



Cimande: The History of Traditional Healing and Spiritual Networks in West Java Society (A Study of the Twentieth and Twenty-First Centuries)

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ARTICLE INFO

Keywords: Cimande Healing, Indigenous Knowledge, Ethnography, Traditional Medicine, Cultural Heritage, Islam Nusantara

Received : 4 June 2026

Revised : 21 July 2026

Accepted: 22 August 2026

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ABSTRACT

Cimande healing is an indigenous healing tradition in Indonesia that has been preserved through oral transmission, spiritual practices, and local cultural values. This study examines the historical development of Cimande healing, its indigenous knowledge system, and its adaptation to contemporary society. A qualitative approach integrating historical methodology and ethnography was employed. Data were collected through participant observation, semi-structured interviews, and document analysis involving traditional healers, community leaders, and patients in Cimande Village, Bogor Regency, West Java. The findings reveal that Cimande healing is sustained through teacher-disciple relationships, collective participation, and the integration of manual therapeutic techniques with Islamic spirituality and Sundanese cultural values. The tradition has remained resilient by adapting to social change while preserving its historical identity and cultural authenticity. This study contributes to the understanding of indigenous knowledge, medical anthropology, and cultural heritage by highlighting the role of community-based knowledge transmission in sustaining traditional healing practices

INTRODUCTION

Traditional medicine constitutes an important component of Indonesia's intangible cultural heritage. Many indigenous healing practices integrate empirical knowledge, cultural values, and religious beliefs that have been transmitted across generations. One of the most distinctive traditions is Cimande healing, a traditional therapy originating from Cimande Village, Bogor Regency, West Java. The practice is widely recognized for treating fractures, sprains, joint injuries, and muscular disorders through manual manipulation combined with Islamic spirituality, ritual practices, and local wisdom. Cimande healing represents not only a therapeutic technique but also a cultural institution that preserves historical memory, religious values, and indigenous medical knowledge. Historical studies demonstrate that medicine and spirituality have long developed as interconnected systems. Religious institutions historically contributed to healthcare before the emergence of modern biomedical science (Koenig, 2012). Islamic civilization also developed holistic healthcare by integrating physical treatment, psychological well-being, and spiritual practices. The traditions of prayer, massage, hygiene, and healthy living exemplified by Prophet Muhammad became the foundation of Thibb al-Nabawi, influencing later developments in Islamic medicine (Assegaf, 2015; Tsaqif & Kurniawan, 2021). Medieval Muslim scholars further integrated medical science, philosophy, and spirituality, contributing significantly to the development of healthcare knowledge (Widarda, 2023).

Traditional massage and healing practices have existed throughout the Indonesian archipelago for centuries. Archaeological evidence from Borobudur and Prambanan temples illustrates therapeutic massage practices during ancient kingdoms (Setyanti, 2017). Classical Javanese manuscripts, including *Serat Centhini* and *Serat Kawruh*, describe massage therapy, herbal medicine, and healing rituals practiced by royal families and local communities (Susan, 2001). Traditional healing in Java combines physical manipulation, herbal remedies, prayers, ascetic practices, and martial arts. Spiritual discipline remains an essential component of therapeutic practice because healing is understood as the interaction between physical, psychological, and metaphysical dimensions (Tsaqif & Kurniawan, 2021). Cimande healing emerged within this historical and cultural context. The tradition developed alongside Cimande martial arts established by Abah Khoir in West Java. Manual therapy originally functioned as a method for treating injuries sustained during martial arts training. The practice gradually evolved into a community-based healing system specializing in fractures, dislocations, muscular injuries, and musculoskeletal disorders. Knowledge transmission occurs through a structured relationship between teacher and disciple, reinforced by spiritual discipline, ethical obligations, ritual initiation, and genealogical succession. Technical competence alone does not determine the legitimacy of a Cimande practitioner. Recognition depends on participation within an established spiritual lineage that preserves the authenticity of the tradition.

Indonesia possesses numerous traditional healing systems, including Sangkal Putung in Central and East Java, Topu Bara in South Sulawesi, and

various forms of Battra practiced across Javanese communities. Islamic boarding schools also maintain healing traditions based on Thibb al-Nabawi, Qur'anic recitation, herbal medicine, and ruqyah. Cimande differs from these traditions because it integrates therapeutic knowledge, Islamic spirituality, indigenous cultural values, martial arts heritage, and an organized network of teachers and disciples into a single cultural system. The tradition functions simultaneously as a healthcare practice, a mechanism for transmitting indigenous knowledge, and a spiritual institution embedded within local society. Modern healthcare expansion, technological development, and changing social values have transformed public perceptions of traditional medicine. Many indigenous healing traditions have experienced declining authority in contemporary society. Cimande healing continues to attract public trust despite increasing accessibility to biomedical services. Cultural identity, religious values, community legitimacy, and inherited knowledge contribute to the resilience of the tradition. Existing studies primarily examine Cimande as a martial art, an alternative therapy, or a component of cultural tourism. Limited research investigates Cimande as an integrated historical, cultural, spiritual, and indigenous knowledge system spanning the twentieth and twenty-first centuries.

This study addresses the existing research gap by examining Cimande healing through an interdisciplinary historical-ethnographic perspective. The research analyzes the historical development of Cimande healing, explores its therapeutic practices and ritual traditions, investigates the indigenous knowledge embedded within the community, and explains the role of spiritual and social networks in maintaining the continuity of the tradition. The findings are expected to contribute to discussions on indigenous healthcare systems, intangible cultural heritage, Islam Nusantara, and the preservation of traditional medical knowledge in contemporary Indonesia.

LITERATURE REVIEW

Ethnography

Ethnography serves as the primary theoretical approach for understanding Cimande healing as a living cultural tradition. Rather than focusing solely on observable behavior, ethnography examines the meanings, beliefs, values, and social practices that shape everyday life within a particular community. According to Spradley (1979), culture consists of shared knowledge acquired and transmitted through social interaction. Ethnographic research seeks to understand how community members interpret their own experiences and construct social reality from an insider's perspective. The ethnographic perspective is particularly relevant for investigating traditional healing because therapeutic practices are inseparable from cultural beliefs, ritual activities, and symbolic communication. Healing traditions represent collective knowledge that has evolved through continuous interaction between practitioners, patients, and the surrounding community. Observation, participation, and in-depth interviews enable researchers to document not only healing techniques but also the meanings attached to rituals, prayers, ethical values, and interpersonal relationships within the healing process. Within the Cimande tradition,

ethnography provides a framework for examining how indigenous medical knowledge is preserved and reproduced across generations. The approach facilitates an understanding of the relationship between therapeutic practice, spiritual discipline, and community identity. Cimande healing is therefore interpreted as a cultural system in which technical knowledge, religious beliefs, and social values coexist within everyday practice.

Structuration Theory

Structuration Theory developed by Giddens (1984) explains the dynamic relationship between social structure and human agency. Social structures consist of rules, norms, and resources that shape individual behavior. Human actions simultaneously reproduce and transform these structures through repeated social practices. Structure and agency therefore exist in a reciprocal relationship rather than functioning as independent entities. The Cimande healing tradition illustrates this duality of structure. Knowledge transmission follows an established system based on teacher-disciple relationships, genealogical succession, ritual initiation, and ethical commitments. These institutional arrangements regulate the acquisition of healing knowledge while ensuring the continuity and legitimacy of the tradition. Practitioners acquire authority not only through technical competence but also through adherence to cultural norms and spiritual obligations inherited from previous generations. Structuration Theory also explains how Cimande adapts to social change without losing its cultural identity. Practitioners continuously negotiate traditional values with contemporary healthcare practices and changing community expectations. The persistence of Cimande healing demonstrates that cultural traditions remain sustainable when social actors actively reproduce inherited knowledge while responding to new social conditions.

Islam Nusantara

Islam Nusantara provides the conceptual foundation for understanding the interaction between Islamic teachings and local cultural traditions. The concept emphasizes the harmonious integration of religious values with indigenous customs that have developed throughout the Indonesian archipelago. The guiding principle *al-muhafadzah 'ala al-qadim al-shalih wa al-akhdzu bi al-jadid al-ashlah* encourages the preservation of beneficial traditions while embracing positive innovations (Siradj, 2014). Previous studies describe Islam Nusantara as an inclusive and adaptive expression of Islam that accommodates local cultural diversity without abandoning fundamental Islamic principles (Azra, 2002). Religious practices, local customs, and community traditions interact to create distinctive forms of spirituality rooted in Indonesian society. Rituals, moral values, and communal relationships become integral elements of religious life and cultural identity. The Cimande healing tradition reflects these characteristics through the integration of Islamic prayers, *tawasul*, fasting, spiritual discipline, and ethical obligations within therapeutic practice. Healing is understood not only as physical recovery but also as a process involving spiritual purification, moral responsibility, and social harmony. Islam Nusantara therefore provides an appropriate framework for interpreting Cimande healing as a traditional medical

system that combines indigenous knowledge, Islamic spirituality, and local cultural values within a sustainable social tradition.

METHODS

This study employed a qualitative research design integrating historical methodology with an ethnographic approach. Historical methodology was applied to reconstruct the development of the Cimande healing tradition from the twentieth to the twenty-first century through historical sources and oral narratives. The ethnographic approach, based on Spradley (1979), was used to understand the cultural meanings, social interactions, and spiritual values embedded in the everyday practices of the Cimande community. The research was conducted in Cimande Village, Caringin District, Bogor Regency, West Java, Indonesia, which is historically recognized as the center of the Cimande healing tradition. The participants consisted of traditional healers, disciples, patients, community leaders, customary leaders, and Islamic religious figures who possessed knowledge and experience related to the practice and transmission of Cimande healing.

Informants were selected using purposive sampling based on their active involvement and cultural authority within the community. Snowball sampling was subsequently employed to identify additional participants through recommendations from key informants. Data were collected through participant observation, semi-structured interviews, and document analysis. Participant observation was conducted to understand healing practices, ritual activities, teacher-disciple relationships, and community interactions in their natural setting. Documentary materials included historical manuscripts, archival records, previous studies, photographs, and local documents related to the historical development of Cimande healing.

The data were analyzed using the interactive model of Miles, Huberman, and Saldaña (2014), consisting of data condensation, data display, and conclusion drawing. Historical analysis was applied to reconstruct the evolution of the healing tradition, while ethnographic analysis was used to interpret cultural meanings, ritual practices, and patterns of knowledge transmission. The credibility of the findings was ensured through source triangulation, method triangulation, prolonged field engagement, and cross-validation between interview data, observations, and documentary evidence. Ethical principles were maintained by obtaining informed consent, ensuring voluntary participation, protecting participant confidentiality, and respecting local cultural values throughout the research process.

RESULTS AND DISCUSSION

Historical Development of Cimande Healing



Figure 1. Map of Cimande

Cimande healing originated in Cimande Village, Caringin District, Bogor Regency, West Java, and has developed alongside the Cimande martial arts tradition. Initially, healing practices were intended to treat fractures, sprains, dislocations, and other injuries sustained during martial arts training. Over time, the practice evolved into a community-based healing system serving both martial artists and the wider public. The continuity of this tradition has been maintained through oral transmission, practical experience, and adherence to cultural and spiritual values inherited from previous generations. The historical development of Cimande healing reflects the integration of indigenous medical knowledge, Islamic spirituality, and Sundanese cultural traditions. Healing practices combine manual therapeutic techniques with prayers, ethical discipline, and ritual observances. This combination has enabled the tradition to survive social transformation while preserving its historical identity. The findings indicate that Cimande healing represents both a therapeutic practice and an important component of Indonesia's intangible cultural heritage.

Traditional Healers and Knowledge Transmission



Figure 2. Tomb of Abah Kahir

Source: [PCK International – History \(Archived by the Internet Archive Wayback Machine\)](#)

Knowledge transmission in the Cimande tradition is based on a structured relationship between teachers and disciples. Learning occurs through direct observation, continuous practice, spiritual discipline, and ethical commitment. Practical competence alone is insufficient for becoming a recognized practitioner. Cultural legitimacy is also determined by lineage, moral conduct, and acceptance within the Cimande community. Traditional healers function as cultural custodians responsible for preserving indigenous knowledge and maintaining community trust. Their authority is reinforced through social recognition and spiritual responsibility rather than formal certification. This transmission system has enabled the continuity of Cimande healing despite changing social conditions and the expansion of modern healthcare services.

Socio-Cultural Context of the Cimande Community

Cimande Village provides a social and cultural environment that supports the sustainability of traditional healing practices. Strong kinship networks, shared cultural values, and community participation contribute to the preservation of indigenous medical knowledge. Islamic beliefs, Sundanese customs, and local traditions collectively shape the values underlying healing activities and community life. Contemporary social changes have influenced public perceptions of traditional medicine. Modern healthcare services, technological development, and changing lifestyles have altered healthcare choices in many communities. Cimande healing nevertheless continues to attract public trust because it offers a holistic approach integrating physical treatment, spiritual guidance, and cultural identity. The findings demonstrate that the tradition remains socially relevant through its ability to preserve inherited values while adapting to contemporary social conditions.

Indigenous Knowledge and Healing Practices

The findings demonstrate that Cimande healing functions as an indigenous knowledge system developed through the interaction of oral tradition, practical experience, spiritual discipline, and collective learning rather than through formal education. Knowledge is transmitted directly from teacher to disciple using observation, continuous practice, participation in healing activities, and moral guidance, allowing technical competence to develop alongside ethical responsibility and spiritual maturity. The research shows that the learning process emphasizes not only the mastery of manual therapeutic techniques but also humility, sincerity, discipline, and devotion as essential values for every practitioner.

This pattern indicates that knowledge in the Cimande tradition is embodied through everyday practice and social interaction, enabling each generation to reproduce and adapt inherited knowledge without losing its cultural identity. The study also found that Cimande practitioners are open to dialogue with modern healthcare by accepting medical treatment whenever it provides greater benefits for patients, demonstrating that indigenous knowledge is not positioned in opposition to scientific medicine but as a complementary healthcare system. This adaptive character illustrates that the continuity of Cimande healing

depends on the community's ability to preserve its philosophical foundations while responding to contemporary social change. These findings support the concept of indigenous knowledge proposed by Warren (1991) and Ellen et al. (2000), while also reflecting Giddens' (1984) view that social structures are continuously reproduced through the practices of social actors.

Spirituality, Rituals, and Symbolic Meanings

The study reveals that spirituality constitutes the core element of Cimande healing, with every therapeutic practice closely associated with religious values, moral discipline, and symbolic rituals inherited across generations. Rituals such as Talek, fasting, tirakat, tafakur, tawasul, the recitation of prayers and jangjawokan, the preparation of Cimande oil, and the annual Ngabungbang ceremony are understood not merely as ceremonial activities but as processes that cultivate ethical character, strengthen spiritual commitment, and reinforce collective identity within the Cimande community. Healing is perceived as a holistic process that integrates physical recovery with spiritual purification and social harmony. The findings further indicate that ritual practices strengthen the legitimacy of traditional healers because therapeutic success is attributed not only to technical competence but also to sincerity, devotion, and obedience to the values transmitted by previous generations. The integration of Islamic teachings with Sundanese cultural traditions demonstrates the adaptive character of local Islam, where indigenous customs are maintained without contradicting fundamental religious principles. These findings confirm that Cimande healing represents a living spiritual tradition in which therapeutic practice, religious belief, and cultural identity remain inseparable components of community life (Azra, 2002; Siradj, 2014).

Authority, Teacher-Disciple Relationships, and Spiritual Networks

The authority of Cimande healing is constructed through an interconnected system of scholarly lineage (sanad), teacher-disciple relationships, moral obligations, and spiritual legitimacy that has been continuously reproduced across generations. The findings indicate that recognition as a Cimande healer is determined not only by technical expertise but also by commitment to ethical values, respect for teachers, and active participation in preserving the tradition. Relationships between teachers and disciples extend beyond knowledge transfer to become long-term social and spiritual bonds that sustain trust, solidarity, and collective responsibility within the community. The expansion of Cimande healing has occurred organically through interpersonal networks, patient recommendations, and family relationships rather than through formal institutions or professional organizations, creating a trust-based network that strengthens the legitimacy of the tradition. Modern communication technology has further expanded these networks beyond Cimande Village while maintaining the importance of sanad, ritual gatherings, and regular interaction among practitioners. In line with Giddens' (1984) Structuration Theory, these repeated social practices continuously reproduce the authority and sustainability of Cimande healing, enabling the tradition to remain relevant despite the challenges of modernization and social transformation.

Cimande Healing in Contemporary Society

The findings indicate that Cimande healing continues to occupy an important position within contemporary Indonesian society despite the rapid expansion of modern healthcare services and technological development. Community trust remains the primary factor sustaining the tradition, while successful healing experiences, interpersonal recommendations, and long-standing social relationships reinforce its legitimacy across generations. The study also identifies several contemporary challenges, including changing values among younger generations, commercialization, declining interest in traditional apprenticeship, and the increasing dominance of biomedical treatment. Nevertheless, the Cimande community has responded through cultural adaptation by strengthening knowledge transmission, preserving ritual practices, utilizing digital communication, promoting cultural tourism, and establishing constructive collaboration with modern healthcare practitioners. Rather than resisting modernity, Cimande healing demonstrates an adaptive capacity that enables the integration of innovation without abandoning its fundamental cultural and spiritual values. These findings suggest that the sustainability of Cimande healing depends on the community's ability to maintain its indigenous identity while responding dynamically to changing social conditions, confirming its significance as a resilient form of Indonesia's living cultural heritage (Giddens, 1984; Castells, 2010).

CONCLUSIONS AND RECOMMENDATIONS

Conclusions

This study concludes that Cimande healing represents more than a traditional therapeutic practice, functioning as an indigenous knowledge system that integrates historical development, Sundanese cultural values, Islamic spirituality, and community-based social institutions. The findings demonstrate that the sustainability of Cimande healing is maintained through oral transmission, teacher-disciple relationships, moral legitimacy, and collective participation rather than formal educational institutions. Healing practices combine manual therapeutic techniques with spiritual rituals, ethical principles, and social interaction, creating a holistic approach that addresses physical, psychological, social, and spiritual well-being. The study further reveals that Cimande healing continues to adapt to contemporary social changes while preserving its historical identity and cultural authenticity. The integration of local wisdom with Islamic values reflects the characteristics of Islam Nusantara, while the continuous reproduction of knowledge and authority confirms the relevance of Structuration Theory in explaining the persistence of this living tradition. These findings highlight the significance of Cimande healing as an important element of Indonesia's intangible cultural heritage and contribute to broader discussions on indigenous knowledge, traditional medicine, and cultural sustainability.

Research Implications

Academic Implications

The findings enrich scholarly discussions on indigenous knowledge, medical anthropology, ethnography, and the study of religion by demonstrating that traditional healing should be understood as a dynamic socio-cultural system rather than merely an alternative therapeutic practice. The integration of Ethnography, Structuration Theory, and Islam Nusantara provides a comprehensive analytical framework for explaining the historical continuity, cultural reproduction, and spiritual dimensions of Cimande healing. This study also contributes to the literature on intangible cultural heritage by illustrating how indigenous medical knowledge is preserved, transmitted, and adapted within contemporary society.

Practical Implications

The findings provide practical insights for traditional healers, cultural institutions, universities, and government agencies involved in preserving indigenous cultural heritage. Strengthening collaboration among these stakeholders may support systematic documentation, community education, digital archiving, and intergenerational knowledge transmission. The study also highlights the importance of recognizing traditional healing as part of Indonesia's cultural heritage while encouraging constructive collaboration between indigenous healing practitioners and modern healthcare institutions.

Recommendations

Theoretical Recommendations

- Future studies should further develop the integration of ethnography, Structuration Theory, and Islam Nusantara to broaden the theoretical understanding of indigenous healing systems.
- Comparative research involving other traditional healing traditions in Indonesia and Southeast Asia is recommended to examine similarities, differences, and cultural adaptation across communities.
- Interdisciplinary approaches integrating history, anthropology, sociology, religious studies, and medical anthropology are encouraged to enrich future scholarly discussions on traditional medicine.

Practical Recommendations

- Local governments, universities, and cultural institutions should strengthen programs for documenting, preserving, and promoting the Cimande healing tradition as part of Indonesia's intangible cultural heritage.
- Traditional healers should be supported through community-based education and intergenerational knowledge transmission while maintaining the ethical, spiritual, and cultural values of the tradition.
- Collaborative initiatives between traditional healing practitioners and modern healthcare institutions are recommended to improve public understanding and ensure the sustainable development of indigenous healing practices.

FURTHER STUDY

This study still has limitations, so further research on The History of Traditional Healing and Spiritual Networks in West Java Society (A Study of the Twentieth and Twenty-First Centuries) is needed to refine this study and enhance the insights of readers and the authors.

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