This research was supported by the Governments of Australia and Indonesia and was conducted in consultation with the civil society organisations involved. We would like to thank these organisations and the Australia-Indonesia Partnership for Women’s Empowerment and Gender Equality (MAMPU) for their support, as well as all participants in the research, in particular the countless village women who shared their experiences and views with us. The views expressed in the analysis are those of the authors alone and do not necessarily reflect the views of the supporting governments or organisations. Future iterations of this case study might reflect further research and analysis over time. For a more extensive and comparative analysis of the case studies, Diprose, R., A. Savirani, K.M.P. Setiawan, and N. Francis, 2020. Women’s Collective Action and the Village Law: How Women are Driving Change and Shaping Pathways for Gender-inclusive Development in Rural Indonesia. The University of Melbourne and Universitas Gadjah Mada. https://doi.org/10.46580/124326. Available at: www.mampu.or.id and www.demisetara.org.

Srikandi, or Sri as she is usually known, is a forty-eight-year old housewife and ‘Aisyiyah cadre. Twenty years ago, Sri moved to the village from an area on the outskirts of Cirebon city and now has three sons. The hilltop hamlet where Sri and her husband live is the most underdeveloped area in the village, and road infrastructure was only completed under the leadership of the Village Head (or *kuwu* in the local language) who was elected in 2008.

Despite the many changes led by this Village Head, Sri still lives in a community with low levels of education, limited livelihood opportunities, and ongoing sanitation and health problems. Many villagers work and use the river, although some also channel ground water from rice fields to their homes. The challenge of accessing clean water is exacerbated by the prevalence of infectious diseases, such as leprosy and tuberculosis, and non-communicable diseases such as cancer and high blood pressure.

Sri, who finished her formal education in middle school, began to be interested in becoming a ‘Aisyiyah cadre in 2008 on the suggestion of the Village Head who had also previously put her forward to join the village’s Posyandu. The Village Head (Pak Kuwu), who is similarly a migrant from another region in Cirebon, moved to Sri’s area after marrying the cousin of Sri’s husband, and got to know her, demonstrating the importance of family networks. However, Sri’s selection was not solely due to family connections, but rather on the capacities, knowledge and experience she had from her work with the maternal and child health group (Posyandu) and other community organisations.

“In 2008, I became a cadre. I think it was Pak Kuwu who selected me. He said I am an active person, active and well-intentioned. Because of Pak Kuwu, I became a cadre. I was a Posyandu cadre first.” (Sri, Cirebon research village, 25 February 2019)

Before she was chosen to be a village cadre in 2008, Sri was active in the primary school committee and photoshoots for local public health announcements.

“He said, if you persevere, your plans can come to fruition. He said, it appears that I am an active person. ... I used to be on the school committee too in 2006 [and] I was filmed [for community service announcements]. When I was in the commercial, I had to say, ‘Assalamulaikum, I want to report that my chicken has died of bird flu.’” (Sri, Cirebon research village, 25 February 2019)

Shortly after being selected as Posyandu volunteer, Sri began to be involved in more community work, including the PKK and at the local health centre (Puskesmas). Before ‘Aisyiyah’s Cirebon district regional leaders started working in the village, Sri worked as a Puskesmas tuberculosis cadre. This gave her the opportunity to also appear in other films made by the United States Agency for International Development and the Nahdlatul Ulama Health Foundation. In both films, Sri demonstrated her high level of concern toward those in her community infected with tuberculosis.

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In 2014, the Village Head recommended that she become an ‘Aisyiyah reproductive health cadre. Unlike her appointment to the Posyandu in 2008, this appointment was made by a temporary administrator in place of the Village Head in the lead up to the election, who was not related to Sri. This recommendation responded to ‘Aisyiyah’s Regional Management’s request to the Village Head to recruit village women for their program.

In her new role, Sri began to educate the local community on reproductive health. She also recruits cadres and coordinates with Balai Sakinah ‘Aisyiyah, which is a grassroots women’s group which, amongst others, focuses on reproductive health education for poor women. Sri reflects that initially that she did not fully understand the terms for sicknesses or treatments, nor the symptoms of illnesses and how to respond to them when she worked at the health clinics. Yet, through her involvement with ‘Aisyiyah, Sri acquired new knowledge, particularly regarding women’s reproductive health.

“At the start I didn’t understand, I just weighed babies without understanding [about health]. Sometimes I went to training sessions for the birth preparation program and also didn’t understand. If I’m not wrong ‘Aisyiyah arrived in 2014 […] It was reproductive health that initially I didn’t understand. After there were regular Balai Sakinah ‘Aisyiyah meetings, I also continued to ask what is ‘reproductive health’? At first, I did not understand what cervical cancer was, I only knew what I saw on television. After participating in programs from ‘Aisyiyah MAMPU, then I knew that cervical cancer is very dangerous.” (Sri, Cirebon research village, 25 February 2019)

As a health volunteer without a wage or reimbursement for transport, Sri often educates women in her village about reproductive health. She also visits patients to inform them about diseases and to encourage them to seek and maintain treatment. Sri’s family experience motivates her to be a health volunteer in her community. Sri’s father suffered with a debilitating cough for years until his death without knowing the cause of his illness. Sri carries this memory and traumatic experience with her. When Sri meets someone who is unwell, she often imagines that she is helping her father. This empathy is her primary motivating force to volunteer and to always ask and find out more about illnesses and how to treat them. Sri regards her work as a cadre as her moral responsibility.

“I don’t know, it is just like I have, I feel like I have that responsibility. [If] you have an obligation, you feel it, if you have not carried it out, the feeling is like curiosity. Having a responsibility … So, we are cadres, even though there are no salaries [but it feels], that means I have been chosen [so] I must be a charitable person. Cadre, it is a shortening of charitable activities.” (Sri, Cirebon research village, 25 February 2019)

Sri’s sense of empathy, which has been supported by ‘Aisyiyah’s district leaders, has strengthened her resolve to work with the community health centre. After she became a cadre, her enthusiasm for knowing about illnesses and diseases and sharing this information in the community grew. Sri also began contributing to many other health clinic programs, including for midwives, palliative care, men’s awareness of maternal health, gastrointestinal health, non-communicable illnesses, and leprosy. She also plans to become a cadre for aged care and mental health as part of a new program in the village.

Her work with the local health clinic is closely connected with her work as an ‘Aisyiyah cadre. The knowledge she learned through ‘Aisyiyah programs made her even more committed to want to visit residents. Without an allowance for transportation, she visits unwell people in her area. Sri has become a contact person for women who have health concerns, she talks to local women, examines women who are worried about growing lumps in their breasts and encourages them to go to the local health clinic or the city hospital. Sri travels around her village every day on the minibus or is driven by her sons to the village’s midwifery centre (Pondok Bersalin Desa, Polindes) and the health clinic. Sri even delivers prescription medicine to local women and ensures that patients take medications in line with instructions.
According to a former village midwife, Sri is a role model:

“For everyone she is the do-er who wants to care about the environment, about the groups who are around here... Let alone being a Posyandu cadre, like Mrs Sri, sometimes the people [in the research village] are really difficult, fear is great here. A feeling of fear that ‘oh no, I am not an educated person’ still exists. But as she is already used to gathering in the village like that, she wants to learn and she really wants to know, so she motivates herself to be strong.” (Midwife subdistrict coordinator, Cirebon research village, 25 February 2019)

The community has increasingly recognised Sri’s dedication to her work. In 2018, unbeknownst to her, she was elected to be the head of her Rukun Warga in a meeting attended only by men. Sri was also selected as one of sixteen inspirational women in Indonesia to the International Women's Day event “Listening to Grassroots Women” (Mendengarkan Perempuan dari Arus Bawah) which was opened by President Joko Widodo at the State Palace in Jakarta. At this event, Sri was the sole woman representing Cirebon Regency and ‘Aisyiyah. At the end of 2019, she was also recognised at the district level and awarded second prize in a competition on creating social welfare. These awards are the result of Sri’s hard work, commitment, and dedication to sharing knowledge. They also are not Sri’s ultimate achievement, but instead have made her even more enthusiastic to work for women in her village and the wider community. Sri is committed to always inform others about health and healthcare and to support women in her village to deepen their understanding cervical cancer and breast cancer, as well as family planning. She hopes that the care she shows her community will increase the awareness of health issues and standard of healthcare in her village.

2 A small area and division of local government under hamlet (dusun) and above Rukun Tetangga.
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