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Empowerment of the Domestic Identity

Yayasan Pelita Ilmu, through its PMTCT program, has involved the PKK in order to help facilitate community prevention of HIV/AIDS. Unfortunately, due to the PKK's limitations and lack of government support, as well as the ongoing stigma against HIV/AIDS as a dirty and dreadful disease, PKK cadres have only been able to function as community workers. They have not had much success in promoting HIV/AIDS prevention. For most PKK cadres, the PMTCT program is seen only as another type of work, a source of extra income; which is actually similar to how they viewed the Safe Motherhood Movement and the Family Planning Program.

In this chapter I examine how the PKK cadres make use of the identity of motherhood to grant them access to economic benefits through the PMTCT program; and further look at the extent to which motherhood, which gives access to economic benefits, empowers or disempowers PKK cadres.

5.A. Remuneration for PMTCT

Mobile VCT, administered by YPI, not only brings benefits for the pregnant women but also remuneration for PKK cadres. In each mobile VCT program, YPI has a special budget for those who are involved in this activity, including the cleaning service team and

security staff. They call the money offered a 'transportation fee', although it is not necessarily used for transportation per se. The money is not only for PKK personnel but is also distributed for regional benefit, i.e. to the Community Association, or for renting a room. The money is given to one or two key cadres who will divide it as they see fit. Every district has its own way of distributing the money.

At *Rawabunga* village, YPI gives some money to the two key cadres, who distribute the money as 'transportation fees' between themselves and some other accomplice cadres who help them. All the cadres receive 5,000 rupiah for each pregnant woman they approach. For example, a cadre can bring three pregnant women to join the mobile VCT. She will get 15,000 rupiah. The money given by the YPI is also used to pay fees for the Community Association's petty cash, for renting a room and for a cleaning service, as explained by Ibu Jubaedah, one of the key cadres in *Rawabunga*:

About the transportation, for me, if I say (need to get) twenty-five (pregnant women), I give (the fees to) twenty-five (cadres). I also get some fees from YPI for being a coordinator, also for the RW's (Community Association's) petty cash and cleaning service, they (YPI) have a separate budget. It's up to the RW whether he wants to give some (money) to PKK (as petty cash). We still give it, for example a hundred thousand rupiah (for the RW). For the cleaning service, we give it directly to the cleaners. If we get it from Ai (YPI coordinator), we give it directly to the cleaners. I think it's enough... for people like us... better than if we don't join... as long as we enjoy. I've got a lot of advantages, giving the society information about women's health. I'm also grateful that the society gets involved, so those are the advantages. I am known by people. (Ibu Jubaedah, PKK cadre at *Rawabunga*)

When I discussed this with another key cadre, Ibu Ucum, I found that she also had a similar arrangement:

A person is 5,000 (IDR, which they get for each pregnant woman they invite to the VCT location). The cadres also get paid. So, there's money for the cadres and pregnant women. So, it is informed directly to the cadre: 'If you get pregnant women you will get this much/Oh, ok'. Ai (from YPI) would say, 'This is for Bu Cum, for Bu Narti, Bu Pepen', etc. Besides that, (there is) also some budget for cleaning service and room rent. Just give it (as one package) for the RW's (Community Association's) petty cash... (Ibu Ucum, PKK cadre at *Rawabunga*)

At *Pasar Minggu* village, there are only two key cadres who approach pregnant women one by one. YPI gives an amount of money according to the number of pregnant women they are able to bring to the mobile VCT. YPI also gives money for room rent and cleaning services. The cadres feel, however, that the money is not enough, as they are not helped by other accomplice cadres and sometimes have to find the pregnant women from other Community Associations which are located far away from their house.

I like joining the PMTCT, I get knowledge about the disease, I get money, tips. That's what I want. I say I like being involved in PMTCT and getting money at the same time, I love it!! The budget is shared differently. For example, a room rent: last time when we rented the Abror mosque, we received 100,000 (IDR) and I got money as a cadre who guides. I don't remember how much, I had to share the amount for the three of us. If we invite the *Lurah* (head of the village) and other PKK cadres, I asked that the cadres should get a little souvenir, as a sign of respect, so they know it is from YPI. They didn't ask actually, but I feel like... If we use a mosque, the money goes to the mosque but not as a donation. I gave them 100,000 (IDR) for cleaning service. Actually, if using the mosque, it's not a must to pay a certain amount of money. We can just use it, as long as you clean it afterwards, we can even borrow chairs because we get permission from the wife of the *Lurah*. At that time '...Can we borrow it?' They didn't ask for a certain amount. But I understand. Mul, the office boy, I gave him 50,000 (IDR). 'This is for you/Thanks madam!' The janitors were given money, but not the security. The security was not really involved so...we just rented the room. For me as a cadre coordinator, for each pregnant woman I get 5,000 (IDR). I get 30 pregnant women, so 30 x 5,000 is what I get. That's what I know. 'You get 30 pregnant women, for each you get 5,000 (IDR) times 30/For whom is this?/For you'. You know, I like it if PMTCT can hopefully give more money, will love it. If I get more transportation fee, you know it's not only for paying the transportation cost, I need to go to the RW 10 as well, that's far and costs a lot to pay for the *ojek* (motorcycle taxi). I don't want to spend my time to search for pregnant women and spend money too, I don't want it. They have to give my efforts a price, too, I have to get something... We get paid based on the activities! If there's not any activity, we don't get anything... That's why I said if there's an activity, it's positive, if not... I have a lot of contacts... I'll say who will pay me? Especially when we have to search for pregnant women. 'Bu Slamet, let's go to the RW 09?/I don't want to, I want to ride an *ojek*!!' So we have to

ride *ojek* to get there. 'How much?/10,000/Are you kidding me? It's 10,000 (IDR) just to get there.' If it costs 10,000 (IDR) per day who can afford it? (Ibu Suciasih, PKK cadre at *Pasar Minggu*)

At the *Johar Baru* village, there is even a special amount of money for the *Lurah* (head of the village), aside from the money for the PKK cadres and cleaning service. Use of the room is free of charge because it is usually held at the Village Office, but they give money to the *Lurah* as usually he gives an opening speech at each mobile VCT. If the village office is occupied, they have to rent a room at a school. The money is given to the key cadres to be shared according to their needs. In *Johar Baru* there are three key cadres helped by two accomplice cadres, who mobilize the pregnant women to go to the mobile VCT location.

It's not bad for getting extra money, sometimes the *Lurah* says that. He calls it *Uang Pembuka* (an opening speech fee). They've asked for a specific amount of money. Not too much...including the cleaning service. But not including the security, only cleaning service. But not at the *Kelurahan* (village office), it's included already... The last time when it was held here (at the school), we had to pay for the rent. We rented it, but the amount is up to us. It's 2.5 (250,000 IDR) or what...if I'm not mistaken...it's a long time ago. Here (at the village office), it costs a hundred. At YPI it's 150 (150,000 IDR) or something like that, I forget. The money is given first to us, we count it first and share the money, and then we pay them after the meeting. Usually we, PMTCT cadres, get some money from YPI. It's not bad. It doesn't cost a lot from my place to *Kampung Rawa*...we still get some. Sometimes the half of our fee is taken to give some to the cadres who have helped. It's also from us. We get it from YPI, then the money from YPI we share with the three of us. For example, the three of us are PMTCT cadres, we collect the money from us, and then we give it to the cadres who have helped us. Without them we cannot succeed... (Ibu Fitri Handayani, PKK cadre at *Johar Baru*)

At *Kampung Bali* village, the mobile VCT location keeps moving from one Community Association Post to another. YPI gives the rent payment to the PKK cadres at the Community Association level who are responsible for the place, usually to the wife of the Community Association Head, who is the local head of the PKK.

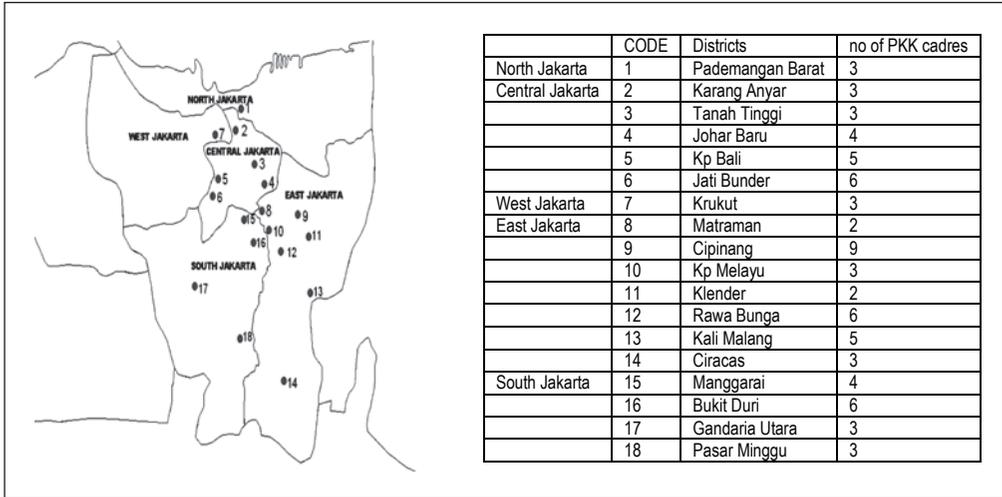
The cleaning service fee is paid directly to the janitors. There are two key cadres helped by some accomplice cadres involved in the mobile VCT. The accomplice cadres, through the key cadre, get a certain amount of money depending on how many women they can approach. The key cadre gets a special payment.

If a room is used, we give it to the wife of the RW (Community Association Head), who is responsible for the activity. For example, I use the community post at RW 04, we tell the PKK it's the RW 04, we have to know who is responsible, as well as the cleaning service payment, which is given directly to the cleaners. Cadres also get some. For example, the one responsible for RW 01 is Ibu Nurhayati, (she) gets two, we give her 5,000 (IDR), times two people, is equal to 10,000 (IDR). It works like that, we share the money. So, YPI gives the money to us. There is also some amount for us, 75,000 (IDR) for the two of us. I think there's no money for the security... You know, cleaning service, room, like room rent.... Everything is paid by YPI, that's all. For each pregnant woman, we get 5,000 (IDR), so it depends on the number of pregnant women, if we get many, just multiply it by 5,000 (IDR). Just like at the RW 07, 08, 09, 10, we've asked the cadres to get the data on pregnant women, we've asked them to search for the pregnant women and they'll get money in return. But if it's possible, don't give us only 5,000 (IDR), if it's possible a little bit more than that, so that the cadres are more enthusiastic. You know, looking for pregnant women is not a simple job. Some of the pregnant women don't want to tell us that they're pregnant because they're afraid to get tested. 'Maybe I have HIV, maybe I'm' That's what they're afraid of. But we have to be patient with the women. 'Come on, sit down.' If nobody comes, we try to find more: 'Join us, sit down.' That's the risk, we have to be patient. (Ibu Supriati, PKK cadre at *Kampung Bali*)

5.B. Profile of the Cadres

As mentioned in the previous chapters, the PKK cadres are referred to YPI by the head of the village. From 1999 until the end of 2006 when the data was collected, YPI trained seventy-three PKK cadres from eighteen villages in Jakarta to support the mobile VCT service, part of their PMTCT pilot project, as shown below.

Figure 1:
The Number of PKK Cadres Engaged in PMTCT in Jakarta



Source: Extracted from YPI Documents

The profile of the PKK cadres participating in the mobile VCT service varies. The data taken from the period 2004–2006 shows that most of them were middle aged (older than fourthy years), though some were older than sixty years. At these ages, most women in Indonesia do not take care of babies or children anymore, so their free time can be used to join social activities. Almost all PKK cadres involved in the VCT activities were in the POKJA (Task Force) IV, which is related to health, and were also active in *Posyandu* activities. Their involvement in the PKK had been fairly long term; some of them had even been active for decades. Usually, women first become active when their children are under five years old, when they join the *Posyandu* as beneficiaries. As their children grow up and they are not working, they start to be involved in the PKK as providers.

As an Indonesian woman, one must prioritize one's husband's and family's needs above all else. Therefore, the women can only join in voluntary activities when they feel that the activities will not disturb their household chores. This is not only in line with the socialized role of Indonesian women, but is also written in the basic rules of the PKK, in the form of *Panca Dharma Wanita*, or the Five Responsibilities of Women, that define women as appendages and companions to their husbands, as procreators of the nation, as mothers and educators of children, as housekeepers, and as members of Indonesian society (Sunindyo, 1996, p. 124; Suryakusuma, 1996, pp. 101-102).

Many PKK cadres involved in the mobile VCT were those with little education, generally not beyond high school, and were mostly stay-at-home mothers and housewives. With limited education, knowledge, and skills, PKK cadres cannot be expected to effectively spread information about HIV/AIDS throughout the community, although they have had some training beforehand.

**Table 1:
The Profile of PKK Cadres**

Education	Occupation		Total
	Housewife/Not working	Working	
No answer	29	1	30
	39.7%	1.4%	41.1%
SD (Primary School)	1	0	1
	1.4%	0.0%	1.4%
SMP (Junior High School)	11	1	12
	15.1%	1.4%	16.4%
SMA (Senior High School)	20	7	27
	27.4%	9.6%	37.0%
Diploma (Bachelor)	2	1	3
	2.7%	1.4%	4.1%
Total	63	10	73
	86.3%	13.7%	100.0%

Although it is not considered as work, PKK cadres often receive an honorarium when they are involved in PKK activities. As already mentioned in the previous chapter, the government used to provide funds for the PKK. However, during the economic crisis of the 1990s, the PKK's activities could no longer be automatically funded by the government. As a result, the regular PKK activities have almost disappeared. Those remaining are the non-routine activities which do not cost a lot, and for which the cadres only get a transportation fee. A PKK cadre talked about this matter in an FGD. She participates in a dengue fever prevention program, and for doing so she used to get a salary as a worker. But now, PKK cadres who participate in this program do not get any salary as they used to but only a limited transportation fee, even though they have to do the same tasks as before.

I used to work at *Puskesmas* as a *jumantik*¹⁸, the salary was the regional minimum wage, and we went from one RT (Neighbourhood Association) to another. So every month we made a report to the RW (Community Association). But now, *jumantik* doesn't exist; it is now called a cadre. A cadre doesn't get any salary, only tips. We function as a cadre, as well as a *jumantik*, but now the salary (is), a hundred thousand rupiah for five of us. (PKK cadre, FGD)

Most PKK cadres involved in the PMTCT program used to be active as Family Planning Program Fieldworkers (*Petugas Lapangan Keluarga Berencana*, PLKB). During the New Order era, PKK members who were also fieldworkers received a regular salary taken from the National Budget Plan for Income and Expenses. After the crisis, things have changed. Fieldworkers no longer receive a regular salary from the government, and as a result the role and function of the fieldworkers in society are not very clear.

At PPKB (Village Family Planning Management Assistance) I get 15,000 (IDR) from the RW (Community Association), I think the RW is very kind; I used to get 15,000 (IDR), now I get 50,000 (IDR)... It depends on the RW, there are no rules. I don't get it from *kelurahan* (village office)... From them I used to get 3,000 (IDR) a month, now I get 10,000 (IDR). Ha ha... If you get it at once for a year is not bad. Usually I get it every six months, sometimes two months, sometimes three months. But I don't get it regularly every month... Sometimes I don't mind not being paid, as long as my husband allows me. PPKB has its own budget from the government by the way. (PKK cadre, FGD)

Posyandu activities are one of few areas to have survived the national crisis. There was a time when it could not be as active as it used to be, but *posyandu* is now back on track. In the reformation era, *posyandu* activities under the PKK were brought to life again using government funds. The government planned that on the 27th of every month, every district office should hold a *Posyandu* activity. Although *posyandu* is still alive, the budget provided by the government for its activities is not as much as in the past before the crisis.

18 *Jumantik* is *Juru Pengamat Jentik* (mosquito spawn inspectors). This role was formed to tackle the dengue epidemic in Indonesia. Every Friday, the PKK cadres should walk around the village to do an inspection of the environment in the neighbourhood. In particular, they check the bathrooms and water reservations for mosquito spawn.

Especially now that we get the fund for *posyandu*, we have more responsibilities to give the service, if there is funding; we are responsible because the fund is from the government. Now that we've got the fund we need to think about the cadres, the *posyandu*... *Lurah* (head of the village) can be responsible, we get 450 (450,000 IDR), because I have three groups, a group gets 150 (150,000 IDR) per month for the operational expenses, the food supplement program for children under five years old. Last time on the 27th, I cooked chicken soup because we're responsible for the fund. I made the report with a signature and list of expenses. The recent program since there is PPMK (*Program Pengembangan Masyarakat Kota - Community Development Program in the City*) is handled by *kelurahan* (village office). PPMK is now a program of *kelurahan*, but not PKK, but *Posyandu* is ok. So every month two hundred, depending on the *Lurah*. (PKK cadre, FGD)

Posyandu has got attention, we have got funds and every month, we really get attention. There is an improvement from the government. Better, even for a health problem we can get it for free. Now it's easier, the government pays attention to *posyandu*. Every month we get money, subsidy, and funds for food supplement from *kelurahan*. Each month we get 50,000, a year long. *Posyandu* is on every 27th, also for pregnant women. (Ibu Fitri Handayani, PKK cadre at *Johar Baru*)

Voluntary work that earns some money is very suitable for PKK cadres, because not only can it help support their households, but this kind of activity also does not consume too much time, meaning that it is possible for them to still take care of their husbands and children. However, because of the very limited budget available, PKK cadres earn less money than before for regular PKK activities. The money provided by YPI when they participate in the PMTCT program can therefore be a good alternative source of extra income.

5.C. Benefits of Caring

Walt (1988, pp. 5-7) said that while volunteers aim at helping or benefiting others, there is an assumed self interest in voluntarism to benefit oneself. Volunteering is often seen as a venue for paid work and as leading to future employment, especially in less developed countries where job opportunities are lacking. In more religious countries, voluntarism may have a positive impact on one's social status. For women, who are in general heavily burdened with daily tasks, reciprocity between neighbours and families at certain times may become the reason to do voluntary

work. In Indonesia, cultural respect for and compliance with authority may lead to voluntarism.

As mentioned above, knowing that PKK cadres' socioeconomic condition is generally below average, i.e. they have a minimal educational background, no formal job with a regular salary, have unemployed husbands, etc., the money they get from PMTCT activities is significant. Ibu Mumun, a key PKK cadre from *Jati Bunder* village who has been involved in the mobile VCT activity since 1999, tells how the material advantages she gets has had a big influence on her life. PMTCT was her first experience in voluntary work. She had not been involved in any PKK activities before joining the PMTCT program. She began as an accomplice cadre, who got less money than the key cadre. Yet, she was happy with the money. She gets a lot of money now since she is the only key cadre responsible for the mobile VCT service in *Jatibunder*.

At that time of our discussion, we were on our way to the YPI secretariat to deliver an invitation from Ibu Mumun, who was going to have a party to celebrate her son's religious circumcision¹⁹. Ibu Mumun told us proudly that she would hire a *dangdut*²⁰ music band to entertain the guests at the party as a request from her son. To be able to have a party to celebrate a male's religious circumcision, let alone to hire a music band, is a luxury for families like hers. She told us that this luxury is as a result of her hard work participating in the PMTCT program. Below is what she told us:

I used to get 7,500 (IDR) for thirty people (as an accomplice cadre). The cadre gave me that much and I was very happy. But Tante Nia (a YPI volunteer) said, 'Don't just take it'. She said, 'How much did you get to have brought so many people?/7,500, for two times is 15,000/Don't take it, stupid!!/Why not? Is it too expensive?/You're stupid, I'll talk to Pak Samsu (YPI director), don't take it if it's too little/I was given that much, I just accepted it!!/Ok, I'll introduce you to Jajang (VCT coordinator) so that you can be a cadre, something like that, I'll ask him to take you'. *Alhamdulillah* I know more about being a cadre. Sometimes I get 150,000 (IDR), not including the rent payment for the chairs, how much do I get? YPI spends a lot if I look back... Since 1999 there has been almost 800 (800,000 IDR) that I have brought, there's been a lot. In a month, sometimes I get 200 (200.000 IDR), 650 (650,000 IDR). That's

19 Male circumcision is among the rites of Islam and is part of the *fitrah* (in Arabic), or the innate disposition and natural character and instinct of the human creation. For *Betawi* people, an indigenous tribe from Jakarta, to have a celebration after the circumcision of a son brings them pride, even though it is costly. People will look up to them.

20 *Dangdut* is a genre of popular music that is partly derived from Malay, Arabic, and Hindustani music. It developed in the 1970s, but beginning in the late 1990s reached a broader following in Indonesia. Instruments usually include a tabla, mandolin, guitars, and synthesizers.

my income in a month, not to mention the other income, thirty people per month, I can bring them two times, three time. For example, the 27th, they'll get the result on the 1st. If there's no YPI, I might still have difficulty. Before YPI, I was very miserable. After YPI, with their activities, people respect me. Nobody cared about me, my child was in trouble, my husband didn't have any job. After working for YPI, my youngest child can have a circumcision. With the money I bought a television. I didn't have a TV when *Aul* (her child) was smaller, I wanted to buy a TV, I wanted to have my own clean water supply, electricity. I didn't have them all. After joining YPI, I can!! I can be independent. I say to myself how lucky I am. When *Aul* was a baby, 9 months old, I left him and went looking for pregnant women. In the past, even to get 50 IDR was very hard, but now if there's work, it's ok. It was very hard even to earn just 100 IDR. I didn't have any *ojek* (motorcycle taxi) business, now I'm an *ojek* boss, people rent motorcycles from me. I save the money from YPI every month, I can buy a TV, build a house; I never imagined it in the past. At First, I asked the pregnant women, 'Do you want to join our program?' I just tell them the truth!! 'Then you will be tested whether you have a disease. If there's a disease and you are pregnant, you will be cured!! If there's a disease, we take care of it/Oh I see, I want to try because I easily get sick!' They all know me. From the first alley, hmm...for example in the market, when I walk, whether they're pregnant or not, they still know me. People say walking with me is busy, Ibu Ucum (cadre from *Rawabunga*) was surprised. 'All the way, they know you'. I am now joining activities in the *kelurahan* (village), also at the *kecamatan* (sub-district) as a PKK cadre. They say, 'Mumun will know, she has ability, everything is easy with Mumun'. I join MOP (*Metode Operasi Pria – Men Surgery Method*) and MOW (*Metode Operasi Wanita – Women Surgery Method*) program (for family planning).... For a vasectomy, I join the vasectomy program at the *kecamatan* (sub-district), together with Ibu Pri. (Ibu Mumun, PKK cadre at *Jatibunder*)

As the only key cadre who works independently without help from other cadres, Ibu Mumun can definitely earn enough income from the PMTCT program, which she can use to support her family and even to provide some capital for her husband to start another business as a *juragan ojek*²¹ which, it is hoped, will bring better income for the family. It is fascinating that not only can Ibu Mumun afford to buy household items with her income, but she can also prove to the community that a poor family with nothing is able to upgrade their status to one that is able to fulfil

21 An *ojek* is a motorbike taxi and a *juragan ojek* is one who owns a few or many motorbike taxis and rents them to the *ojek* driver.

their household needs such as water supply, electricity, a television, and even to hire a music band to celebrate a religious circumcision. The voluntary work she does certainly influences the social status of her family, from being helpless to respected and well known.

PKK cadres not only consider PMTCT as a community activity but also as an activity that brings some money home. When YPI continued its PMTCT program in an additional six provinces in 2006, Jakarta province was not included in the program because of lack of funds. The cadres felt like they had lost their job. Ibu Mumun kept asking me about this matter since she had contacted a number of pregnant women. At that moment, they were waiting for PMTCT and they had been promised to receive some money if they participated in the program. Ibu Mumun explained her disappointment that her community was no longer involved in the PMTCT program, which meant that she would lose some income:

I wonder why we don't have it anymore (mobile VCT activity). I don't understand. Does it still exist? Many pregnant women have asked me about that. 'Why haven't you invited us? You said it would be last December, the 23rd. Now it's the 1st, but we still haven't had it yet', they said. I haven't heard anything yet. What can I say, you know? If I had the money, I would do it for sure. But, I don't. I heard about it from Mbak Ai and she got (the money) from another person. It's hard (the money matter) and there have been a lot of them (pregnant women). We have achieved the target, which is fifty (women), but I heard Mbak Ai has moved to *Banten*. Mama Nia said, 'Why didn't she take you with her? You are the one who has been looking for these women. Why is she like that?' I've got fifty (women) with me and she hasn't said anything. (Ibu Mumun, PKK cadre from *Jatibunder*)

It is not only Ibu Mumun; Ibu Ucum from *Rawabunga* felt the same way, too. Both of them regularly go to the YPI secretariat asking for the PMTCT program to return.

I would like to have it every month, but it stopped. Ibu Mumun (from *Jatibunder*) called me again and again and asked, 'Do you have any job already? If so, please tell me. I really need one'. I said, 'No, not yet, just relax and pray'. Ibu Mumun said, 'It's been a long time, would you call them?' One morning, Ibu Mumun said, 'Ibu Ucum, why don't we go to YPI, I'll wait for you there (at YPI secretariat)'. We go (to the secretariat) frequently by a taxi though it is costly, me and Mumun. (Ibu Ucum, PKK cadre at *Rawabunga*)

Ibu Mumum is a special case. As the only key cadre in her area, she can get a significant amount of remuneration for her voluntary work. The other PKK cadres who have to share the money with accomplice cadres do not get as much remuneration as her. Still, the remuneration they gain is an additional income for their pocket. They usually use the money to buy snacks for their children or grandchildren or just to go out with friends.

PMTCT causes PKK cadres to be known by people in the community as persons who have skills or who are close to a money source. Ibu Ucum from *Rawabunga* is not only known in her own community, but also in other communities.

I become famous in lots of places. One day, a washing machine technician, I called him just saying, 'Ibu Ucum' (he told me) 'Yes, I went there yesterday, if I'm not mistaken RW 04? I was looking for the house, nobody knew, then I told them 'Ibu Ucum', they told me right away, easy. Last time I was looking for another house I couldn't find it, I asked them 'Pak RT16' (but) nobody knew. I asked them then where Ibu Ucum's house is, they could tell me where it is. (Ibu Ucum, PKK cadre at *Rawabunga*)

A similar experience was told by Ibu Jubaedah. Aside from getting additional knowledge from the PMTCT program, she believes she has had many other advantages from being known by people in the community (as seen in her quote at the beginning of this chapter).

For some people, being well known by the people in the community is not crucial; but for PKK cadres, being well known is important because it means that they have a better chance of participating in similar activities. Ibu Supriati says that participating in the PMTCT program has improved her knowledge; the community knows her as a person who has knowledge about mothers' health, and as a result it is easier for her to follow similar activities in her community.

...The advantage (is) a lot, indirectly we learn. If I want to get involved in an activity it's easier, having that kind of activity is not easy, everything has to be prepared, including how the people work in the field, it has to be prepared. About PMTCT, what we know is about pregnant women, (we get) training, so we know the techniques. I have been trained in those techniques. By having the technique...it's like...it's how YPI does it... Of course our relationship with society is better. People say, 'Madam, is there anything else? Is there any test for pregnant women?' People will come to you. First of all, this is the advantage, firstly, we get information, secondly, we can know directly the characters of the pregnant women: some are afraid to be open, some are not; if one is pregnant, she'll be, 'I want to get tested...

even if I'm not pregnant or I don't want to get tested'... Something like that. I understand people better. It's also easier if we involve other information. (Ibu Supriati, PKK cadre at *Kampung Bali*)

Access to other activities or programs means access to more work that can bring financial benefits, as Ibu Mumun said above. As a person who is considered to have good knowledge about health, she is also involved in activities for a vasectomy program at the sub-district level, as well as an HIV/AIDS training program. Aside from Ibu Mumun, Ibu Ucum from *Rawabunga* is also involved in an HIV/AIDS training program administered by the D Plus Foundation that mobilizes commercial sex workers.

I didn't know anything about pregnant women, I didn't, but now I know. 'It is money, a lucrative project. Don't let them give you little money', Pak RW (the head of the Community Association) said. Sometimes from D Plus, D Plus Foundation. The other time we had to collect PSK (sex workers). They asked for fifty commercial sex workers, there are around thirty of them. They get some transportation cost and an HIV test. They know that my work always has something to do with HIV. (Ibu Ucum, PKK cadre at *Rawabunga*)

Ibu Rimayati from *Johar Baru* village has even become a well known person in DKI Jakarta province after she participated as a representative for *Johar Baru* village in a national meeting in Surabaya. Ibu Rimayati shared her experience as a cadre that has helped YPI with its PMTCT program. Below is what she shared with other PKK cadres:

I would like to thank *Yayasan Pelita Ilmu* (YPI) that chose me as their representative in Surabaya. The head of PKK cadres in *DKI Jakarta* was present. I was not so confident because I had never flown before. The flight was at 10:15 and I was brought to Hotel Shangrila. I was a representative and spoke there, other speakers were from *Sidoarjo*, another one from *Tulung Agung*, another one from *Surabaya*, from *Tulung Agung*. The head of the PKK from *Tulung Agung*, from *Surabaya*, the wife of the governor (were there). I wasn't so confident about it. I even had a toothache and couldn't talk. I was the first speaker. I only talked casually, but the wives of the governors were keen and they would like to know about my activities. I talked about my experiences in DKI (Jakarta province) and they were enthusiastic. I talked about the HIV problem, I thought I was only a cadre and wouldn't get any response because the other speakers were governors, good looking people with nice clothes, they came by cars and I was just...different. But, there was

a response from the Minister of Women's Empowerment. They asked for my phone number and the phone number of the PKK of East Jakarta. She asked me to be a speaker at the Ministry of Women's Empowerment. I'm not sure because I am facing important people who have a higher power. I'm just a cadre, you know. I just go from one place to another. They sometimes tell us that PKK means *Perempuan Kurang Kerjaan* (women with more free time). Also, there was somebody from KPA (*Komisi Penanggulangan AIDS* - the National AIDS Commission) at the national level. She asked us to come, especially at the national level because PKK cadres can socialize HIV/AIDS and tell people the danger of it. So, she planned to talk to the head of the National PKK about this PKK program to be able to socialize HIV prevention. (Ibu Rimayati, PKK cadre at *Johar Baru*)

The above story describes how the PMTCT program can change the life of a PKK cadre, from a helpless person to be a person who is empowered both in family life and in society. Yet, voluntarism is not only undertaken for empowerment reasons. As Walt says (1988), for women it can also be an excuse to take a break from domestic chores and the routines of being a housewife. It is important for PKK cadres to have social activities outside their domestic activities, and in the process they can also gain social prestige from the community, as mentioned in the following quotes from PKK cadres in an FGD:

I think if we are committed, although I have a lot of chores to do at home, I still come when I am asked. I don't think anymore whether it costs me or not.

I just like it, being together, sharing each other's stories. It's better than talking about other people. For me I'm taking an hour break from the kitchen... My life is just around the kitchen, my children, and husband.

We get it when there is training, the transportation fee. But sometimes we don't think about it, as long as we are happy and can make friends, we don't think about the money. I think we have a high social treasure. If we're outside home, we can meet friends, get refreshed.

Ibu Sucasih admits that a social activity like the PMTCT program has had a very positive impact for her, because not only does she gain experiences from outside her home where she usually does her domestic routines, but these different activities have given her a positive spirit to take care of her health.

I'm now fifty. If I do nothing, just stay at home and don't move, I won't be healthy. I'm getting older so I have to keep healthy. How? By following different activities. It will improve my knowledge and encourage relationships with other people. If I do nothing I know nothing. That's why I keep myself busy with this kind of activity. (Ibu Suciasih, PKK cadre at *Pasar Minggu*)

Community work in PMTCT does not only bring material benefits for PKK members as individuals and to the PKK as an institution because of the voluntarism of PKK cadres, furthermore these activities have an empowering influence on the cares' personal lives. However, the cadres feel that the activities are more for filling their leisure time with other women who are in the same boat, than to enable them to fulfil their desire to be a volunteer.

5.D. Preserving the Benefits

It is not a simple task for PKK cadres to be able to preserve the benefits they get from PMTCT activities. PKK cadres must be able to maintain their social status as housewives, and cannot neglect their domestic jobs. It is very important for them to maintain their image as devoted mothers. For this reason, PKK cadres normally become active as voluntary providers only once their children reach school age, which means that there is less demand for childcare at home. Here is what one mother said:

I followed the PKK cadres who also went to weigh, I was called a non-active PKK member. It's because sometimes I joined, sometimes not, I didn't fully give 100% service because my children were small. I have become very active since 2000, since I have been free, my children work already. The oldest graduated in 2000. I am active until now. (Ibu Suciasih, PKK cadre at *Pasarminggu*)

In addition, PKK cadres also have to get permission from their husbands to go out of the house to do voluntary work. Therefore, they must ensure that the domestic work is done before leaving home.

Thank God, my husband (gives permission). Right before that we ask for permission first, 'Can I do this activity?' Then he supports me. (Ibu Fitri Handayani, PKK cadre at *Johar Baru*)

Still, support. The important thing is I am not leaving the household chores. My husband comes home in the afternoon. When he comes home, I am at home. The kids are at home. Sometimes I go in the afternoon, sometimes in the morning. (Ibu Ramli, PKK cadre at *Cileduk*)

When I have to go in the morning, I have to cook before leaving. After everything is ready, I can go out. (Ibu Ucum, PKK cadre at *Rawa Bunga*)

PKK cadres have to be capable of describing PMTCT in language that the pregnant women can understand, so that the women will voluntarily want to visit the mobile VCT. While doing so, the PKK cadres must also maintain their image as devoted mothers. If a PKK cadre fails to explain the mobile VCT well, the pregnant women may not want to participate. As a result, the cadre will not get any money, as the money received depends on the number of pregnant women they bring to the mobile VCT. Considering this, it is fascinating to see how PKK cadres, by using the existing network and trust in the organization, can persuasively approach and explain to the pregnant women why they should voluntarily join the mobile VCT. It is clear that the women have to go voluntarily and without force. This is really a challenge for the PKK cadres.

Barnett and Whiteside (2002b, pp. 7-8) state that one of the limitations of household studies on HIV/AIDS is that communities and households may not have the same perception as the researchers of the importance of HIV/AIDS studies. They cite one research study in Zambia as an example: in an area with high HIV prevalence (14,8%), there was still almost no link in people's minds between HIV/AIDS and child mortality, nor with the value of children or fertility; HIV/AIDS was not seen as a major problem by the majority of people, despite a general recognition of it as a worrying disease. If in a country with high HIV prevalence such as Zambia people do not feel it to be a problem, it is hard to imagine why people would feel differently in a low HIV prevalence country such as Indonesia. Unlike Zambia, HIV prevalence in Indonesia is only 0.2% among the reproductive age population. In the Indonesian context, HIV/AIDS is not an emergency situation, and the government has not recognized it as a major problem. The majority of people do not even have any knowledge about HIV/AIDS. In fact, it is seen as a highly stigmatized and embarrassing disease whose existence is feared. This matter has a big influence on PKK cadres when they introduce PMTCT to pregnant women.

Most of the time, PKK cadres do not place HIV/AIDS at the fore when they approach the pregnant women. Usually, they treat mobile VCT as a part of mother and child health, and leave the information dissemination about HIV/AIDS to YPI counsellors, who are considered more competent in explaining it. This is the easiest

and the most frequently used method, because the roles of the PKK cadres in *posyandu* are very much related to mother and child health. In an FGD, the cadres told me:

I just told her that her health and her baby's would be checked, whether they're healthy or not. If you want to continue, just go ahead, you can later register with this person, at a certain time. Maybe it's better to let them know. The decision is the counsellor's...

I made it clear, it's to prevent, but I didn't tell about HIV right away, only (that it is) to see whether she has a disease and it has to be done by having a blood sample test. So, if your blood sample is taken, it depends on you. You have come already and to know whether you are healthy or not, you can talk to the counsellor...

I would just tell them, but don't tell them about the blood sample test, don't tell them either whether they can or can't. 'You will get information on pregnant women, the Family Planning Program service, so you are invited to come to the RW 09 on the 22nd. Yes madam, I want to come', and they really came. After being explained about HIV, they would be called one by one by the counsellor...

Some hardly even tell the pregnant women that there will be a blood sample taken for an HIV test. This method includes a little manipulation, because if they did tell upfront about the HIV test, much fewer pregnant women would voluntarily participate in the mobile VCT. One of the PKK cadres from *Pasar Minggu*, Ibu Suciasih, said that she never informs the women that there is an HIV test because then the pregnant women would refuse the invitation to come to the mobile VCT:

I told them like that but I didn't tell them their blood samples would be taken. I don't because they might refuse. I told them, 'So, there will be an HIV test. There will be somebody asking you, just listen to me, you will be called one by one, your baby will be checked whether he is healthy or not'. So, I told them it's a test for mother and baby's health, I didn't tell them their blood samples would be taken. I'm afraid they would refuse. Later on, when there were people from the district area giving the training, one of them said, 'Could I take your blood sample? It's up to you whether you want to or not, it's ok! But most of them would refuse. The first time with the PMTCT all of the thirty people wanted to get their blood sample taken. The second time the training was slightly different, as if the women were afraid and said,

'My blood sample was taken last time, the other person told me it's ok if I don't want to get my blood sample taken'. So, with the second one, there were a lot who didn't want it, only some wanted to. I even had to tell them to let their babies be checked, so if they have diseases, it can be treated. They refused by saying 'I'm healthy, my blood sample was taken'. (Ibu Suciasih, PKK cadre at *Pasar Minggu*)

Some cadres lure the pregnant women with promises of free medication, food, or transportation fees as a benefit of attending the mobile VCT service. It turns out that free medication interests the pregnant women due to the high price of medication for pregnant women. In this case, they do not mention HIV either.

If we invite her just like that, she has to consider it first. But, if we ask her softly, you know a little bit luring, we lure them to make them come, especially if there's milk. The blood test is free. They may be interested because firstly it's free, secondly they don't have to pay anything, and they get milk when they come back home. They should get transportation fee so that they don't have to think twice. (Ibu Slamet, PKK cadre at *Pasar Minggu*)

It is not only a free pregnancy check but also a free caesarean section that is offered if a woman is found HIV positive. Caesarean sections are quite expensive in Indonesia, costing between 5-20 million rupiah. Nevertheless, there is a growing trend for caesarean sections as it is considered easy and painless. One of the PMTCT counsellors has said that some of the pregnant women participating in the mobile VCT hope that the test will be positive so that they will get a free caesarean section. To attract the women's attention, Ibu Suciasih sometimes uses this approach:

I told her she didn't need to pay. If you go to a midwife, your husband has to pay. With this, you will be tested whether you have a disease and if it's so the baby has to be born with a C-section, it's free. But I hope all the women tested are healthy. I told them so. If they're sick, it's also a scary thing. 'I want to go then...I get transportation fee, right?' I told them they get it, there would be snacks too. They just need to sit down. They wanted to go. In my opinion, you have to tell them like that. Even some of them would ask me later 'Why don't you ask me to go now?' (Ibu Suciasih, PKK cadre at *Pasar Minggu*)

Sometimes the cadres have to discuss the HIV test when the pregnant women want more explanation about the purpose of the invitation. However, they do not treat HIV/AIDS as a dangerous disease but as a disease whereby further care is

guaranteed, as if it will not be a big problem if the woman has HIV. This is how Ramli from *Cileduk* explained it to one of the pregnant women:

About this HIV, if you have your blood tested, you will be given counselling with a counsellor, you will be tested. Whether the result is positive or not, it's only you who will know it, not anybody else, except the tester and you. Then, when it's known that you're positive, the treatment will be taken care of by the YPI Foundation. So, you won't be left alone. You will be taken care of and assisted. If you deliver the baby, the YPI Foundation will help. If you need a C-section, you will be helped as well, at all, until your baby is not infected. For a year, you will get formula milk. For those infected... Just come, you get a snack, transportation fee. When you have your blood sample test, the result, you will get another transportation fee. (Ibu Ramli, PKK cadre at *Cileduk*)

A similar opinion emerged in a discussion among PKK cadres in an FGD:

When I was looking for the pregnant women, I would tell them that we would like to have a training for pregnant women, to take care of their health, but also tell them about HIV/AIDS... So, I was informed before, but we gave the information about the training and automatically they wanted to know more. They were also told there would be a blood sample test and counselling. 'So, they won't force you, if you want to get a test, go ahead, as long as you have had counselling before that, have had your questions answered'. Whether these pregnant women want this or not, we can't force them... But the HIV/AIDS matter is still informed. If I didn't tell them beforehand, I'm afraid they would be disappointed when they come, they would be unsure and take a step back. It's better to be firm, direct, so when they come, they're ready to follow the HIV training. So, I've got a different method.

It is interesting to see that the cadres also treat HIV/AIDS as a disease of depraved husbands as a means to approach the pregnant women. By using this approach, they try to emphasize the domestic roles of the pregnant women as devoted wives who have husbands who are cheating on them. They approach the pregnant women by treating them as innocent victims, telling them that HIV can be caught from their partner. By doing this, the pregnant women may feel that if they are infected, it does not mean that they are bad, but merely it is because of their partner's behaviour. The cadres do not acknowledge that the women might be pregnant because of their own high risk behaviours. Ibu Mumun from *Jati Bunder* and Ibu Supriati from *Kampung Bali* told me what they usually say to the pregnant women.

I usually explain like this: 'About HIV, we're concerned about the baby. So, before the baby is checked, it's better if the mother is checked, maybe you get infected from your husband'. We never know if her husband is infected, so we should prevent it. 'Oh OK', she said. 'You don't know from the appearance, inside he may have bacteria or viruses that we don't know/ Maybe you're right. I want to join then!' It's appeared that these women want this. It's never difficult to convince them. There will always be a lot of them because there are a lot of IDUs there; especially the target location is the slum area. If we tell them about HIV in the first place, they may be reluctant, so it should be explained later in the training. It will be explained later anyway, I'm not a doctor. I'm no expert. I just have to search for the pregnant women. If they want to ask further, there's a doctor, a midwife. (Ibu Mumun, PKK cadre at *Jati Bunder*)

At *Kampung Bali*, everybody knows that *Kampung Bali* is famous for its drugs... First of all, the training for the pregnant women. If later on people ask what it is for, we can deal with it face to face. We talk carefully, confidentially, because these people are, in my opinion, they have a risk to their confidentiality. About their behaviours, you know... *Kampung Bali* used to be a 'drug' area, there are also a few people who have died here, they may have the 'history'. 'Maybe your husband is like one of them, your child has to be healthy'. (Ibu Supriati, PKK cadre at *Kampung Bali*)

The strategy to blame the husband seems to be an effective one. The pregnant women often confirm the possibility that their sexual partner may be infected with HIV, knowing that sexual relationships outside marriage are much more permitted for husbands, but not for wives, as told by Linda from *Ciledug* and Hafizah from *Tajur*. Linda also wanted her husband to be tested.

If possible, my husband is also checked because he's the one who likes to flirt. (Ibu Linda, pregnant woman at *Ciledug*)

I'm worried whether the result is negative or positive. *Alhamdulillah* it's negative. But just because it's negative, doesn't mean we have to ignore it, we have to be careful. You never know, maybe from our husbands. (Ibu Hafizah, pregnant woman at *Puskesmas Tajur*)

It is interesting that almost all the women in the PKK agreed on the mother's role as a 'good woman', revealing the positive power which the domestic identity of a mother gives for women.

5.E. Discussion

Although some references say that volunteers are the ideal to which most community health workers aspire, the reality is that most governments or NGOs give rewards to the community workers, either as a salary or an honorarium. Programs that work on a completely voluntarily basis or on community financing show high attrition rates (Walt, 1988). In YPI's PMTCT program, PKK cadres do not work on a completely voluntary basis; YPI provides some money to attract cadres and pregnant women to participate in this activity. PMTCT can in fact bring quite a significant remuneration for the PKK, not only as individuals but also for the benefit of the PKK as an institution. This remuneration has made the mobile VCT possible. However, the remuneration can only be accessible to the cadres if they are involved in the PKK organization; and as a mothers' organization, the PKK requires of the cadres the bio-social identity as mothers. Thus the motherhood identity is important for the PKK cadres in order to get the remuneration from the PMTCT project.

As most of the cadres have no job and limited education to find decent work, the remuneration becomes a good income that may increase their status in the family and the community, especially for those with more limited education or jobless husbands. The involvement of the cadres in the PMTCT program activities may also lead them to have access to other jobs that will bring further economic benefits. PMTCT may not actually empower the PKK cadres in terms of being able to prevent HIV/AIDS in their community, especially as the epidemic is not significant enough to be considered a collective social problem in Indonesia. However, to some extent PMTCT may domestically empower the PKK cadres.

Empowerment is seen as a process of helping disadvantaged groups and individuals to compete more effectively with other interests, by helping them to learn and use their skills (Ife & Tesoriero, 2006, pp. 85-86). Mikkelsen (2005, p. 243) states that a source of women's empowerment is her participation in the modern sector and her lifetime exposure to employment. The empowerment of women is usually achieved by getting women out of their domestic domain and placing them in the public domain so that they can attain equal rights as men. The public domain is very much related to the economy, and economic empowerment can only be reached by having a good education and a decent job, which certainly can only be obtained outside the domestic domain.

In PMTCT, the empowerment brought to the PKK cadres exists in the domestic domain. The involvement of the PKK cadres in the PMTCT program does not place them outside of their domestic domain; indeed, the remuneration they get from involvement may increase their motherly role, as one who is responsible for her family's welfare. Aside from access to resources, PMTCT also brings access to economic activities. Through the mobile VCT training and activities held by YPI, the

cadres become known in the wider community as persons who have knowledge of maternal and child health, including knowledge of HIV/AIDS. Their participation in the training gives them good access and a channel to participate in similar activities, even outside of their own community, although they still perform as community workers. They can also benefit from these extra activities financially. With the extra income they are able to support their family better. PMTCT has given the PKK cadres social, economic, and identity empowerment in their domestic domain, as devoted wives and protective mothers.

Access to resources and economic activities does not necessarily mean that one has power over those resources or economic activities. Power over resources includes the effective control of their use and distribution (Ife & Tesoriero, 2006, p. 72). PKK cadres admit that the money has significantly influenced their economic life. A woman's work is often invisible in society since women are usually involved in work which does not make money and/or is not done outside the home (Saptari & Holzner, *Perempuan Kerja dan Perubahan Sosial: Sebuah Pengantar Studi Perempuan*, 1997, pp. 14-20). Even when they bring home money which is quite significant, women's work might still not be appreciated. Maria Mies, as quoted by Suryakusuma (1996, pp. 101-102), argues that married women in Indonesia are socially defined as housewives, dependent for their sustenance on the income of their husbands, regardless of their actual contribution to their family. In other words, as housewives, women provide free domestic labour, and are assumed to provide their labour without expectation of prestige, power, or remuneration (Parker, 2001, p. 57; Suryakusuma, 1996, pp. 101-102). Mostly, the money is used simply to add to their pocket money for buying snacks or to go for outings with friends. In the case of Ibu Mumun, the money was used as capital for her husband to start a motorcycle taxi business, and not for her to start her own business. In so doing, she loses some power over the use of the resources she has earned. PKK cadres have access to more economic activities due to their participation in PMTCT, as they become familiar to a wider circle, and thus they have a chance to do other activities that generate money. Yet, they do not have control over the mechanisms for these activities since the 'work' they do is regarded as voluntary.

Access to resources and economic activities has already proved significant for the PKK cadres and therefore needs to be maintained. The PKK cadres have to maintain their bio-social identity as devoted mothers because it gives them access to resources and economic activities through the PKK. However, this identity can be destroyed by their engagement in PMTCT activities as it is part of an HIV prevention program; for a shameful, dirty disease that is regarded as affecting badly behaved people. The PKK cadres must therefore maintain their identity as 'decent mothers' as part of their role in PMTCT. Thus, in introducing PMTCT to pregnant women, they have a tendency to blame high risk sexual behaviours on husbands rather

than explaining the HIV risks during the pregnancy. Aside from having limited HIV knowledge and social skills when approaching the pregnant women about PMTCT, I also saw that the PKK cadres believe that they have to maintain their PKK identity. The trust the PKK cadres have from the pregnant women is based on their identity as devoted wives and responsible mothers. This identity has been socialized very effectively in society. Considering that the pregnant women are also themselves PKK members, though not actively involved as community cadres, both the women and the PKK cadres have to respect each other's image and identity. Thus both blame husbands for their high risk sexual behaviours, while at the same time placing the responsibility for the health of their unborn babies onto the women. This permissiveness towards men leads them to be considered as the main cause of HIV/AIDS infection among housewives, the latter of whom are regarded as innocent.