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Treatment of Colonial Mine Labourers at Mijnbouw Maatschappij Redjang Lebong (1928-1936)

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Abstract
This study highlights labour dynamics and socio-economic conditions at the Mijnbouw Maatschappij Redjang-Lebong (MMRL) gold mine in the late 1920s to 1930s. This research aims to analyze the treatment of labourers in the most significant gold and silver mining in the Dutch East Indies, MMRL. The method used in this research is the historical method with the research steps of heuristics, source criticism, interpretation, and historiography. The result shows fluctuations in the number of labourers and budget allocations for labour wages, explosives and other necessities from 1928 to 1936. Daily labourers significantly declined from 979 in December 1929 to 744 in December 1930. Differences in payment systems and benefits for contract, casual, and day labourers are also described, reflecting variations in wages and health facilities received. Occupational injuries and work-related illnesses were a common problem, with many labourers sustaining severe injuries as a result of the mine's non-stop operations. MMRL provides medical facilities and implements health measures, but there remains a high risk of respiratory illness and other injuries. The excellent relationship between company owner H.J.A. Sanders and the labourers is also an essential factor in the social life of the labourers.

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Introduction

Today, Indonesia is the result of a legacy of many different backgrounds from the past. Some of the heritage comes from ancient times, Islamic civilisation, to the legacy of colonising Western countries, especially the Dutch, who inhabited Indonesian land for a long time (Bloembergen & Eickhoff, 2015; Zed, 2017). One of the regions of Sumatra, Bengkulu or Benkoelen, from 1824-1942, was entirely under the rule of the Dutch East Indies Government (Herlambang, 2017; Samsihono & JR, 2021). This is due to primary gold mining activities in North Lebong, one of the onderafdeeling in Keredisenan Bengkulu (Trimiska et al., 2018). The oldest mine in Lebong Regency is located in the Doesoen Lebong Donok, Onderafdeeling Lebong, Keresidenan Benkoelen, precisely in the upper reaches of the Ketahoen River. Mijnbouw Maatschappij Redjang Lebong (MMRL) is a private company founded in 1897 by H.J.A. Sanders. The company recorded huge profits at the beginning of its establishment (Ackerstaff, 2014). The Afdeeling Redjang Lebong region has long had mountains that hold large amounts of gold and silver ore in andesite rocks (Heinemann, 1915). Align with Andriyanto and Fitrisia (2019), which states that some of these mountain ranges include Pematang Gigur (1,800 M), Mount Ranau, Mount Dempo, Upper Musi Plateau, Mount Kaba, Mount Pandan (2,168 M), Mount Seblat (2,383 M), Bukit Runcing (2,221 M), Bukit Daun (2,467 M), and Mount Palik (2,463 M).

This has been known for a long time by the natives. It is no wonder that there are many ore reserves in the Lebong area, not least because of the existence of these mountains. The mountains must also have been challenging to explore with simple equipment. Hence, the arrival of Dutch geologists opened up many deeper metallic deposits due to their much more modern equipment. The gold mines have been explored for centuries, first by the Malays and then by the Hindus. Exploitation was done using primitive methods, where gold and silver were extracted. The precious metal was found in mountain river sands, cracks, and crevices in solid rock. However, in the 18th century, a new exploitation method was implemented based on the science of earth construction. This new method found metal ores starting in reservoirs (Wit, 1914).

The oldest record found of gold mining in the Redjang Lebong region is that of Captain William Dampier (1651-1715), an English navigator and writer who travelled the world. He reported that in 1689, Sultan Daula Mahkoeta Alamsjah, a descendant of The Great Alexander, ordered an exploration of the mountains in search of precious metals. Gold was found in Achin, within the sultan's domain, near the West Coast. Dampier asked how the explorers had obtained the gold, but it turned out that only Mahometans were allowed to enter the mine site. This was because the precious metal mining site was considered a dangerous location. In addition, it is also said that many people who come to the mine find it challenging to return, and many cannot even go home (Leeuwen, 2014).

Before the arrival of Europeans, who took over mining activities using modern techniques, indigenous people in the archipelago were already involved in traditional mining activities. Mining activities are only carried out by residents when they are experiencing the off-season (difficult harvest), for example, when the selling price of rubber decreases (Leeuwen, 2014). Traditional mining activities from that time until now can be found in Sumatra and Kalimantan (ILO, 2004; Meutia et al., 2022; Rochgiyanti et al., 2024). In technical terms, the mining process at that time was relatively simple, involving panning for gold in rivers and mining in caves with limited equipment. Indigenous people carried out this mining activity with permission from the local ruler (Rahmana, 2018).

Before being known by the Dutch colonials, gold mining in Sumatra was first known by the Portuguese colonials (Heidhues in Marsden, 1784: 37) . It was only later that the Dutch colonials learnt of Sumatra's gold wealth and associated it with the location of Ophir, which is recorded in the Bible. It is mentioned in the Bible that the area was a gold mine owned by King Solomon, which made the gold trade possible. In 1799, the Dutch Government ceased operations of the VOC and took over control of all affairs in the archipelago, including mining (Indraprahasta & Derudder, 2019). However, in December 1799, VOC went bankrupt (Mustakif & Mulyati, 2019). Geological research and exploration of mining materials were then conducted in a more focused manner. Efforts to improve the efficiency of geological and mining research continued, so in 1850, the Dutch East Indies Government established the Mining Service, headquartered in Batavia. By the Indische Wetgeving Regulations, especially the Mining Regulations (Mijnordonnantie), the Mining Service was headed by a head called Chef van het Mijnwezen (Darmono, 2009).

Mining exploration in the 1895-1896 period in Bengkulu focused on the Onderafdeeling Lebong and identified primary deposits at Lebong Donok. After that, MMRL started mining activities based on

these findings, which commenced in 1897 (Darmono, 2009). It was not until 1899 that a mining law became the legal basis, known as the Indische Mijnwet. Changes in the Mining Service's structure positively impacted the management of mining activities by the Dutch East Indies Government and the private sector. This was evident with the establishment of three Dutch Colonial mining companies, Ombilinmijnen in Sumatra West Kust, Bukit Asam in Palembang, and Pulu Lautmijnen in South and East Kalimantan. The first ten mining areas in the Dutch East Indies were managed by mining companies owned by the Dutch East Indies Government or private companies, including the Bengkulu region (Rahmana, 2018).

At the beginning of the 20th century, the economy of Keresidenan Benkoelen was rebuilding, but this was more beneficial for the Dutch colonisers than for the indigenous people who continued to experience hardship (Siddik, 1996). The profits were derived from exploiting gold at Lebong Donok, which produced 33½ (thirty-three point five) million tonnes of precious metals (gold and silver) from 1899 to 1911, of which 18 million tonnes was net profit. The success of gold mining contributed to the development of trade and agriculture in Redjang Lebong (Verloop, 1917). It is because of this that the mine in Redjang Lebong, MMRL, gained more fame than other mining sites (Verloop, 1917). The word Lebong itself comes from the word "Lobang" which refers to the precious metal mining pit that symbolises the abundance of precious metals in Redjang Lebong (Ackerstaff, 2014).

In 1901, the gold mining of MMRL had produced 1.196.475 guilders of gold/silver. In 1902, with the Dutch East Indies Government Decree on 3 February 1902, Number 14, Ketahun Company received a gold/silver mining concession in Lebong Sulit. With the Decree of the Dutch East Indies Government on 15 June 1906, Simau Company received a gold/silver mining concession in Simau in the Lais Afdeeling area. Starting in 1904, the Dutch East Indies Government also researched the gold/silver-bearing soils in the Lebong wilderness area. As a result, in 1912, the government opened a gold/silver mine in the Lebong Simpang wilderness (800 metres above sea level with its valley, where Simpang Water flows, located 10 km from the hamlet of Kota Donok) (Siddik, 1996).

There were many gold mines in the Benkoelen Residen itself, especially those using "Lebong". There were the Lebong Simau, Lebong Sawah, Lebong Soelit and Redjang-Lebong Mines. However, the largest and most profitable gold mine was MMRL. Align with (de Ruiter, 2016), which states that in 1926, MMRL was the most profitable gold mine in the Dutch East Indies for the Dutch colonials. The labourers lived side by side with migrants from other nations. This is because by 1900, the population of Keresidenan Benkoelen was 215,000, consisting of 500 Europeans, 3500 Chinese, 50 Arabs, and the rest indigenous people. The labourers at MMRL were divided into three groups based on origin: local labourers, Javanese labourers, Chinese labourers, and the rest of East Asian labourers known as koelipondok. It is known that the Javanese and Chinese labourers on the previous Benkoelen Road project were domiciled in the Onderafdeeling Kepajang (Siddik, 1996).

This research focuses on the treatment of labourers working at MMRL. Previous relevant research has been conducted by (Rahmana, 2018), which shows that there were significant changes in Lebong, both in terms of the government system, city planning, and the composition of the society. Meanwhile, this research will discuss the aspects that emerged in the treatments of the labourers in MMRL. In addition to (Rahmana, 2018), there is also research conducted by Gulik (1930). Gulik's research analysed the health of labourers at MMRL in 1928-1936. The health of the labourers was studied through data on diseases, health facilities, and the composition of the labourers' food consumption. To support the data, Gulik also described the social life of the labourers. The research conducted by Gulik is different from this research design in terms of objectives, methods, and the main topic of the study. The same applies to Rahmana's research (2018).

Based on the two previous studies above, it can be seen that no research focuses on the relationship between labourers and companies, especially the care received by labourers from companies. The success of MMRL cannot be separated from the role of the labourers. Therefore, the researcher wants to learn more about how the care received by labourers from the company supports the company's performance. No research explicitly discusses the relationship between labourers and companies in MMRL. Therefore, the researcher explores the relationship between labourers and MMRL companies through the treatments provided by the company. This study aims to find out how MMRL, as a company, treatments for their labourers through healthcare facilities, provision of public facilities, and treatments for labourers' families.

Research Methods

This historical research uses data from previous research and publications, namely articles, journals, books, and archives. This research is a social history research, as stated by (Kuntowijoyo, 2003:39), that social history research has a broad scope and is often linked to economics so that it becomes socio-economic history. This research also looks at the company's economic condition as a support for the care that can be given to labourers. The 1928 was chosen as the starting point of the research because in this year, production at MMRL was very high and at the peak of its success. Hence, the expectation was that the socio-economic life of the labourers was also in good condition. The year 1936 was chosen as the study's endpoint because, in 1936, the operation of MMRL ceased due to profitability. (Ackerstaff, 2014) mentions that MMRL aeased operations and the stamping plant ihat year. The cessation of MMRL's operations that year also removed H.J.A Sanders from his position as mining administrator.

To elaborate on this, the researcher used a sociological approach to explain the socio-economic conditions of the labourers of MMRL as a form of treatment by the MMRL company. The method of analysis used in this research is the historical method. Analysis using the historical method occurs in four stages: heuristics, source criticism, interpretation, and historiography. Heuristics in this research are carried out by searching for existing data relevant to the research topic. Data collection or heuristics is collected from sites that provide previous publications on activities at MMRL, such as Delpher and National Archife. In addition, researchers will utilise documents from the National Archives of the Republic of Indonesia (ANRI) that contain data on gold mining in the Onderafdeeling Lebong, such as the Dienst van Mijnwezen archive, Staatsblad van Nerderlandsch-Indie, Verslaag MMRL, etc. The parameter of this research is the description of the treatments by MMRL company for labourers in MMRL (1928-1936).

The source criticism process is carried out in two ways, namely internal and external criticism. Internal source criticism was carried out by comparing the works of Siddik (1996) entitled 'Sejarah Bengkulu 1500-1990' published by Balai Pustaka and (de Ruiter, 2016) entitled 'Het mijnwezen in Nederlands-Oost-Indië 1850-1950' published by Universiteit Utrecht. The criticised part is the condition of MMRL, which is claimed to be the largest gold and silver mine in Sumatra and has high profits. External criticism was conducted on the work of Verloop, J. H. (1917) entitled 'De Economische Beteekenis van Onze Koloniale Goudindustrie'. The researcher found it difficult to see the pictures' captions in the work, so the zoom feature was needed. This is because the published scans are not very good, with a resolution that does not support small fonts. This supports that this source has been publicised for a long time, so the sources used are valid.

The third step is interpretation, where researchers interpret the data found during the heuristic process and test its validity through the source criticism process. The data interpreted shows the treatment received by MMRL labourers from the MMRL company. The last step in this research is historiography. In this process, researchers write the results of interpretation into historical writing, referred to as historiography—the form of historiography in this article.

Result

MMRL Labourers

Labourers at MMRL are of several kinds, as can be seen in the table below:

Table 1. Number of Labourers by Type

Year	Contract Labourers	Freelancer Labourer	Total
1929	1266	273	1539
1930	1182	283	465
1932	1349	103	452
1933	1379	145	524
1934	1580	189	769
1935	989	167	156
1936	1020	98	118

Source:(*Verslag Mijnbouw Maatschappij Redjang-Lebong*, 1930)

Apart from labourers, there are also servants, caregivers, and others who work in the mines with the following details:

Table 2. Number of Labourers in MMRL Based on the Occupation and Origins

Occupation	Contractor		Freelancer Labourer	
	Indigenous	Chinese	Indigenous	Chinese
Man Labourers	952	16	230	19
Women Labourers	-	-	13	-
Servants	38	-	-	-
Caregivers	8	-	6	-
Desertir	5	-	-	-
In Prison	5	-	-	-
In Hospital	12	1	-	-
Sub Total	1020	17	249	19
Total	1037		268	

Source: (*Verslag Mijnbouw Maatschappij Redjang-Lebong*, 1930)

By the end of December 1930, there were 1,305 labourers at MMRL, less than the 1,614 labourers in 1929. In 1930, 980 contract labourers had their contracts expire, and 843 received permission to extend their contracts. However, only 726 people extended their contracts, or 86%. Due to the labour reduction policy in 1930, MMRL excluded 84 male labourers, which resulted in a drop in the percentage of labourer engagement from 92% in 1929 to 86% in 1930. It can be seen in the table above that there were very few female labourers. This is in line with Gulik's statement that female labourers were rare, with most women at the mining site being the wives of the labourers. The following is the number of labourers working at MMRL:

Table 3. Number of Labour Days at MMRL

Type of Labourer	1929	1930
Contractor Labourers	411.947 days	387.599 days
Freelancer Labourers	88.354 days	92.012 days
Total	500.301 days	479.611 days

Sumber: (*Verslag Mijnbouw Maatschappij Redjang-Lebong*, 1930:32)

In the table above, it can be seen that the total labour days in 1930 decreased by 20,690 days when compared to 1929. Chinese contractors at MMRL employed an average of 13 natives and 6 Chinese labourers for 19 people.

Residential

MMRL labourers receive housing facilities. Their wives and children also receive free meals (Gulik, 1930).

Figure 1: House of a large reclamation worker in Lebong Soelit
Source: (Verloop, 1917:79)

Figure 2. Residential for soldiers and Europeans in Ketahoen
Source: (Verloop, 1917:80)

As for water facilities, warm water comes from great depths around the MMRL site. The water is solid with a flow rate of 3m3/min, and it has to be pumped from a depth of 465m. Because of this, the cost of the water facilities has risen, especially during the summer months (Ploeg, 1949).

Allowances

To provide care for the labourers, the MMRL company provided various treatments, including hospital fees or what is now known as health insurance. Based on data written in the 1930 MMRL Verslaag, the following are the changes in the cost of treating labourers and their contractors from 1928-1930.

Table 4. Treatment Fees for MMRL Labourers in 1928-1930

Type of Treatment Fees	1928	1929	1930
Hospital Fees	f 0.804	f 0.817	f 0.824
Consumption Fees (Food and Beverages)	f 0.065	f 0.064	f 0.056
Recruitment Fees	f 0.119	f 0.132	f 0.099

Sources: Verslag MMRL (1930: 15)

The labourers' wages in 1928 amounted to f 0.804, in 1929 to f 0.817, and in 1930 to f 0.804. Meanwhile, the number of labourers working at MMRL began to decrease. In December 1929, an

average of 979 daily labourers were working at the mine, while when compared to the number of labourers in December 1930, it appears to be considerably less, at 744 labourers. This is not even half of the company's workforce of 1,646 and 1,341 respectively (*Verslag Mijnbouw Maatschappij Redjang-Lebong*, 1930). This is also due to the inadequate road conditions to Redjang Lebong, making it difficult for labourers from outside to enter (Huitema, 1935). However, compared to MMRL, coffee plantations in Redjang Lebong experience more labour-related difficulties, as some labourers prefer to become labourers in the mines (Huitema, 1935).

In the table below, we can see the changes in the budget allocation for labour wages over several periods:

Table 5. Dynamics of MMRL Labourer Wages 1929-1936

Year	Labourer Wages (*f*)	Salary (*f*)	Dynamite (*f*)	Mover (*f*)
1928	31.98	6.84	12.40	5.24
1929	39.02	5.75	15.31	7.35
1930	15.50	6.55	14.21	4.59
1933	5.69	7.21	12.51	1.68
1934	5.61	9.31	11.76	2.63
1935	7.42	5.23	10.96	2.99
1936	5.21	5.46	3.81	2.25

Source: (*Verslag Mijnbouw Maatschappij Redjang-Lebong*, 1930:15)

The table displays the changes in budget allocations for various components, including labourers' wages, salaries, explosives, and movers, from 1928 to 1936. As for the system of providing salaries and benefits to labourers, it was classified into three types, namely for labourers whose work was calculated based on tons of ore that could be crushed, labourers who worked with contractors, and labourers who worked daily (daily labourers). To see the difference in benefits for these three types of labourers, you can look at the following table:

Table 6. Type of Allowance for MMRL Labourer

Type of Allowance	1928-1930				
	Contractor Labourer	Labourers by Work Outcome		Daily Labourer	
		Contract Labourer	Freelancer Labourer	Contract Labourer	Freelancer Labourer
Wages	f 11.934	f 8.110	f 3.824	f 2.022	f 4.411
Hospital Fees	f 909	f 750	f 159	f 185	f 185
Consumption Fees (Food and Beverages)	f 2.584	f 2.442	f 142	f 444	f 159
Recruitment Fees	f 1.706	f 1.589	f 117	f 260	f 145
Total	f 15.133	f 12.891	f 4.242	f 2.911	f 4.900

Sources: (*Verslag Mijnbouw Maatschappij Redjang-Lebong*, 1930:15)

The total number of labourers based on work status can be seen in the table below (Verslag Mijnbouw Maatschappij Redjang-Lebong, 1930: 16):

Table 7. Number of Labourers

No	Status	1929	1930
1	Contract Labourers	1266	1182
2	Freelancer Labourers	273	283
Total		1539	1465

Sources: (*Verslag Mijnbouw Maatschappij Redjang-Lebong*, 1930:15)

Table 6 shows that labourers at MMRL received different types of allowances based on their employment status from 1928-1930. The allowances provided included wages, hospital fees, consumption (food and drink), and recruitment fees.

Medical Treatment

A research report by Gulik investigated the time of day labourers suffered the most injuries. The results can be seen in the table below.

Table 8. Number of Labourer Injuries by Working Time

No	Number of working hours in progress	Number of injured labourers
1	First Hour	5
2	First 2 hours	19
3	First 3 hours	24
4	First 4 hours	20
5	First 5 hours	31
6	First 6 hours	38
7	First 7 hours	16
8	First 8 hours	2

Sources: (Gulik, 1930:61)

Based on the table above, it can be seen that the peak of worker injuries at MMRL is when they have worked for 5-6 hours. A total of 31 labourers were injured in the first 5 hours of work, and 38 labourers were injured after working for 6 hours. This shows the average worker's capacity to work at MMRL mining sites is at least 5 hours.

The most fatal injuries that have occurred to labourers at MMRL are as follows:

Table 9. Type of Labourers Accident in MMRL

No	Type of Accident	Number of Victims
1	Skull crushed (falling into a shaft or falling over a rock)	4
2	Dynamite explosion	3
3	Corridor roof collapse	4

Sources: (Gulik, 1930:61)

A total of 11 of these injuries occurred over five years, from 1925 to 1929. In addition to fatal injuries, Gulik also reported several injuries that were treated too late and resulted in severe infections. MMRL hospitals have also found the use of technology in the form of X-rays, as seen in the figure below.

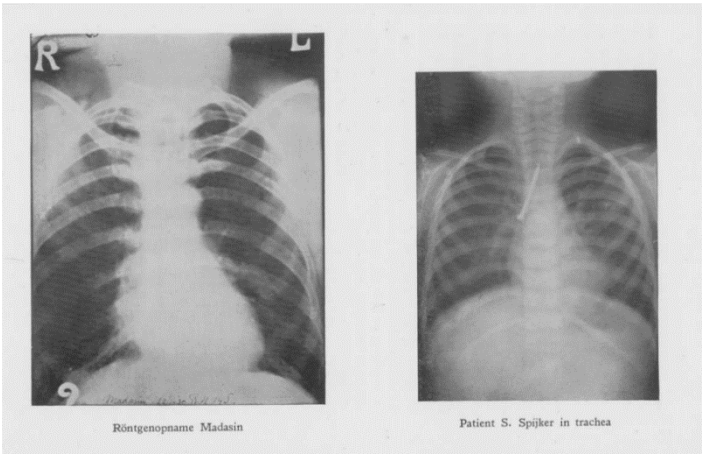

Figure 3. (left) Rontgenopname Madasin; (right) Patient S. Spijker in the trachea
Translation: (left) Radiograph of Madasin; (right) Patient S.Paku in the trachea
Source: (Gulik, 1930:76) Gulik

The picture above shows an X-ray of Madasin (left), an MMRL labourer with lung disease and a comparison with a 5-year-old girl (right) who swallowed a nail. Through this case, it can be seen that MMRL has facilitated the medical team with technological equipment to monitor the health of the labourers. In addition, MMRL provides rubber masks to minimise the dust entering the labourers' bodies. Gulik's data shows that contractors were the largest group receiving treatment, especially contractors outside Redjang-Lebong.

Table 10. Number of MMRL Hospital Patients 1928-1929

Patient Groups	1929	1929
Contractor	1185	1071
Outside Contractor	163	170
Casual Labourers	222	209
Women	183	206
Children	77	78
Total	1830	1737

Sources: (Gulik, 1930:95)

The number of patients above shows that contractors in 1929 experienced a decline. Meanwhile, children and women saw an increase in treatment days. This was due to their growing trust in Western medicine over time. The number of patient treatment days can be seen in the table below.

Table 11. Number of Patient Care Days at MMRL 1928-1929

Patient Groups	1929	1929
Contractor	9715	7996
Outside Contractor	666	836
Casual Labourers	1393	1240
Women	1384	1200
Children	387	335
Total	13545	14607

Sources: (Gulik, 1930:96)

From the data above, it can be seen that the most numerous patient group is contractors. However, if we focus on labourers, it can be seen in the table below.

Table 12. Number of Labourers' Treatment Days in Hospital by Type of Labourer in 1930

No	Type of Labourers	Total	Treatment Days
1	Contract labourers	1101	8945
2	Newly observed contract labourers	2	10
3	Casual labourers	199	1527
	Total	**1302**	**10482**

Sources: (*Verslag Mijnbouw Maatschappij Redjang-Lebong*, 1930:31)

It can be seen in the table above that 1302 labourers were treated with a total of 10,482 treatment days. This means that, on average, each worker was treated for 15 days. The total number of sick labourers reached 89.79% of influenza patients in Redjang-Lebong in that period, from a total of 1450 patients with 10,072 days of treatment in 1929 (*Verslag Mijnbouw Maatschappij Redjang-Lebong*, 1930). Contract labourers have the highest number of treatment days.

Post Office

There was one sub-post office in Lebong Donok, which was established on 1 September 1908. However, after two years, on 5 December 1910, this post office was closed. On the same day, a post office was established in Moeara Aman Town. The number of post offices in Moeara Aman increased in September 1932. Although it only existed briefly, the post office in Lebong Donok had its stamps. At the time, the post office in Lebong Donok could send letters overseas, an example of which is the letter below, sent from Lebong Donok to Berlin, Germany

Figure 4. Lebong Donok Post Office Stamps
Sources: (Ackerstaff, 2014:573)

Figure 5. Moeara Aman Post Office stamps. Left (first type stamps),
right (second type stamps)
Source: (Ackerstaff, 2014:574) Ackerstaff

Relationship Between H.J.A Sanders MMRL provides a post office near the mine to facilitate immigrant labourers who wish to communicate with family or relatives outside the city or overseas.**and MMRL**

Labourers

The farewell was organised in a highland place in Lebong. In addition, Sanders and his family also organised a rice meal together and played football together in Tjoeroep City.

Figure 7. Photo before a football match in Tjoeroep City. H.J.A Sanders
is in the centre wearing a round hat.
Source: (Ackerstaff, 2014:572)

Based on the photo above, it is known that H.J.A Sanders and his family spent time with the labourers on weekends. Every Saturday, they always organise entertainment events. Therefore, the closeness between H.J.A Sander and his family and the MMRL labourers has long been established.

Figure 8. MMRL labourers gather together in the yard
Sources:(Ackerstaff, 2014:572)

Figure 9. H.J.A Sanders Family Farewell
Sources: (Ackerstaff, 2014:572)

Discussion

In 1828-1833, the Dutch divided Bengkulu into nine regencies (landschappen) with the help of assistant resident J.H. Knoerle. One of the regencies formed was Musi Rejang, which included Empat Lawang and Rejang (Arios & Femmy, 2008). The Keresidenan Bengkulu, known as Benkoelen by the Dutch East Indies Colonial Government, was a region covering an area of 1,654 km2, consisting of the main town of Benkoelen and nine clans, as well as islands, such as Enggano Island and Poelau Tikoes, with a total population of more than 36,000. It is divided into the sub-districts of Tabahpenandjoeng, Pondok Kelapa, Talang IV, Benkoelen Town and Enggano. The main livelihood is rice farming, mainly on dry land (ladang) (Stibbe, 1939).

In addition, the leading economy of the Onderafdeeling Lebong is from mining activities, especially at MMRL, the largest mine. The company's gold mining achievements account for more than 90% of the gold mined (Verloop, 1917). Behind the success of MMRL, several factors support the achievement of high gold production. One of them is the social life of the labourers. In Gulik's dissertation, the social life of labourers at MMRL can be seen in several ways, namely wage and pension schemes, entertainment for labourers, coolie parties, and work accident insurance (Gulik, 1930).

To present a directed analysis, researchers used patron client theory. (Pelras, 2000) argues that patron-client describes the relationship between superiors and subordinates. Leaders represent patrons, while subordinates represent clients. In this study, patrons represent MMRL's investors and directors' superiors. Meanwhile, the client represents MMRL's labourers. Accordingly, the patron-client

relationship is a distinct mode of organising an essential aspect of the institutional order in society (Ferrol-Schulte et al., 2014; Jiang, 2018; Uberti, 2016). Patron-client relationships date back to Ancient Rome. However, the concept was later extended to ecclesiastical, artistic, feudal, and political parties on an international scale (Biermann, 2024; Humbas et al., 2021; Stephenson, 2019). The patron is perceived as providing patrocinium to the client, which supports its interests. In this study, the treatment received by MMRL labourers is the protection offered by the leaders (patrons) to continue to care for the labourers because the sustainability of MMRL will not be separated from the role of labourers. The treatment given is called patrocinium. Based on the research results, some forms of patrocinium provided by MMRL as a company are residential, allowances, medical care, and post offices as facilities for long-distance communication.

The many categorisations of labourers at MMRL beg the question, why are there so many categories of labourers when the differences are so subtle? They are doing the same work, but their wage system is differentiated. This is answered by Verloop's book, which argues that mining labourers are difficult to match with companies. This is because mining sites are often located in remote areas with poor hygiene and far from modernisation. Although the salaries are high, the biggest earners are the managers of the mining sites, who can earn up to 70,000 per year. Hence, the rise of Chinese labourers contracted by the company. Not just at MMRL, but at gold mines in the East Indies, there were 7.000 Chinese labourers (Verloop, 1917).

It is known that some Chinese who come to MMRL not only work as labourers, but also work as contractors or foremen at MMRL, although the majority of Chinese who come to Redjang Lebong become labourers (Nijhoff, 1928:533). However, it is not uncommon for Chinese labourers to object to the system of work at mine sites. This was because they had to dig caves in ore tunnels above the water table without machinery and water disposal (Verloop, 1917). For labourers from Java itself, MMRL is indeed minimal. This is because MMRL management has several times urged the government to support mass immigration of Javanese to Lebong, but to no avail (Verloop, 1917). This is due to the lack of food-related resource support and the hygienic difficulties of bringing labourers from Java to Redjang Lebong (Verloop, 1917).

However, many people still come to become labourers at MMRL because the wage fund allocation is considered quite promising. From the data found by the Researcher, it can be observed that there were significant fluctuations in the budget allocations for various cost items over the period. For example, based on Table 5, from 1928 to 1929, there was a significant increase in the budget allocation for coolie wages, from ƒ 31.98 to ƒ 39.02, while the allocation for explosives and movers also increased significantly (*Verslag Mijnbouw Maatschappij Redjang-Lebong*, 1930). The labourers whose work is calculated based on the ore that can be crushed are further divided into two, namely casual labourers and contract labourers. Meanwhile, labourers who work with a particular contractor will be given their work allowance through the contractor. Daily labourers are labourers who come to the mine on their own to ask for jobs and are paid according to the number of days worked. Contract labourers received the highest benefits, totalling 15,133, while contract daily labourers received the lowest benefits, totalling 2,911. Overall, contract labourers and casual contract labourers receive higher benefits than daily labourers. Table 1 and Table 7 show the number of labourers by employment status in 1929 and 1930, where there was a decrease in the number of contract labourers from 1266 to 1182 and a slight increase in the number of casual labourers from 273 to 283.

To provide medical services to the labourers, a hospital is strategically located close to the mining site. Labourers with minor injuries are treated at the hospital and stitched up if necessary. After receiving treatment, labourers are asked to return to the mining site and receive outpatient care. However, if the injury does not allow the labourers to return to the mining site temporarily, the labourers will be placed in a camp. (Gulik, 1930:60) recorded 232 labourers undergoing hospital treatment for injuries in 1928. Meanwhile 1929, there was a decline, with 169 labourers injured at the mining site.

Labourers who died or lost body parts received insurance claims from the company. In 1928, 23 labourers were seriously injured or 10% of the injured labourers. In 1929, 22 labourers were seriously injured, or 13.4% of the wounded labourers in that year. This is the number of injury cases with insurance claims due to severe injuries (Gulik, 1930:60). Serious injury occurs because mining operations at MMRL run non-stop, day and night. Serious injuries often occur to labourers who have been working for several hours. This is due to fatigue, which results in a lack of focus. It is not uncommon for labourers to be poisoned by hazardous substances at mining sites due to their lack of caution. The intensity of a

labourer's chance of injury depends on the point of work. The survey conducted by Gulik shows that the Niveau X site is most prone to injury. Meanwhile, outside the mine (still within MMRL), the ateliers and the crushing plant are the most injury-prone work sites. Although there is also potential for injury outside the mine site, the incidence of injury shows that the potential for injury inside the mine site is four times greater than outside the mine. In 1928-1929, 60 cases of delayed wound treatment led to severe infections. The available medical team gave anti-tetanus injections, after which they poured iodine solution and sutured the wounds if there were lacerations (Gulik, 1930:63).

In addition to external wounds, labourers at the MMRL were also at high risk of respiratory or lung diseases. To ensure the labourers' respiratory health, the medical team at the Central Hospital conducted X-ray examinations. The first X-ray examination was conducted in June 1929. However,(Gulik, 1930:65) reported that the average worker developed lung disease after ten years of employment. One MMRL worker, Madasin, suffered from chalicosis, where an X-ray of Madasin, a Javanese labourer, showed a more pronounced cord from the hilum towards the lower two lungs, elongated fan-shaped, and an enlarged shadow of the hilum. Cells containing dust particles are often found in sputum. However, Madasin and other labourers with similar conditions had no complaints.

Apart from respiratory diseases, there is also lumbago, which is considered a common disease of labourers and is known as an industrial disease. The symptoms are pain at the waist. In addition to lumbago, there is water eczema due to the presence of acid that reacts, is warm, and causes unnatural changes in the skin. There is also a disease caused by poor lighting in mines, known as nystagmus(Gulik, 1930:68). Female labourers also suffer from many illnesses. Some female labourers have reported not having menstruation for several months. One example of this is the illness experienced by a 35-year-old Rejang woman. It was mentioned that the woman had three children, the youngest of whom was about ten months old. However, she felt heavy in her stomach for three months, felt weak, and had no appetite. The diagnosis given to this woman was a right ovarian malignant tumour (Gulik, 1930:74).

There was also a 40-year-old Javanese woman who experienced severe abdominal pain accompanied by vomiting and fainting and was two months pregnant. It was mentioned that the medical team found heart and lung abnormalities in the woman. The diagnosis given was extrauterine rupture of pregnancy (Gulik, 1930:73). This disease was also experienced by a 38-year-old Chinese-Javanese woman with complaints of 10 days late menstruation (Gulik, 1930:71). Genital diseases were also recorded in Gulik's medical records (Gulik, 1930:76). A 50-year-old Chinese man was found to have decay on the penis. The diagnosis given was carcinoma (cancer cells) growing around the body part. After surgery to amputate the penis and being treated for 14 days, the patient was advised to return for a three-month check-up, given the distance he lived in the forest. However, when he returned for a check-up three months later, he brought along his wife, who, upon examination, was found to have cauliflower-like cervical cancer. However, his wife's application for surgery was rejected, and six weeks later, she died.

As early as 1928, 37 gonorrhoea and ten lues were recorded. This figure increased in 1929 when there were 38 gonorrhoea patients and 11 lues patients. The primary source of these venereal diseases was casual sex in the hotels located in Moeara Aman. It is known that the local government was not cooperative in eradicating these venereal diseases. Meanwhile, the incidence of venereal diseases continued to increase because the labourers who had casual sex in the hotels also transmitted venereal diseases to their wives (Gulik, 1930:83).

For the treatment of childbirth, a particular doctor for obstetrics was provided. However, lower-class indigenous women often performed normal childbirth without the help of a doctor. Meanwhile, the wives of supervisors and more educated native women, such as the author, entrusted the matter of childbirth to European doctors (Gulik, 1930:69). Because of the ability of these doctors, the community increasingly believed that the European medical team was qualified. From here, we can see that either the natives are less knowledgeable or they still have trust issues with the services provided by MMRL. It can also be understood that not all treatments given by MMRL are well received by the labourers.

The hospital attended a total of 269 deliveries from 1925 to 1929. Since 1928, 31 boys and 23 girls were born. This increased in 1929, when 32 boys and 31 girls were born. Although the birth rate increased, the infant mortality was still too high. To reduce the infant mortality rate, every child was required to come with their parents to the hospital twice a year. This visit was to receive a smallpox vaccination (Gulik, 1930:81). The children of labourers had poor health because they were not born healthy. Usually, the labourers' wives preferred to give birth with a traditional healer (dukun) rather than

with the doctors at the hospital. This caused many of their children to suffer from congenital physical defects and even death.

(Straub, 1927) conducted particular research to investigate the high infant mortality rate in the MMRL. It was found that infant mortality and congenital physical defects in children were due to the lack of adequate nutrition and treatment for their mothers during pregnancy (Gulik, 1930: 81). In addition, there was also the phenomenon of family sickness, where when a family member was sick, usually a labourer's child or wife, the whole family would be admitted to an empty hospital ward (Gulik, 1930:82). Parasitic diseases have also affected labourers at MMRL.(Gulik, 1930:89) mentioned that the examination of MMRL labourers for parasitic diseases was done by dividing labourers into two groups, namely old and new labourers from Java. The older labourers had worked in the company for many years. Three hundred sixty-eight men, 178 women, 57 sons, and 39 daughters of the labourers' families were examined. The results showed that five men and two women were positive for parasitic diseases. The disease was accompanied by a 1% infection rate with microphilia malayi.

The examination of new labourers was conducted in the quarantine section of the hospital. One hundred twenty-six men, 19 women, seven boys, and one girl were examined. The results showed that four men were positive for parasitic diseases. The labourers identified as having parasitic disease were from Tjipari Village, Tjilatjap. There was also a contractor working in Deli who had a mixed infection of mf. Bancrofi and MF. Malayi (Gulik, 1930:89). The increase in labourers' hospital days was also due to several epidemics that had affected Moeara Aman Township, such as measles and malaria, recurrent cough, amoebic dysentery, pneumonia, and others. The contact between MMRL labourers and residents in the doesoen-doeson caused the epidemic to spread to the community. In addition, the pneumonia epidemic was caused by high rainfall in May-August 1929. Meanwhile, the malaria outbreak was caused by fish ponds in several places (Gulik, 1930:46-101). However, because of these epidemics, MMRL labourers began to be open to medical treatment, having previously not believed in the positive effects of medical treatment. As Setiawati et al. (2024) described, epidemics and pandemics have taught society many lessons, teaching people how to achieve freedom from health crises and create a healthy social environment for people of all ages.

The labourers' facilities are the company's MMRL policy, which a Dutchman, H.J.A. Sanders, administrates. H.J.A Sanders, the administrator of MMRL, is said to have a good relationship with the labourers. This is evidenced by photos of labourers socialising well with H.J.A Sanders and his family. (Ackerstaff, 2014) explains that the separation between the labourers and H.J.A Sanders' family occurred in 1937. After a loss in 1936, the stamping company closed, as did H.J.A Sanders, who closed his position as Director of MMRL. Based on figures 7, 8, and 9, farewells were held at Doesoen Lebong Donok, the MMRL premises, and Tjoeroep Town. However, based on the interaction between the labourers and H.J.A Sanders at MMRL, the patron-client relationship is well illustrated. The labourers still look familiar with H.J.A Sanders and his family. Even in some of the photos, the labourers are smiling. Similarly, H.J.A Sanders' family can blend in well with the labourers. This is also inseparable from their dependence on each other since they established a working relationship as superiors and subordinates

Conclusion

The patron-client relationship at MMRL is characterized by a hierarchical yet somewhat cooperative dynamic between the company's Dutch management and the Indonesian labour force. This relationship reflects colonial Indonesia's broader socio-economic and political context, where European companies relied heavily on local labour for resource extraction industries such as mining. The company categorized labourers into three groups based on their employment terms: contract, freelance, and daily. The paternalistic approach adopted by H.J.A. Sanders as MMRL administrator also shows the dynamics of the relationship between management and labour. Sanders tried to get closer to the labourers through various social activities and attention to labourers' nutrition. The excellent relationship between Sanders and the labourers is reflected in social events and routine activities, such as eating together and playing football. This togetherness creates a strong social bond, although challenges remain in ensuring labourers' welfare. However, as we know, Sanders' paternalistic attitude shows that a symbiotic mutualism exists, where the labourers want a job supporting them and the company Sanders is leading needs labour. However, at the end of his tenure, Sanders showed good behaviour.

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