
Absence and Ambiguity: Documenting the Moment of Birth in East Lombok, Indonesia

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Abstract: Birth registration has become prominent among global initiatives to “leave no one behind.” Despite Indonesia’s efforts to implement a national registration program, low-income rural families in East Lombok do not choose to register their children in significant numbers. By closely examining the documents and documentary practices linked to childbirth, this article unpacks the ambiguous meanings the Indonesian government and the Sasak of East Lombok hold around childbirth. Sasak family engagement with existing birth rituals highlights the exceptional convergences required to create documentary links between place, person and nation.

Keywords: birth registration, childbirth, Indonesia, record of birth, Lombok

Résumé : L’enregistrement des naissances est aujourd’hui l’une des plus importantes initiatives mondiales visant à « ne laisser personne de côté ». Malgré les efforts déployés par l’Indonésie pour mettre en œuvre un programme national d’enregistrement, peu de familles rurales à faible revenu de l’est de Lombok décident d’enregistrer leurs enfants. En examinant de près les documents et les pratiques documentaires en lien avec l’accouchement, cet article analyse les significations ambiguës qu’attribuent à ce dernier le gouvernement indonésien et les Sasak de l’est de Lombok. La participation des familles Sasak aux rituels de naissance actuels met en évidence les convergences exceptionnelles nécessaires à la création de liens documentaires entre lieu, personne et nation.

Mots-clés : enregistrement des naissances, accouchement, Indonésie, certificat de naissance, Lombok

Introduction: Ambiguities in Birth and Belonging

Heka had been married for just over a year when he found out his wife was pregnant. Elated but anxious, he responded by taking on debt with a local money lender, registering with a migrant broker and leaving for work in neighbouring Malaysia. Before even telling anyone close to him of the pregnancy, he had already signed a three-year labour contract to provide for his growing family. The contract spanned the pregnancy of his wife, Leni, the infant’s birth and the first two and a half years of his child’s life.

Heka’s migration is a common response among new Sasak husbands in low-income village communities in contemporary East Lombok, Indonesia. A long tradition of migration, fuelled by poor local prospects for work and a valued tradition of leaving home to seek wealth and experience elsewhere, has led to many men taking up labour contracts in Malaysia when their wives become pregnant (Mantra 1999; Ball, Butt, and Beazley 2017). Many young Sasak brides give birth to their first child with their husband away. New mothers navigate decisions about birthing strategies, location of birth and how to obtain their newborn’s birth record and birth certificate without their husbands present. In this conservative Islamic society, women such as Leni have little engagement with government institutions. As a result, pregnancy, birth and postnatal care often take place largely outside the parameters of state involvement. Leni, attended by her younger sister and a midwife, gave birth after Heka had left for work. She never sought to record the infant’s birth, and her female relatives did not do so in her stead. When the infant died at the age of three months, in official documentary terms, it was as though her child had never been born.

An unregistered child such as Heka and Leni’s is viewed as a problem by the United Nations Convention on the Rights of the Child, which confers on every child the right to acquire a nationality: “The child shall be

registered immediately after birth” (United Nations 1989, article 7; see also United Nations Children’s Fund 2013). Birth registration also has an important place in the UN’s (2017) Sustainable Development Goals, established in 2015, which promote linking birth registration to access to services such as subsidies, education or health care to “leave no one behind” (Dunning, Gelb, and Raghavan 2015). Indonesia supports¹ these development ideologies and has, since 2012, sought to improve rates of birth registration. Nonetheless, birth registration is inconsistent and remains as low as 12 per cent in many rural, low-income Indonesian communities (Australian Indonesian Partnership for Justice 2014), including the East Lombok community where Heka and Leni live (Ball, Butt, and Beazley 2017). These low rates are notable given Indonesia’s staunch efforts over the past half century to bring pregnancy, childbirth and early childhood health under state management. The state has promoted village birthing centres, trained government midwives and delivered prenatal and postnatal care at small mother and child health centres (*Posyandu*) at the village level across the country (Stein 2007). Obtaining a record of birth from a birth attendant and registering the birth at one of Lombok’s civil registry offices should be easy. However, the infant’s short, unregistered life described above signals major slippages in practice.

This essay narrows in on one specific feature of birth registration in Lombok: the role and nature of birth documents themselves. In Indonesia, the person attending the birth is expected to sign a printed form, the record of birth. This record of birth, proof of identification of both parents, and a copy of a family census form (*kartu keluarga*) are the four documents required to issue the newborn an official Indonesian birth certificate at a civil registry. The record of birth is a “foundation document,” that is, the first step toward being recognised as a member of a state.² As Roseneil (cited in Seo 2016) argues, a birth certificate is not about citizenship but about documenting and counting a life where what counts is the “shared natalities” of all others also born on the national soil. Yet Heka and Leni paid no attention to registering their infant’s birth, despite the opportunities obtaining a certificate would seem to offer in terms of shared natalities with their neighbours and fellow residents of Indonesia. Their disengagement with documentation can shed light on the politics embedded in the seemingly neutral certificates and documents that are expected to accompany the birth of a newborn.

In exploring the role of documents in birth, this essay problematises the naturalised assumption that the presence of a piece of paper at the moment of birth,

and the act of documenting the moment of birth, is an unobtrusive and unproblematic form of governance. Lambek (2013) has argued that the events surrounding birth make the infant simultaneously a member of both family and state. Documentation by means of a birth certificate is basic to the constitution of personhood and relationality, he argues, no less so than birth rituals: “When a birth registration is signed, it is a matter of both kinship and state” (Lambek 2013, 257; see also Seo 2016). I build on Lambek’s position by drawing on Hull’s argument that documents can be pivotal in instantiating social realities. Documents are not neutral. The appearance of the “relative autonomy” of documents (Hull 2012, 5) means birth documents can be naturalised simply as records of the social fact of birth. But the production of birth documents, their contents, how they are used, and how they are experienced through procedures, techniques, aesthetics, ideologies, negotiations and contestations tell a more complex story about the relationship between kinship, state and childbirth. As material objects, birth documents embed local histories, political conditions, structures, and meanings about birth and life: they are “social network artifacts” (Hull 2012, 160), elucidating ambiguities and engagements that arise from the experiences and actions surrounding childbirth itself.

This article posits three interrelated arguments. First, it suggests that birth documents work to mask liminal features of childbirth. Given the importance of live, healthy infants for long-term state prosperity, the record of birth should be one of the most pivotal of all government documents and the one to be managed the most assiduously. Yet this essay shows the reverse is the case. Birth documents in Lombok are flimsy, hidden, ill-administered and easily overridden. I explore the meanings of the inconsistency between the importance of birth and the overall absence of birth documents through a description and analysis of documentary form and practice.

Second, this article argues that birth documents work as signs of government. Recognised government identity documents, associated with the legitimacy of the state, are widely used in various agencies, from health centres to voter registration services. The use of these documents links the piece of paper through several signs to systems of authority, to legitimacy and to belonging. Documents help construct persons and citizens. The signs and symbols embedded in birth documents – such as logos, fonts and colours – recur in other forms and across several settings. Documents become associated with particular types of people within the government, particularly government birth attendants. They link to

moral dispositions, particularly associations between choices around birth and larger values of the state (see Goebel 2010). Through a close scrutiny of particular features of birth documents, I draw out some of the values embedded in them.

Lastly, low rates of birth registration in Lombok suggest meanings are attached to the absence of documents. Parents regularly set aside obligations to register children, and strategic disengagement around getting a birth certificate appears to be a routine response. Strassler (2010) has emphasised widespread associations around *dokumentasi* (documentation) as a class of technology of record-making that has the capacity to produce new forms of knowledge that can lead to subjugation of state subjects. For many Indonesians, the social, embodied act of giving birth does not a priori come with meanings about the land on which the child is born, and they may resist obligations to participate in national initiatives. On the contrary, I describe how, for Sasak families, the creation of meanings around birth remains embedded primarily in ritual and local practice, with official documents by and large absent, and negatively associated with obligation and management.

After briefly reviewing the cultural and institutional contexts of pregnancy and birth within a Sasak community in East Lombok, I describe Indonesian birth documents. I focus on the procedures surrounding the document's issue, the colour and look of the document, the ideologies embedded within it, the actual use of it, and the negotiations around its presence or absence. A case study of a government employee then highlights how documents fail to render concrete a link between the site of birth, the physical act of birth, and a larger political abstraction. The cavalier, incomplete and disorganised role of the record of birth and its disregard in actual practice highlight the exceptional convergences that have to happen to create a documentary connection among newborn person, place and nation.

The Lombok Research

In two trips in 2014, I led a research team in three rural communities on the island of Lombok, in West Nusa Tenggara province, Indonesia.³ We collaborated with local stakeholders and village leaders to conduct a study about children, families and migration among low-skill, primarily undocumented migrant families. We conducted stakeholder workshops, participatory focus groups and in-depth interviews on current interventions into statelessness, birth registration and challenges for migrant families. I conducted 14 family interviews in which I interviewed a mother, a father and a child from a single family. In total, I conducted 34 interviews within 14

families. Because of migration, divorce, separation, death, disability and fostering, only half of the families were complete, with typically the father absent for work overseas. In addition, I carried out participant observation in two village settings, observing prenatal care classes, immunisation clinics, health education initiatives for young migrating fathers, and health centre activities. I also carried out systematic observation activities and in-depth interviews in village birth centres and at the civil registry in two county seats.

Lombok Childbirth Trends and the Elusive Record of Birth

East Lombok has remained the region of West Nusa Tenggara province with the highest infant and maternal mortality rates, at 110/1000 live births and 700/100,000 births, respectively. Perinatal mortality in the province, at 38/1000, is also among the highest in Indonesia (PATTIRO 2017; Sebayang et al. 2012). Since the 1970s, in a national effort to reduce mortality rates, paid government birth attendants have undergone nationwide training in hygiene, use of medical tools, and delivery techniques. As part of their work, they hand out a booklet called the *Women and Child Health (MCH) Booklet*, produced by various government agencies and given to women upon first registering for prenatal care. Government attendants also try to convince women to give birth in government birthing rooms built at the back of regional health centres. These rooms offer a bed with stirrups, access to running water, and the services of the attendant. Drugs, linens and emergency response measures are not included. Attendants further encourage mothers to bring their infants for postnatal checkups and immunisations.

The salary and benefits associated with government birth attendant work appeal to middle-class women, and they have embraced the institutionalisation of the profession. Typically, attendants enact moralities resonant with Indonesia's conservative ethos around marriage and childbirth (Stein 2007). Usually, they record names of pregnant women clients and their husbands, villages of residence, and due dates on a large chart outside the village birthing centre for public viewing. This public display of conformity to the state's reproductive objectives reinforces the potential disciplinary role of attendants and aligns successful reproduction with adherence to a prescribed health protocol.

In contrast with the idealised norm of using the services of government attendants, many of the Sasak families we interviewed were ambivalent about using these services and instead chose to give birth at home. The health of children is highly valued and ritualised in

Sasak society. Sasak manage the uncertainties of pregnancy and birth, seeking to protect infants from illness and dangerous environments during their early years through a series of complex rituals tied to fertility, ancestor spirits and travel to Mecca. Hay (2001) depicts the Sasak view of birth as a highly dangerous time in the life cycle where birth, the first seven to nine days after birth, and the years before circumcision (typically between the ages of six to ten) require the most careful ritual management. A woman's first pregnancy is considered especially dangerous, and rituals to manage danger begin when the pregnancy is announced. Respondents described a belly-washing ritual at seven months, a baby-naming ceremony at 7 days, and a religious ceremony, *dzikir*, or remembrance of God, 40 days after birth. The bodies of mother and infant are symbiotically entwined – the mother's actions can cause the child's illness, particularly if she lies down at any point during the first 9 days of its life. Sasak mothers mostly stay seated for those days, even if advised by government-trained midwives that it is all right to lie down and sleep (Hay 2001, 111).

While a government attendant may be sympathetic to Sasak ritual needs, no room is made for ritual within the structure of birth at the birthing station. The complexity of rituals and management of birth may be factors in the ongoing high use of local, non-government, midwives to assist with home births. The World Health Organization (WHO) (2015) claims that one-fifth of Indonesian women continue to use the services of local midwives and to give birth in their own homes, but these numbers do not reflect local patterns observed during our research, where all but 1 of the 14 women I interviewed had given birth to all their children at home. When women choose a home birth with a local midwife, they may invoke values of cultural safety that include local midwives treating women as embodied subjects rather than objectified bodies, and privileging physical contact as a healing modality (Bennett 2016).

In addition to having to navigate between two competing childbirth services, many Sasak families are not together during pregnancy, birth and postpartum. Migration is deeply entrenched within the region. Eastern Indonesia has not seen significant infrastructure and human resource development since decentralisation in 2000, and most of Indonesia's recent economic growth is concentrated in Java. Economic need has fuelled out-migration from the province of Nusa Tenggara Barat for several generations, with 44 per cent of the population migrating overseas for work in 2014, by far the highest rate of out-migration from Indonesia (Henstridge et al. 2013). The majority of families in East Lombok

have at least one family member migrating overseas (see Lindquist 2010, 2012; Mantra 1999). This long-standing migration trend has resulted in established cultural traditions, or a "repertoire" of coping (Coe 2014, 14; see also Chan 2017), within which Sasak families make sense of reproduction within the framework of their mobile and fragmented family lives.

One of the most striking findings from our research was a pattern of pregnancy and childbirth precipitating migration for the male head of household. In the 14 family interviews I conducted, 8 of the 14 fathers had been away during their wife's pregnancy or immediately following the birth of their child, and 7 of these 8 husbands had done this each and every time their wife had become pregnant. The cost of providing food and gifts for rituals around the birth of a child was mentioned by several fathers as an important factor shaping decisions to migrate. As a result of migration, fathers were not around to participate in the birth of their child, in clear contrast with health promotion messages that fathers should be more involved in pre- and perinatal activities. Fathers were also typically absent for the important 40-day infant naming ritual and were also not available for consultation or to find funds for medication if the child became sick. While the father is culturally expected to take a lead role in document work as the head of household, most were not available to take required documents to the civil registry to get an official birth certificate. The absence of fathers enhanced uncertainties and perceptions of danger for wives during late pregnancy and the early days after birth. Many young mothers responded to their husbands' departures by returning to their natal village to give birth at home, despite a patrilocal residence pattern that pressures women to remain in their husband's family compound.⁴

Systems in Lombok that tie birth documents to specific locales make it difficult for mobile, fragmented families to quickly and easily register their children at birth. Despite recent reforms, registration remains a labyrinthine process. Our study uncovered multiple reasons why families did not register children: parents anticipated hidden corruption costs, such as "cigarette money" demanded by the civil registry officer; parents spoke only Sasak and the civil registry office conducted its processes in Indonesian; parents lacked the confidence to interact with civil registration officers; parents were away during the 60 days after birth when registration is free; the registry office was located in an urban centre that was difficult and costly to get to; and parents could not afford to pay a broker to register children for them. Several of the reasons parents gave for not registering

children pertained specifically to documents: parents were not literate and could not read the application instructions or fill out the form; parents did not receive a letter or completed confirmation of birth from a government birth attendant or from a local midwife when their child was born; the parents' marriage was not legally registered and they understood that this was required as part of the application; and parents had no authentic identity documents for themselves (Ball, Butt, and Beazley 2017). As a result of these various factors, only 12 per cent of respondents we interviewed had an official birth certificate they could show us.

The following section unpacks documents used in birth registration to reveal how features of the documents can contribute to naturalising birth documents as an integral part of birth. At the same time, the materiality of the documents feeds into the disengagement and disorder around birth that the documents claim to organise and smooth over.

The “Foundation Document”: The Record of Birth

At the heart of the practice of birth registration is the record of birth. This is a form stating that a qualified person has viewed the actual birth of a child. In Indonesia, the record of birth is a form to be completed by government birth attendants. It is located in an “all-in-one” MCH booklet ideally handed out to women when they first attend the MCH clinic during pregnancy (see Figure 1).

The most noticeable thing about the 36-page MCH booklet is its bright pink cover. Pink has long been associated with girls in early childhood health materials, in particular standardised measurement charts for infant height and weight handed out by WHO, UNICEF and other multilateral agencies. Pink is also associated with the all-female zone of the *Posyandu* (see Figure 2), a village building often painted bright pink where mothers bring their infants to receive inoculations and to be weighed, and where men typically attend only if they are health employees dispensing immunisations. The booklet cover depicts a standardised Indonesian couple and several government logos. In the conservatively gendered norms of contemporary Indonesia, and despite the father figure sharing the cover, this booklet is strongly identified as for women. In interviews, this gender bias in the presentation made fathers associate the booklet with “women’s issues,” and they did not as a rule look at it or review its contents.

Along with height and weight measurement charts, the booklet includes tips on eating while pregnant, instructions for how to give birth at a government clinic,



Figure 1: Bright pink Women and Child Health (MCH) booklet cover. See <https://doi.org/10.3138/anth.2017-0026> for colour figures.

infant growth rate charts, preferred immunisation schedules and more. The writing inside is a pale blue, is in a small font and is hard to read. There is a lot of writing and few diagrams. For low-literacy mothers and fathers, the booklet does not act as a source of information, and few parents read the contents. Mothers who end up with the book (many mothers who give birth at home do not ever receive one) often ask the government attendant to keep the booklet safe. Health workers use it in prenatal checkups and postnatal immunisations and to add notations. Women do observe the weight records and growth charts of their infants closely. Overall, however, while women are meant to care about the booklet, in actual practice, health workers are the ones who make primary use of it.

Halfway through the middle of the booklet, on page 22, is the record of birth (*Keterangan Lahir*), the form the official birth attendant is to fill out and sign when the child is born (see Figure 3). Page 22 does not look



Figure 2: Typical *Posyandu* with pink walls

different from the form-filled pages that precede it; the blue ink colour is the same, and the design of the form is the same as those in the rest of the booklet. The record of birth notes the date and time of birth; the names of mother and father; sex, height and weight of infant; address of father; and signatures of the birth attendant and two witnesses. A completed form has the number assigned at the top and is stamped by the health unit. The form is not computerised, and the document numbering system, a critical feature of bureaucracy in Indonesia, does not appear to be applied consistently by all government birth attendants. I often observed this signed form still inside a child's booklet at a *Posyandu*. I saw booklets with the form unsigned at immunisation clinics where the child was being weighed, in homes where I conducted triad interviews, and in unkempt piles behind the desk of the government midwife at the birthing station. When asked, most respondents were not able to identify the record of birth in their booklets.

In terms of governance, the record of birth provides confirmation that an officially recognised person saw the child being born. In official terms, someone has to *see* the act for the child to have truly been born. The person

pulling the bloody infant out of the womb, by virtue of being there and attending to that messy work, has been decreed the best person to initiate the process of political belonging through issuing a paper record with a signature. But the document's awkward, hidden place makes it very difficult to transform the act of seeing into documentary evidence. The state has belied its putative commitment to registration by making the record of birth particularly hard to complete and thus hard to submit for formal registration. Is it because the state does not value the act of seeing? This seems unlikely in a regime that organises village court systems and witness testimonies strongly along the lines of visual proof. The form itself suggests that the state places a high value on eyewitnesses. And yet completion rates are low, and uptake of completed forms is similarly low.

Beyond the placement of the document, further scrutiny suggests that the gap between the social act of birth and the reduction of the act of birth to a piece of paper is a very large one. The document's muted tones and faded fonts offer insights into the ambiguities surrounding childbirth in Indonesia. The record of birth represents the opposite of the visceral, bloody, liminal and potentially dangerous experience of childbirth. In a nation where shame and stigma are powerful sentiments and where courtship, pregnancy and childbirth are often euphemised and downplayed in everyday life (Graham Davies 2015), a pale, hidden document embodies national moralities. In the way that childbirth is private and not readily talked about, the document is similarly muted, hidden, and tucked away from sight. Lupton (2013b) identifies "liminality disgust" as an emotion generated by the transgression of cultural boundaries that can be present in public health discourses. Here the record of birth helps to evade liminality disgust, because birth threatens the organising principles of Indonesian society as one ordered by bureaucratic regularities and as removed from the "natural" domain of infant birth and the "uncivilized," hard-to-manage infant with the "leaky body" (Lupton 2013a, 43). Designing a document that smooths over the liminality of birth and the liminal nature of the newborn infant allows management principles to seem to endure.

In a further affirmation of the record of birth's lowly status and its disengagement from the realities of birth, there are many other ways to obtain a birth certificate without a signed record of birth. A woman who gives birth at home may ask the government birth attendant to complete the form even though the employee did not witness the birth. The birth attendant may also complete the form for someone who did not give birth locally. The attendant may sign the form knowing the

KETERANGAN LAHIR

No: _____

Yang bertanda tangan di bawah ini, menerangkan bahwa
 Pada hari ini _____, tanggal _____, Pukul _____
 telah lahir seorang bayi

Jenis Kelamin : Laki-laki/Perempuan *
 Jenis Kelahiran : tunggal/kembar 2/ kembar 3/lainnya *
 Kelahiran ke : _____
 Berat lahir : _____ gram
 Panjang badan : _____ cm

di rumah/Rumah Bidan/Polindes/Rumah Bersalin/Puskesmas/Rumah Sakit*

alamat : _____
 Diberi nama : _____

Dari Orang tua :
 Nama Ibu : _____ Umur : _____ tahun
 Pekerjaan : _____
 KTP No. : _____
 Nama Ayah : _____ Umur : _____ tahun
 Pekerjaan : _____
 KTP No. : _____
 Alamat : _____
 Kecamatan : _____
 Kab/Kota : _____

Saksi 1 _____ Saksi 2 _____ tgl _____
 Penolong Persalinan _____

 **

* Lengkapi yang sesuai
 ** Tanda tangan, nama lengkap, no induk pegawai, nama instansi

Lembar sebagai arsip

22 BUKU KESEHATAN IBU DAN ANAK

Figure 3 : Record of birth form

information about the biological father or mother is false. Mothers of newborns may bypass birth attendants altogether and obtain a letter from a village official, or *Dusun*, testifying to the birth of their child for a small fee. Families of infants where the father is unable to sign documents can pay a *Dusun* to testify to the child's parentage in a letter, whether the parental claim is true or false. And families with the capacity to pay fines and bribes can bypass all rural signatures and the record of birth and obtain a birth certificate directly through careful negotiation at the civil registry office.

Beyond the household and the village, officials who run the civil registry view birth registration with disengagement and disinterest. One director spoke with disdain for his job of providing identity documents: "I have to interact with too many poor people in this job," he said. The same director noted that many of the documents processed under his watch are drawn from false information. "We just want to be able to produce the documents," he said. "We just close our eyes to the

lies." Another director similarly estimated that 30 per cent of the documents produced by her office were generated based on false materials submitted by applicants. This did not prevent her from issuing birth certificates. These officials' lax attitudes affirm a wider lack of concern about the legitimacy of documents in general. Bubandt (2009, 575) notes the extent of false documents in Indonesia, saying, "Fakes are everywhere in Indonesia, and anything can be faked."

The cavalier approach of managers of data-producing units in Lombok reinforces an overall comfort within Indonesia around discrepancies between real-life social relationships and official documents. The yawning gap between the act of birth and the recording of the event creates opportunities, not just for lax official practice, but also for a lax engagement with the state for families in East Lombok. The incommensurability of the act of birth and reducing birth to a document can be readily built upon to validate and reinforce family relations around birth (Butt, Ball, and Beazley 2016). The following case describes how one respondent, Markus, now an elected hamlet *Dusun*, understands gaps in birth registration practices as a space to reinforce cultural priorities that give meaning to the liminality of childbirth.

Markus: An Example for the Hamlet

Markus left for work in Malaysia when his wife became pregnant for four out of her five pregnancies. As with Heka and Leni, his first child died while he was away working. All the children were born in his home, attended by a local midwife, and no child was given a record of birth. After he stopped working overseas, Markus became an elected hamlet *Dusun* and has received a salary for the past nine years. Among his duties is to promote birth registration and other government initiatives to villagers. He also writes letters asserting social relationships for village residents missing key documents who are hoping to obtain identity cards or birth certificates.

Markus described his family's fluctuating use of identity documents. Like Heka, he valued documents for purposes of migrating, but chose to use false names on his migration documents to avoid being managed through state records. Now that he no longer works overseas, he uses his real name on documents, not because it is important to him personally, but "because I am the head of the hamlet now." I asked him about birth registration:

LB: Do all members of your family have birth registration?

M: Yes, all.

LB: When did you get this done?

M: Six months ago, because *it is important for education*.

LB: Is your wife registered?

M: No, we didn't register her.

LB: Do you have a birth certificate?

M: Yes, I do, because I am the head of the hamlet.

I must be an example.

It is notable that Markus does not include his wife in "family" registration. This omission may be an expression of local conservative Islamic norms that view women as important but dominant mostly in the private sphere of household and family. However, Markus twice in this short excerpt aligns receiving birth registration primarily with bureaucratic expectations. The document is important for Markus, not as an identity marker or as evidence of belonging, but because it is required at particular institutions, such as schools,⁵ or because it identifies him as an official who should be a model for the behaviour of others.

Despite Markus's recreation of himself as the legitimate holder of legitimate documents, the values embedded in the documents do not appear to be internalised. When asked how children are naturalised to become Indonesian citizens, rather than describe forms and procedures, he answered with a moving description of the 40-day *dzikir* hair-cutting ceremony and feast. Later in the interview, when asked what steps can be taken to make someone an Indonesian citizen, he replied, "Give them education and training at home. We teach them as parents what is good and what is bad. If they want to eat, they should ask first, not just help themselves as they might like." When asked about the benefit of having ID, he replied half-jokingly, "So we can remember their birthdays." For this government employee, citizenship is sociality and family obligations, and documents have a utility unrelated to their official goals. For Markus, the content of the document matters little; it is having a document that is accurate enough when it is needed that counts. It is notable that Markus regularly writes letters asserting kinship relations for hamlet residents so that they can get a record of birth for a child, and he knows that many of the letters he writes affirm kinship relations that are false according to institutional criteria (for example, a non-biological father added to a birth certificate). Producing these documents serves local social purposes, such as allowing a stigmatised single mother the chance to create a false family or allowing an underage teenager to work out of country to support his family. Markus contributes to informal mechanisms of obligation and sociality. It is notable that Markus

was typical of the majority of our respondents in that he was unable to show us the identity documents he claimed to have. Markus said the family's birth certificates, while obtained, "are not available at this time."

In viewing belonging as primarily about family and ritual, Markus disconnects his subjective aspirations and expectations from the material reality of identity documents. As with Heka and the majority of our respondents, the record of birth and the birth certificate are absent from Sasak lives. This ease with absence contrasts with practices in India, where officials at some registries scrupulously record minute details associated with individual births as evidence of assiduous record-keeping (Gupta 2012, 264–265). It also contrasts with Erikson's depiction (Erikson 2012) of German mothers' obsessive focus with the micro-details of birth and growth of children as documented in their birth booklets. When German mothers use the Mutterpass, they translate their bodily experiences into notations on a document, which can then be used to evaluate and manage their actions. It further contrasts with the assiduity of migrant mothers from Myanmar in Thailand, where pregnant women covet the birth record obtained in a hospital birth because they associate documentation with citizenship (Seo 2016). It particularly contrasts with recent efforts in the United Kingdom of mothers of stillborn children who conflate documents with personal identity. Dodds (2017) describes women lamenting that their miscarried child was never able to obtain a birth certificate, claiming it was "administrative cruelty" to deny a pre-term stillborn a record of identity. In these countries, registration can engage families in processes that aid in identity formation and in consolidating ideals of personhood. Breckenridge and Szreter (2012) support this view: they suggest documents retroact on their objects, remaking social practices in alignment with the metrics. In Lombok, in contrast, the absence of documents linked to a person appears to have little effect on the formation of subjectivities around personhood. Even though these documents proffer the long-term potential of rights and entitlements as citizens, most caring parents do not take advantage of this opportunity.⁶ As Markus intimates, the documents detract from cultural projects of birth and child-rearing and of managing the liminality of childbirth. The close attention to ritual and obligations necessary to raising healthy children in Lombok matter more, not because the document is irrelevant, but because the document's symbols of family, gender, measurements, codes and signatures remain largely irrelevant to ongoing Sasak understandings of childbirth as a ritual moment of ambiguity, insecurity, transition and growth.

Discussion: Documenting the Moment of Birth

The goal of zero delay between birth and the production of a record of birth grounds objectives across the globe to initiate the management of persons from the moment of birth. The reality of birth records in low-income communities in East Lombok, where women value birthing at home and where men value their role as mobile household heads, is that the documents are absent, sloppy, often dirty, unfinished, incomplete, incorrect, falsified, often abandoned, and regularly forgotten. As Riles (2006) notes with regard to documents more generally, the document instantiates wider epistemological conditions, and these can be political. In theory, the act of witnessing is the driving force behind the design of birth documents. In practice, witnessing does not matter. It can readily be faked. The role of the birth attendant is thus diminished, their official assigned task of record keeping turning out to be less important than it appears (compare with Stein 2007). The acceptance by government officials of falsehoods in document production as a matter-of-fact part of their job suggests that accuracy in civil records matters little to the state. On the contrary, the chaos suggests that contingency is an important and useful foundation for the production of population documents.

The act of intruding on the moment of birth with a request for a measurement, a parentage and a set of signatures is clearly a political act. When placed in the context of the vital social relations and practices surrounding childbirth, however, the document appears a flimsy effort to regularise, manage and ultimately diminish a complex and ambiguous biological, social and affective event. From this perspective, birth documents everywhere are invariably ambivalent and contingent, seeking to transform chaos and uncertainty into an order and logic grounded in infant height and weight, in narrow kin relations, and in a time and at a place. No less symbolic than belly rubbing while a woman is in labour, the record of birth offers a new set of signs and symbols that intrude on local constructs and meanings around events and procedures. In rural East Lombok, the government birth attendant's presence and her offerings are not compelling conceptual forms that can easily replace other meanings and symbols. In other contexts where births are more rigorously managed by biomedical practice, documents might be more readily accepted as symbols associated with the liminal moment of birth. But for the Sasak, the regulatory potential of documents and the illogic of the forms of measurement offer reasons for avoidance. For the majority of families we talked to,

a strategic appearance of rudimentary compliance to obtaining documents is sufficient.

Conclusion

It has long been a truism within anthropology that biological motherhood is a fact – the visceral, material nature of childbirth is viewed as sufficient evidence for this claim. The materiality of the moment may be what drives efforts to produce a written document on par with the powerful material presence of the newly born infant. However, as the Sasak show, giving birth may be an embodied fact, but it is not easily translated into a documentary fact. The overall irrelevance of the birth record draws attention to the ambiguities embedded in demanding instant linking of a newborn to a nation through the eyes of a witness. It calls out the dubious notion that, by virtue of being there and attending to the messy work of seeing the infant emerge, the birth attendant is the best person to initiate the process of political belonging by writing out a paper record. Sasak responses to Indonesia's call for universal registration highlight the relative incommensurability of the act of birth with the document produced, in political conditions where documents have little real resonance in people's lives other than as potential markers for management and surveillance. The documents live mostly as traces of the state, not as identity markers or objects of pride. It is the sporadic presence of birth certificates that makes their absence the pattern that really counts.

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Notes

- 1 The government of Indonesia has been a prominent player in global birth registration debates. Former President Susilo Bambang Yudhoyono states: "Government is responsible for maintaining many of society's central institutions. One of the most basic institutional responsibilities is providing legal identity" (Australian Indonesian Partnership for Justice [AIPJ] 2014, 3). Amended in 2013, Law 24 on Population Administration "provides that the Government of Indonesia has an obligation to actively reach out into the community to register births, marriages, divorces and other legal identity events" (AIPJ 2014, 18).
- 2 Indonesian citizenship is derived through the parents, as well as through birth on Indonesian soil. A child born to an Indonesian mother or father may become an Indonesian citizen. A child born in Indonesia to parents who are not Indonesian does not have automatic citizenship rights. This is a combination of *jus sanguinis* and *jus soli* principles.
- 3 This study was carried out in collaboration with Jessica Ball (University of Victoria, Canada) and Harriot Beazley (University of the Sunshine Coast, Australia).
- 4 For our interviewees, the choice to return home depended on relationships within the household, including closeness of the pregnant woman to her mother-in-law, closeness to her own mother, distance from the pregnant woman's natal village, and the availability of social support in the husband's home.
- 5 Other respondents said they did not require any birth documents to register their children for school. Markus was repeating the standard line given in birth registration promotions, but due to low local registration rates and empathetic teachers, the requirement is not typically enforced at local schools.
- 6 Parents can use identity documents deliberately to advance opportunities or to protect families, in Lombok (Butt, Ball, and Beazley 2016) and elsewhere (see Horton 2015; McKay 2016).

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