



Woman in Culture and Arts

Anthropological Study of Fertility and Birth Rituals in Rural and Nomadic Society in Ilam Province

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Article Info	ABSTRACT
Article type: Research Article Article history: Received: 28 May 2025 Received in revised form: 3 December 2025 Accepted: 14 August 2026 Published online: 2 October 2026 Keywords: <i>Birth, Fertility, Gender Identification, Ilam, Rites of Passage.</i>	Introduction Human birth has consistently transcended a mere biological occurrence; it constitutes a ritual, social, and symbolic event within human societies, wherein the moment of birth signifies the convergence of nature and culture, the sacred and the corporeal, as well as the individual and social body (van Gennep, 1960). Arnold van Gennep considers birth as a quintessential example of rites of passage, through which individuals gain access to social life via symbols, cultural norms, and rituals. The body of the pregnant woman and the infant are the primary focus of these rituals and related cultural traditions. In many societies, childbirth is associated with rituals designed to support, safeguard, purify, name, and legitimize both the mother and the infant, frequently involving periods of seclusion, the use of traditional medicine, prayers, and the delineation of boundaries between purity and impurity (Turner, 1967; Douglas, 1966). Women's ability to conceive, give birth, and fulfill maternal roles is not merely a biological process but also a culturally, socially, and profoundly embedded marker of their status and legitimacy (Inhorn, 2007). Infertility and reproductive challenges frequently relate to social marginalization and the redefinition of female identity (Franklin, 1997), while the child's sex holds significant symbolic importance: in many cultures, the birth of a son is marked by particular rituals and social approval, whereas the birth of a daughter may be met with silence or neutralizing customs. Despite the effects of modernization and greater access to healthcare, birth and childbirth rituals continue to be strongly embedded in numerous traditional communities. Nonetheless, the relationship among birth, infertility, gender assignment, and women's bodily conditions has garnered limited ethnographic scrutiny. Examining reproductive rituals within rural and tribal communities of Ilam can illuminate how these practices reshape women's lifeworlds and family structures, while also serving a vital function in the perpetuation of gender roles and guiding culturally appropriate health policies. Methodology This research utilized a qualitative ethnographic methodology to achieve a comprehensive understanding of the cultural significance attached to fertility, birth customs, infertility, gender roles, and postpartum practices within rural and tribal Kurdish communities in Ilam Province. Fieldwork was carried out over a six-month duration across the counties of Ilam, Chavar, Malekshahi, Sarableh, and Ivan. Participants were deliberately chosen through a snowball sampling method, and semi-structured interviews were conducted with pregnant women, new mothers, women who have experienced infertility or miscarriage, local midwives, and elderly or knowledgeable community members. To improve the credibility of the data, comprehensive field notes and detailed descriptions of the cultural context were utilized. These approaches allowed the researcher to examine the relationships among traditional beliefs, rituals, and women's lived experiences, offering detailed insights into the perpetuation of gender roles and fertility-related care practices within these communities. Results In the rural and tribal Kurdish communities of Ilam, fertility, maternity, and associated practices are profoundly rooted within local cultural and symbolic structures. Childbirth is recognized not solely as a biological event but also as a culturally constructed ritual. Local terms such as <i>zhan</i> (delivery), <i>zaru hawrden</i> (childbearing), and <i>menal hawrden</i> exemplify a comprehensive lexicon that encapsulates various experiences and shared community perceptions of reproduction. Common pregnancy complications include embryonic malposition (<i>bacha alkaftega</i>), frequently associated with strenuous labor or abrupt

movements. Traditional midwives employ cloth supports and manual methods, with the mother kneeling as the midwife adjusts the position of the embryo. Cravings experienced during pregnancy (*viyar*) are regarded as spiritually meaningful, and satisfying them is believed to positively influence both the physical well-being and moral development of the mother and child.

Childbirth entails communal female involvement, with women from the family and community providing support during labor, reflecting customary patterns of mutual assistance. Ritualized practices encompass orienting the mother toward the Qibla, employing ropes for support, binding the hair, inserting metallic objects, and utilizing the husband's possessions symbolically to aid in the delivery. Pain management integrates physical, symbolic, and therapeutic modalities. Postpartum care encompasses nutrition, hygiene, and traditional rituals, such as wrapping the infant in a *pajen*, safeguarding the umbilical cord, and secluding the newborn for forty days to prevent spiritual damage. Foods such as *qumakh*, *tala*, and *shatiya* enhance maternal health, while traditional practices address risks such as hemorrhage.

Beliefs regarding the safeguarding of mothers and infants are comprehensive. Rituals comprise the preparation of protective prayers (*cheleh*, *nâf-gardan*) stitched into garments or recited orally, the burning of incense, and the avoidance of cemeteries or impure animals. Infants are afforded symbolic protection through objects like blue beads, wolf jaw trinkets, or bread placed under the armpit, reflecting a worldview that associates human vulnerability with spiritual and environmental forces. Practices also encompass the mystical transfer of traits through contact, wherein the moral and spiritual qualities of the umbilical cutter are believed to influence the newborn's personality, and symbolic objects are thought to transmit animal attributes, strength, or vitality to the child.

Conventional approaches to determining fetal sex depend on maternal physical characteristics, fetal positioning, and behavioral assessments, complemented by symbolic procedures such as flour scattering, manipulation of animal parts, or ceremonial rituals. Dietary and temperament beliefs also shape expectations regarding the fetus's gender. In certain instances, rituals such as the *nâf-gardan* prayer are performed to enhance the probability of having a male offspring, aligning with socio-cultural preferences for sons based on their responsibilities in labor, lineage, and protection. Naming conventions further emphasize these tendencies, with affirmative names for males and protective or unfavorable names for girls.

Infertility, predominantly attributed to women, is understood as resulting from spiritual contamination, heredity, or supernatural influence, often treated with prayers, symbolic acts, and herbal remedies. Rituals such as *amal-e tarjoman* encompass symbolic transformations, herbal remedies, and thermal methods aimed at enhancing fertility, thereby enabling women and families to restore a sense of agency.

Abortion is extensively stigmatized and regarded as morally and socially transgressive. Causes are ascribed to physical injury, psychological strain, or supernatural intervention. Local abortion practices include the use of herbal remedies, animal lipids, and ritualistic applications that integrate physical, symbolic, and mystical principles. These practices illustrate the integration of embodied experience, cultural symbolism, and community-based knowledge in reproductive health management.

Conclusion

This study revealed that fertility- and birth-related rituals and beliefs in the rural and tribal communities of Ilam transcend simple biological functions, influencing the lived experiences of women and families within cultural, religious, and symbolic frameworks. Belief in supernatural entities such as jinn, spirits, and charms complicates the comprehension of infertility and reproductive challenges, depicting reproductive health as a multifaceted interaction of biological and cultural influences. The findings suggest that infertility, miscarriage, and other reproductive difficulties are regarded not merely as medical issues but also as occurrences imbued with social, moral, and symbolic significance, shaping traditional and ritual practices in conjunction with contemporary medical understanding.

Postpartum care practices, rituals, and pilgrimages to sacred sites exemplify the community's endeavors to restore both physical and psychological well-being for mothers and infants through spiritual means. Additionally, concepts such as gender determination and gender transition demonstrate that gender is not solely a biological fact but also a social and symbolic construct interconnected with identity, gender roles, and an individual's social

position within the community.

The study emphasizes that ethnographic and interdisciplinary research serve to reconcile field data with both traditional and modern theoretical frameworks, thereby identifying cultural competencies and barriers in reproductive health. Ultimately, fertility and birth rituals serve not only as elements of cultural heritage but also as dynamic mechanisms for perpetuating identity, power, and social relationships, providing valuable guidance for culturally sensitive, evidence-based policies in women's health.

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