1970s where there was a surge of Islamic revivalism. This period heavily influenced all aspects of Malay life, from the personal to the political sphere (Kloos 2019: 163). Peletz goes so far as to say that “Malaysia’s Islamic resurgence [...] has highlighted and endeavored to restrict women’s sexuality and bodily processes”, specifically through women’s “biological production” (Peletz 2002: 189). In particular, there was a concerted move by the government as well as external agencies such as the World Health Organization (WHO) to shift births from the home to more modern medical institutions. Stivens finds that “(women’s) ‘traditional’ knowledge has been more and more devalued by ‘moderns’ and the state, although we also see many of these practices still firmly adhered to” (Stivens 1998: 68). In conjunction with these efforts, Malay religious officials also denounce these traditional practices, though instead of saying that they are not modern, they consider them to be “un-Islamic” (Ibid.: 68).

Islam, as the official religion of Malaysia, is deeply tied to the idea of being Malay. Indeed, in the constitution, a Malay person is defined as being born in Malaysia, speaking the Malay language, practicing the Malay customs, and, perhaps most importantly, as being Muslim (Article 160, Federal Constitution of Malaysia: 130). This aspect of Malay identity is of interest to this paper because the lived reality of the Malay people is much more complicated than the equation of Malay = Muslim. One of the tenets of being considered a “good” Muslim is that a person should only believe in the religion of Islam and its

God and should not ask for help from any other being except the Muslim God. Indeed, in Islamic religious studies in Malaysia, many articles have been written about needing to stick to the “true” way and not be influenced by “confusing” alternate avenues of prayer (Abdullah 2023: 208; Salleh et al. 2017: 76). But of course, belief is a tricky thing. In truth, many Muslim Malays would still consider themselves “good” Muslims even if they consulted a *bomoh* or sought help from traditional healers that made use of some sort of magic to cure them of their ills. This is perhaps because while the *bomoh* and traditional healers might not be Islamic religious leaders per se, they do include Quranic verses and Islamic prayers as part of their rituals.

This syncretic belief system, where the Quran is used within shamanistic practices, is one that has been seen as quite a defining feature of Malay beliefs (Morrison 2022; Nicholas & Ganapathy & Mau 2013). Morrison defines this syncretism as

*a phenomenon that allows Malaysians to borrow ideas, beliefs, and rituals from people of other faiths in much the same way that Malaysians celebrate each other's holidays, wear clothing with designs from outside their own sub-cultures and incorporate words from several languages into one sentence. (Morrison 2022: 23)*

But this merging of the many disparate parts of the Malay identity may prove problematic in the eyes of a devout Malay Muslim. Nicholas & Ganapathy & Mau (2013) find that it “is pragmatically paradoxical; one cannot be both a ‘good Muslim’ and hold traditional beliefs. Malay Muslims who do have syncretic proclivities are, therefore, very careful in how they maintain their presentations of selves as ‘good Muslims’” (Nicholas & Ganapathy & Mau 2013: 170).

## BELIEF NARRATIVE: A HAUNTED DOCTOR

This brings us to the belief narrative that had been related to the author. Hajar is a Malay woman in her early 30s who grew up in Banting, Selangor and at the time of the interview, lived in Bangi and worked in Putrajaya. Her mother was Singaporean-Chinese and her father was from Johor, but they made their lives in Banting. This is a usual type of modern Malay individual; since the 1970s many Malaysian women have left their rural hometowns to search for jobs elsewhere (Ong 1988). At the time of the interview, Hajar worked at the Ministry of Women, Family, and Community Development in Putrajaya. We spoke in a mix of Malay and English, and she was quite enthusiastic about retelling the stories that had been told to her while she was growing up in Banting. She was both excited as well as serious about retelling *cerita hantu*, especially those based on personal experiences. She told of three separate *cerita hantu*, two of which were experienced by Hajar’s daughter and one which she had experienced herself,

before introducing the story that had been told to Hajar by her sister. Due to the length of the story, I have summarized it as follows:

*Hajar's sister was still in training to become a doctor when she told this story. She was working in the Intensive Care Unit and was tending to the body of a woman who had just delivered a child but suffered severe blood loss (tumpah darah). Hajar's sister was in charge of the comatose woman for about twenty days before the woman died. She had been responsible for monitoring the woman during this period, even meeting the woman's husband and newborn child. Upon her death, Hajar's sister took care of the body's final preparations. At one point, she thought that perhaps the woman had not died because the body released a sigh. But upon checking everything one more time, it was confirmed that the woman was dead. Hajar had taped down the woman's eyes, tied her feet, prepared the body to be taken by forensics, and then prepared a report to be submitted. When Hajar's sister left the hospital, however, she felt as if the woman's "semangat" (spirit) hung over her and became melancholic ("terkesan"). In the days that followed, she began to fixate on all the people in her life who had died: her grandmother, her aunt, her former teachers. Her fingernails even turned blue. She sought counsel from her mother, a *bidan kampung* who, after some prodding, discovered that her daughter had tended to a woman who died in childbirth. The mother gave her instructions: wear the deceased woman's clothes and powder. The doctor was to mix the water of the soil that the woman was buried in with the water she used to bathe. The doctor was also to recite the Salawat as she bathed, repeating this ritual for three days in a row. Hajar's sister followed her mother's instructions and only then did she regain normalcy.*

When I had attempted to explain this story to my Malay Muslim friends, I was met with nervous looks and comments about how "that doesn't sound very Islamic". Despite their reticence, however, this story is an example of the way many systems of knowledge work within a contemporary Malay framework, highlighting the tensions that are persistent in Malay Muslim life. Hajar herself had been hesitant in offering information that her mother had been a *bidan kampung*; indeed, the reason that my friends were worried was because the ritual conducted in this story could have been considered a form of *syirik*. As mentioned earlier, Malays with "syncretic proclivities" need to find a way to show that they are "good Muslims". This is perhaps the reason for the adoption of the Salawat within the ritual. The Salawat is a prayer for the veneration of the Prophet Muhammad, and thus its usage as part of the healing allows an easing of the tension between Islam and this traditional ritual. It appears

to show the practitioner and the listener that they are seeking help from the Muslim God, and not any other power. As seen from the responses from the author's friends, however, this practice, even with Islamic elements, is not so easily accepted. Perhaps if the author had not conducted this interview within the space of an academic study, Hajar might not have been so keen on relating this story in more casual circumstances.

### DETACHMENT FROM DEATH: A MEDICAL AND MALAY CULTURAL PERSPECTIVE

While a figure such as the *bidan kampung* is regarded with suspicion by urban Malay Muslims today, they are arguably even more needed in today's hospitals. At the time of writing this paper, the data is unavailable for Malaysia, but there is increasing research on student doctors and their narratives concerning a lack of training on dealing with patients' deaths. Student doctors are placed in the hospital having been trained to view the patients with detachment; the patients are mere objects to be treated, not humans to be empathized with. Still, even with this detached approach to treatment, student doctors often find that they are wholly unprepared for and do not know how to deal with death (Tri-vate et al. 2019: 8). By contrast, students found that they could find solace in their nursing partners, who have been trained in how to empathize with their patients and were better at navigating the complicated emotions surrounding death at work (Crowe & Brugha 2022: 10). Indeed, in this same study, one respondent appeared to have had an experience similar to that of Hajar's sister: the patient that the student doctor was treating experienced gruesome pregnancy complications that led to the student doctor feeling traumatized when later faced with delivering her own child (Ibid.). Hajar's sister, as a young student doctor herself in the narrative, was faced with an unexpected and violent death and was given no support at work. Indeed, to be seen as a capable doctor in the culture of detachment in the medical field, one needed to "intellectualize their emotional experiences" instead of displaying empathy (Ibid.: 3).

This culture of detachment in the medical field finds common ground with the Malays' view on appropriate emotional expressions. As mentioned earlier, a detailed account of birthing rituals can be found in Laderman's (1983) ethnographic study. Alongside documenting intricate cultural practices surrounding childbirth, there are observations on the Malays, particularly the women, being insistent on complete control over their emotions, even in the face of pain and death. In one anecdote, a woman had been going through a difficult birth, with two *bomohs* called in. Quranic verses and Malay spells were read, doors and windows were opened to allow for sympathetic magic. This act of opening doors and windows appeared to symbolize the opening of the woman's body, allowing her to give birth safely. But the child was stillborn; a *hantu* (ghost) was blamed for its death. Upon viewing the stillbirth, the crowd around the mother chanted "tak apa-apa" (it's nothing, it's alright) (Laderman 1983:

164), which was similarly repeated by the mother. No tears were shed by anyone. At the funeral for the stillborn child, Laderman was the only one crying. When her assistant saw her tears, he quipped that when his wife almost died delivering a stillborn child, he did not shed a tear (Ibid.: 166). Malay Muslims believe that crying over a grave disturbs the dead, and thus women are usually not allowed at burials. This Muslim tradition, coupled with the horror of the death of a child, or the death of the mother during childbirth, is made even more distressing perhaps because of this Malay “denial of emotions” (Ibid.).

In this case, we see that Hajar’s sister had faced external pressure to suppress her emotions from two different sources: her medical community as well as her Malay upbringing. For Hajar’s sister, not being able to discuss the unexpected and violent death of her patient kept the spirit of the woman closer to her, perhaps causing her to be haunted. In the Malay belief system, to be haunted or possessed by a spirit is considered a form of illness, one that had originally been cured by spiritual healers such as *bomohs* (Haque 2008: 689). Perhaps it is of no surprise then that “(most) of the conditions treated by Malay shamans are classified by them as *sakit berangin*, a disease whose etiology is the frustration of talent, character, and desires” (Laderman 1983: 166).

## DEATH, RITUALS, AND AGENCY

Upon understanding the background of belief and the culture of detachment that pervades this story, it would be useful to look at the practice of rituals in Malay traditions. In contemporary Malaysia, Malays are slowly moving away from the more community-based ideas of living, evident in the rituals of birth and death, and more into an individualized form of existence, particularly in the city, which draws a person further away from their traditions through the medicalization of healing (Peletz 1996: 211). In an influential study Aihwa Ong mentions that “cosmopolitan medical concepts and drugs often have an anesthetizing effect, which erases the authentic” (Ong 1988: 40). For a doctor, the patient is removed and placed afar through detachment. The medicalization of death can remove agency from the dead through the ‘cold’ unfeeling way one is supposed to handle the body; in turn, a sudden tragic death can be construed as the beginning of a horror narrative<sup>6</sup>.

These horror narratives surrounding death can be traced back to the idea of control. A Foucauldian reading of the body sees it as a site of control, one in which the body is regulated and pacified by those in power to serve the interests of the powerful (Foucault 1973). In Malay society, as with many other societies, women’s bodies are heavily controlled by both external sources and the woman herself. Birth rituals can be read as a way to control the body to perform in a way that society and the woman wants it to. Death is the exact opposite of the outcome desired. To exacerbate this fact, maternal mortality in the face of modern medicine’s attempt to overcome it makes the dead body of a woman who died

in childbirth “ungovernable”. In fact, Csordas (1994) and Becker (1995) characterize illness as an experience of the body as ungovernable (as cited in Hallam & Hockey & Haworth 1999: 11). The event of death thus becomes a source of horror. The agency of the dead woman is evident from the reactions to her dead body; rituals to control the dead body imply that the dead woman can exact retribution, obtaining a second life. One could argue that the “social presence” of the dead body resurrects itself through the form of a ghost – a possible symbol of freedom from the control with which society had once restrained it in life.

This social presence after death showcases the liminal aspects of death, which have affected storytelling traditions worldwide. Within the narrative traditions of horror, this liminality is viewed through figures of the undead. Hallam & Hockey & Haworth (1999: 2) provide a matrix of body/selves that can show how we view anxieties about death and the body, as reflected in creatures of horror:

■ *socially and biologically alive: socially and biologically dead*

■ *socially dead / biologically alive: socially alive / biologically dead*

In the first instance, a “normal”, acceptable interaction with a person is when they are alive both socially and biologically, or when they are dead, both socially and biologically. To be socially alive means that a living person connects with their society using their body, and in turn their body, or person, is given meaning by the people they meet. To be socially dead would imply ending one’s connection with a person; therefore, to be “truly” dead would imply not only one’s body ceasing to function, but that social ties to one’s person have been severed as well. Hallam & Hockey & Haworth (1999) discuss the people who are socially dead but biologically alive as those who are in a vegetative state; they argue that when translated into the horror genre, one can draw parallels with the zombie. In the story that Hajar tells, when Hajar’s sister cares for the patient, she is in this state. Biologically, the woman was alive, but she was unable to take part in social life. To be socially alive but biologically dead however, would include figures like a stillborn child; in its horror counterpart, the authors find vampires to fit this description. In the case of the woman who died in childbirth featured in Hajar’s story, this figure fits the category of being biologically dead but socially alive. According to the authors, “to remain socially alive after bodily demise can be [...] disruptive [as it can raise] the specter of the ‘pathologically’ grieving individual” (Hallam & Hockey & Haworth 1999: 3). A theory raised by Hallam, Hockey and Haworth (1999) proposes that the suddenness of death can cause a body’s continued social presence – they are not “a body [...] but a person” (Hallam & Hockey & Haworth 1999: 12). In Hajar’s sister’s case, who was assigned to her care for nearly a month, the dead woman

is only dead in terms of her body – but her social presence through her impact on Hajar’s sister – her “semangat” is very well alive.

So what happens when the ghost is not contained? Alongside birth and death rituals that deal with the body there are also rituals by the community to deal with a potential ghost. In the story collected here, we get advice from Hajar’s mother who had been a *bidan kampung*. It is important to reiterate that the *bidan kampung* is not a state-approved midwife; in Malaysia today, the law states that a *bidan kampung* could be in attendance of a birth so long as a government midwife is also there. It is unclear whether Hajar’s mother was a state-approved *bidan kampung* or not, but she was not a government midwife. Therefore, her methods are closer to Malay traditional birthing practices than those of a medically trained midwife. In these roles, the *bidan kampung* understands not only the bodily needs of her patients, but also their cultural needs. A *bidan kampung* such as Hajar’s mother would also have been experienced in providing psychological support. In this way, she provides a way to draw the social connections between Hajar’s sister and the dead woman to a close.

According to Peletz, “At death, the person ceases to exist in the sense of having a distinctive personality, but this does not necessarily mean that it is no longer endowed with agency (the capacity to influence the world of the living)” (1996: 209). In Peletz’ own fieldwork in Negeri Sembilan, he found that

*(some) of the rituals immediately following an individual's death reflect villagers' concerns to sever the emotional ties between the living and the deceased, or at least to minimize the negative impact of death upon the deceased's immediate survivors and help ensure that the spirit of the deceased will not be bothered by the grieving of his or her surviving kin. (Ibid.)*

Peletz’ observations during his fieldwork show the importance of ritual in severing the social connections of the dead so as not to raise the possibility of a “spectre” haunting the living.

Reflecting back on the culture of detachment in Hajar’s sister’s life, both from her medical world and the Malay world, Hajar’s sister needed to engage with the dead meaningfully in order to arrive at peace. It is only after acknowledging the dead woman as agentic was she able to transform a previous horror narrative into one that confronts and makes peace with the confoundingly unpredictable nature of death. The practice of this ritual can thus be seen as a way to reach catharsis, where the sister moved “beyond a pathology of pity to compassion” and “beyond a pathology of fear to serenity” (Kearney 2007: 52). This focus on the spirit shows that the Malay dead possesses agency which moves people to ensure that they can rest well and peacefully. In the event of a *violent* death, this is needed even more. The rituals of death, in this respect, give agency to the dead, keeping horror away from ordinary lives.

## CONCLUSION

This paper has explored a belief narrative on a ritual to contain the spirit of a woman who has died in childbirth. Through navigating the complex syncretic Malay belief systems, the history of the Malays' beliefs in birth spirits, and the obsession with controlling emotions when dealing with death, this paper shows the relevance of the birth spirits in contemporary Malaysia. In particular, the figure of the *bidan kampung* finds continued relevance in supporting Malay women through difficult experiences such as a traumatic death.

As mentioned in the beginning of this paper, the Malaysian Malays come from a tradition of belief where their acceptance of the supernatural at times sits uncomfortably with their desire to be seen as "good Muslims". Instead of "othering" the traditional practices such as birth rituals, understanding belief narratives through the perspective of belief as "a way of knowledge" (Motz 1998) allows one to empathize with the idea of the belief in birth spirits and rituals.

Positioning the traditional figure of the *bidan kampung* against the "modern" institutional doctors in this paper is not meant to hold up one against the other. Indeed, seeing as a large part of the history of Malay birth rituals had been recorded with birth practitioners, perhaps in Malaysia's more medicalized landscape, the role of the doctor may include bearing testimony to modern rituals. This may be through new rituals that are akin to the ones studied by Skeat and Blagden (1900), but are more suited to contemporary life. However, the role of the *bidan kampung* should not be neglected. As has been seen in other research that is critical of the medical institution, it is important that the cultural figure of the *bidan kampung* continue on in the lives of Malays. The personal anecdote provided by the storyteller in this study provides a unique insight into the psychologically healing potential of confronting the dead as an agentic being through the use of Malay rituals.

Further, it would be imprudent to believe that one woman's story is reflective of all Malay women's beliefs. I hope that this paper highlights the need for more research on the belief narratives of Malay women in Malaysia; Hajar's story is only one amongst many that could shed light on the fascinating ways in which the Malays negotiate the various elements of their beliefs. With Malaysia being an industrialized country with more and more of its women moving out of rural villages and into the city, it would be interesting to see how they navigate their traditions of beliefs with the institutionalized modern world.

## NOTES

- 1 Skeat and Blagden (1900) transcribe the name as "langsuyar" but the Malay "langsuir" is the accepted spelling in research on this figure today.
- 2 This attitude seems to mirror the licensing of midwives in Europe from as early as the 1400s (see Kontoyannis & Katsetos 2011 for more details on England, Germany and Holland). Generally,

though the importance of the midwives was felt by their communities, their knowledge was suspected as being linked to witchcraft by “[church] authorities in collaboration with male physicians” (Kontoyannis & Katsetos 2011: 32). Similarly in rural Italy, the midwife was seen as indispensable for assistance in childbirth, though should a death occur, she would immediately be accused of witchcraft due to her usage of “folk medicine” (Lippi 2012: 70).

- 3 The *pelisit* or *pelesit* “frequently [assumes] the form of grasshopper-like creatures with sharp, bloody teeth” (Peletz 1996: 251); it is “a familiar spirit that makes its “mother” appear fascinating to the opposite sex in return for meals of eggs or, some say, blood”, but it also has the potential to “interfere with the normal progress of birth” (Laderman 1983: 111).
- 4 *Makcik* is a Malay honorific for an older woman. Roughly translated to “auntie”, it can be used as an honorific for any older woman and is not exclusive to family members.
- 5 *Syirik* denotes asking for favors from a supernatural being other than the Islamic God.
- 6 Horror, in terms of its terminology, finds its origins in European scholarship on mostly literary texts and films, and thus using it in the context of a Malay ritual may seem strange at first (Ainslie 2016: 181). However, “horror stories” (to borrow from Stewart 1982) transcend storytelling and national boundaries, and undoubtedly find their origins in oral narratives, which include personal experience narratives on encounters with the supernatural, such as the one found in this paper.

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