Subjectivity
ETHNOGRAPHIC STUDIES IN SUBJECTIVITY
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Subjectivity
Ethnographic Investigations

Edited by
JOÃO BIEHL, BYRON GOOD, AND ARTHUR KLEINMAN

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A Subject of Mental Illness

Mad Violence,

Mortality in Indonesia

ELIUSUBANDI AND MARY-JO DELVECCHIO GOOD

It was a sunny day in August 1997. Subandi and I went to meet Yani, a thirty-six-year-old Javanese woman who had participated in our study of mental illness in the old city of Yogyakarta. We had first met her for an interview two months earlier and hoped for a follow-up interview. We walked down a narrow alley through one of Yogyakarta’s poor kampungs, a crowded path that spills downward to one of the rivers running through the city. Children, women and young people sitting in open doorways, chatting in the heat of the day. We found Yani and her older sister. The sitting room was opened for us, and we were greeted warmly, to find Yani in apparent good health, smiling at us. Her mother appeared happy to see us. We chatted with them, took out our tape recorder and picked up our incoming tape. A short time into our conversation did we learn that Yani had undergone a psychotic episode in the two-month interval since we had last seen her. Her mother said that she had just begun to recognize the signs of getting sick when we were last there, signs she knew from her earlier episodes. Together, Yani and her mother told how she had been treated and had decided not to return to the private psychiatrists who had been taken for treatment on several previous occasions. She had decided to rely on the prayers she had received from an Islamic teacher whose group she had been attending. Both Yani and her mother were delighted to tell us how the prayers and how quickly and completely she had re-

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Hearing her story, however, reminded us of several other patients who recently interviewed and crystallized our sense of a cultural pattern. These persons had had relatively brief episodes, some of them suffering only one episode and some of them recurrent episodes. They experienced classic anxiety, depression, confusion, and several of them also told stories of going on a religious pilgrimage—around the city, to a nearby town, along the river—remaining lost for some time before being found. These episodes also tended to be rather short, not lasting longer than the duration criterion for schizophrenia, and we met these patients were clearly intact—interestingly diverse people, but often young, who had no apparent residual symptoms of a mental disorder. Some had enough depressive symptoms to fuse the diagnostic picture. As we heard stories of the lives of the individuals and their families, classic themes from psychology emerged, reflecting a broadly shared life-world, but predominantly Javanese and Islamic old city.

We begin this paper by telling stories that Yani and his family and about their efforts to come to terms with Yani’s strange behavior. Background questions about the nature of this and other cultural shaping of psychotic experience in Java, however, suggest about Javanese cultural psychology and also are questions about mental illness and biography and about the “biologization” of those subjected to contemporary psychiatry in Indonesia. But these stories of mental illness lead to the madness and violence that erupted during our stay in Yani’s subsequent years of political turmoil in Indonesia. The old man who goes crazy, runs amok, and is tragically killed by his fellow villagers; stories of violence during the 1997 political unrest by Indonesian journalists as the masses going amok; older stories of Malay madness told by colonial police; stories of strange killings of Islamic dergmen by ninjas; stories of madmen who turned out to be wandering madmen.

In the lovely paper “The Spirit of the Story,” Mary Douglas places her recounting of a mythic tale from the Karo Batak of Sumatra with a quote from Italo Calvino’s novel, Iluminata. Traveler.
The Subject of Mental Illness

...the city maintains a commitment to organized spirituality, cultural performances, and aesthetic life. And in this complex center of Javanese and Indonesian culture, along with its network of rural and periurban villages, our research. Our study of mental illness is classically an attempt to explore dimensions of Indonesian and Javanese society by focusing on the language and experience of common forms of psychological distress and madness, and to examine the naturalness of categories of mental illness phenomena—rooted in Euro-American cultural history—is commonplace. At the same time, our data include observations of the "eyewitness" of events that thrust themselves upon us, and upon by accident. These observations allow us to expand our understanding of madness outward to that larger "space full of stories."

Yani and her mother for an interview in June 1997. Yani was the eldest of four siblings. Her father had been a tailor in the university town, working personally for the prominent physician who was his relative. When Yani was six years old, her father died, leaving her mother and her mother's mother, who relied on a government pension, in debt from her father's death. The family was poor, and Yani and her siblings had to go to the university. They eventually graduated with a degree in agriculture in 1960 and in 1961 and in her mother that she must have been happy with her illness. She replied, "Yes, very happy. But after she got well, I realized I didn't know... I don't know, it was like when you plant a tree to bear fruit, but in the end it does not bear fruit, like this" she began to talk about Yani's illness, with her mother's acknowledgment of her disappointment in Yani."

Suharto in 1998. Yogyakarta is a city of universities and students, and intellectually progressive, an active center of modernist art and political organization and a center of traditional arts and religiously diverse, with a sizable Christian minority and many traditions and organizations. And it has a portmanteau name, warung, tiny warungs, or shops with computers linked to the Web; banners announcing lectures and seminars on diverse issues like alizasi, or globalization; and malls that were filled with commodities before the disastrous krismon, or monetary crisis.
And how did she feel when she was sick? She would be mangkel, they said, using the Javanese term keerew, from pointed. And with whom was she irritated? It isn’t necessary that was in the past. But yes, in the beginning she was irritated with a person, an acquaintance in the university, but as time went on, irritation at home became difficult, everything piled up. And when she was sick, then get better, then get sick again.

SUBANDE: And when you were sick the first time, what did you feel?
YANI: The first time, it was because of being pengkel, but the following times, sometimes it was because the attitude of was not cocok, not compatible with me.

SUBANDE: So what were you feeling and experiencing at that time?
YANI: Yes, at that time, the feeling of my heart was not at ease. I did not have (enough) religious knowledge (ilmu agama). Then I had to read the Qur’an, then I studied religious knowledge. Then I didn’t feel so easily pengkel, irritated, by other people. But when I had religious knowledge, what happened to me was that I sometimes stand clearly, so that I questioned why what I saw another that I am doing didn’t fit with the religious knowledge that I was holding.

SUBANDE: So what did you do?
YANI: What I wanted, I wanted to have religious teaching. I built an Islam that is pure, murani, original. Therefore, I went out of the house.

SUBANDE: Oh, to go? To go where?
YANI: I wanted to have a pure Islam, for example like that in Saudi Arabia.

YANI’S MOTHER: At that time, she left the house. She has already been away from) the house two times. At that time, when she was away, she went and then returned home again; she turned herself in police, and asked the police to tell her mother, and then me picked up in the police office. The second time, in Jakarta, at the place of sister, she also ran away. She was sick again at that time and she was going to go to Saudi Arabia, but in reality, because she was walking along the toll road. [When she was asked by me where she was going, she said,] “I want to go home but I don’t know why.”

Her mother completed the story of the Jakarta episode by telling police sent her home by a motorcycle taxi, in the ear of a friend. She became sick even though she had no money.

And thus, with these brief vignettes, the initial outline of the relationship with someone she had known as a student, leaving her disappointed, frustrated, and angry, but sometimes she had the nagging feeling about it. Her mother later confirmed that she was a touching story about her friend. She had been close with. After graduating, she had gone back to Jakarta. She had had difficulty making friends, had gotten her friends, had returned home. She has continued to live in that time, remaining in the small home in which she grew up. She now has a routine relationship with her mother, who is primarily responsible for her whenever she is sick. She has been sick many times, and in her episodes, she left home, wandered off along a river, and on many days. It was this brief outline of a story that we attempted to explore, during this visit.

YANI again two months later. In the meantime, we had arranged with Pak Han, a kiyai, or Islamic teacher, whom Yani had sought religious treatment. He knew Yani but knew little of her illness or of psychotherapeutic relationship with yani, essentially of what that term. In addition, Subandi had stopped by to get a Trinidad translation of the Qur’an as a gift, and had been told that she might be sick and could not see him at that time. Subandi warned that Yani might be sick and feel that our discussion was unsuccessful for her. We arrived, were relieved to find Yani and her mother happy to see us, and chatted comfortably for some time before moving more formally into an interview. A spirit and spirits, showing no appearance of illness, and she seemed more at ease than the last time we were together. She was thus surprised when Yani launched into the story of her life.

In the Islamic prayer (doa), the doa which should be recited because every time after practicing sholat (the formal prayer), I recited this doa. When I was disturbing myself, I involuntarily pinching myself, twisting the skin, and pulling my hair, pulling my hair, and it hurt. My mother held my hand, trying to stop me. Then every time after sholat, I said this doa. Then, I told Pak Han that as taught by the Prophet was already proven. The doa
her the Qur'an, she could only sleep. I asked her to do something, but she didn’t want to do anything, she even didn’t want to eat, she was so cold,” Yani broke in, “my feet were rubbed with hay, then my mother näremimil (mumbled a prayer or mantra) so cold, I was so worried,” her mother responded, “it’s a mantra,” Yani continued. “Why did you recite mantra (cocok) for me to be brought to a dukun (a traditional healer) for a mantra,” her mother responded in good spirits. “It was very late, I recited whatever I could, like ‘astagfirullah alhamdulillah, bismillah,傷しや, whatever I could do. But Yani was angry. Why do you like using mantras?’ ‘This isn’t a mantra, this is tawbah, Islam,’ I said like that. When she got sick, I became like her teacher to be really patient, sabar. She recovered after I recited them every night forty-one times, for almost one hour.”

Yani provided vivid descriptions of the experience of her illness. Unlike our previous meeting, when she seemed mother for her difficulties, she seemed to have a relatively calm experience as illness.

“When I was sick, it seemed as though there was a whom from my ear, my hand twisting my skin until I hurt—” her mother interjected. “What was the whispering like?” “Speaking in whispers was continuous, you are still small (still commonly for a small child), but you have to be responsible, my thought was pressed down, suppressed.” She described her people, because her feelings would be hurt and she would get “That is why I stayed in my room. But when I didn’t struggle to make me eat, so I have become small (sabar), suggesting an image of regression.

She returned several times to the strange changes in the house seemed that there was something pressing down, so my thoughts in my own, the thoughts were pressing down, being pressed down, the whispering over-lapping, one coming before I finished, it was not me. Why was I controlled by something else, there was a being inside me… Inside my body, there was not me myself, like that, like that.” Or again, the thoughts I pressed (pikiran itu ditekankan) from the inside of my thought, obviously, the ears were whispered (into), as if my life was not like a robot. Why was I like a robot? thoughts were not the whispering. Hands were controlled… When I pretended that I was not the one who took control?” Bandi asked. “According to me, from the outside. So there were other people who hate, jeak (jejak, jejak, (Javanese),” she said, using a term that implied ‘black magic’ [said in English]—last time you asked me if there was one who attacked, that the problem was in the inside. Now I invite my previous interview into her story. “After I became better, there was this attack from other people.” By whom?

“Bu how did you see them?” Bandi asked. “Yes, there was someone who was suspected, my mother already knew… It was not his own fault, suggesting that the perpetrator had hired a specialist to attend a long story about the man she suspected. He was a…” Yani, she had previously described as her panger, the boyfriend returning to Yogya. She told a rather vague story about the house with his sister when she worked in Jakarta, but clearly. One night she woke to find him standing near her, returned to the present and told an elaborate story about her prayer gown, thinking her mother had done something, not remembering that this man often talked about fishing and had books in his house. It is difficult to tell if this is paranoia and a fixed certainty or simply has a “subjunctive” mood 1994, p.6, suggesting the indeterminate, mysterious, shifting dimensions of reality. Such stories are thoroughly explored by the worldview of Yani and her mother, and this one provided an interpretation of her strange experiences as resulting from a combination of thoughts not her own and a power that was not her
behind my house whose name is Aziz, his voice changed... a voice of someone... it turned out like that. So it was, if I heard voices, or there were voices, like 'dug-dug-dug'... it seemed to me. People who usually help me became like my enemies when I went on, "People seemed like different beings, because I heard voices in my head. I even asked my mother, are you a spirit, or are you someone else?" "When she got sick, she thought I was a little bit crazy... so we were in conflict. She thought I was her enemy."

Finally, Yani returned to the story that she and her mother mentioned earlier in the interview about how she had left and gone off to the river again. She had been bothered by noises such as the noise of the small children playing outside, which wanted to go somewhere quiet. So she went to the river again beside it. A farmer found her lying beside the river and urged her to come to his house, to be with his wife, so that she was not bothered by young people. And then suddenly her health improved. She continued to live her life, beyond her control, simply moving as though it was her will.

"I just wanted to find a quiet place. I told my mother I wanted to clean my body... I just wanted to stay quietly in my home. My body was a dirty thing. I told my mother I wanted to stay in the house. I ate, but I said if you disturb me, I will kill myself by using prayers." "You cleaned yourself because... "There was whispering, the feeling of pressing, and sometimes I was not my own self; it was hard. So when I got sick, I told my mother. She offered me medicine, but I wanted prayers. I was my doa weak. And then we argued until I cried." And they tell us about how she had used prayers, rather than medication, for recovery.

We returned a year later, in August 1999, to visit Yani and her mother greeted us, saying, "Oh, Yani remembered that we posed to return in June, and she was looking for you. She is so sick. Yani. Though it was midday, we heard her asking Yani to get out. She realized she must be sick again. Yani joined us, looking rather pale, her hair was wet, from rinsing her face, and she wore an inappropriate dress for meeting guests. She spoke with us quite clearly, using abstract terms. She refused to be tape-recorded, and her voice was so abstract as to be difficult to reproduce; she talked about..."
Finally, we learned from Yani's mother that Yani's father had an episode of paranoia not long before he died of a heart attack. He secretly borrowed money and set up a small sewing business in the neighborhood, refusing to tell his wife about it. The two men were poor managers, and the business was failing. Then the father began acting strangely, staying awake at night with a weapon to protect himself. He began to feel that the business was threatening him or that he might be accused of being a spy, when he was not. At the time, in 1967, many members of the Indonesian Communist Party were killed throughout Indonesia, including Yani's father. The fears of this kind were potentially realistic. However, Yani's mother said that her husband had become sick and withdrawn, had dropped out of work, and had finally been hospitalized. While hospitalized for his psychiatric problems, he died quietly of a heart attack.

REFLECTIONS ON YANI:
CULTURE, BIOLOGY, AND SUBJECTIVITY

We turn now to brief reflections on Yani—on the stories she tells us; the stories we might tell through retelling her story, and the subjectivity assumed by these. Yani's experience might have been described in the cultural phenomenology of mental illness in Java. Java is a land that debates about whether Islam should be purged of its traditional Javanese elements, mediate her experience. Yani's illness has an obsessive quality. She wants to practice only those acts of Islam. She talks about the rules for fasting and complaining that when she wishes to fast on certain calendar days she can't keep them. However, when asked if she has been praying regularly, she says too lazy, malas, or that she doesn't need to because she has faith. She becomes ill, she continues to talk about these themes but in a more abstractly, in global terms, focusing on the lack of a sense of purpose.

Themes of Islamic purity and impurity, linked to a similar classic Javanese culture, are also important meditations of her story. She begins to feel that the house is haram—defined, forbidden, her clothing, the neighborhood are all haram. Her body is dirty, so she goes on a quest for a place that is pure, holy, in that category of purity is not a cognitive abstraction but an embodied

Yani, feelings that the body is impure often play powerfully in the minds of being sinful and guilty and of having disappointed one's family. Yani's discussion of the importance of being, less depression quality, and it provides a motive for these periods of wandering.

The present in her discourse as a potent source of healing. The relationship with her mother, offers the possibility of recovery. And their power is threatened by pharmaceuticals, Yani's practice—daily prayers, repetition of sura from the Quran to organize her behavior and mark both her illness and the routine of daily life and regain her ability to concentrate.

Each magic figure in her discourse and experience, and powerful experiences of illness are present in the psychosocial sense. Illness is a world of spiritual practices aimed at enhancing one's inner powers. There is thus less of a disjunction between subject and object of illness—of those who are sick and those who are sick. There is less of a disjunction between illness and the world, and that of those who are sick and those who are well. Yani's story and that of her mother is told in both worlds. As some persons who are sick and well, and those who are well and have experienced illness. For example, Yani's world and that of her mother. As persons who are both healthy and sick, and that of those who are well and those who are sick. Yani's illness and that of her mother as both healthy and sick, and that of those who are both healthy and sick.

Themes of Islamic purity and impurity, linked to a similar classic Javanese culture, are also important meditations of her story. She begins to feel that the house is haram—defined, forbidden, her clothing, the neighborhood are all haram. Her body is dirty, so she goes on a quest for a place that is pure, holy, in that category of purity is not a cognitive abstraction but an embodied
amples of psychosis-related confusion but also tales in Hindu literature—in the Ramayana and many other texts—of heroes who go off wandering (rāgelelama) in the forest and encounter monstrous ogres. The heroes confront the evil forces, enter the ogres' home, and then turn transformed, bearing enhanced power and status.

Conveying the texture of this lifeworld is essential in understanding the subjectivity of those suffering mental illness in Java. The lifeworld is constituted as fields of force, which impinge on and threaten the vulnerable. Persons are understood and experienced as powerful, more or less vulnerable, and nearly all Java residents practice to enhance their inner power and protect themselves from forces that would harm them. The terrors of psychosis are thus inherent in the lifeworld.

A more psychological story, rooted in Japanese culture, could also be told. Yani suffered the loss of her father at an early age, in an intense and conflicted relationship with her mother and sister. She seems quite sensitive to losses. For example, she used to sit, which translates literally as “frustrated” but suggests the feeling of the child has when he or she does not receive something he expected, to describe her feelings of loss when her relationship with a man she hoped to marry was cut off. Her stories of her relationships with men since that time are colored by the fact that she has long revealed ambivalence about how close to get to men, a longing for love but a fear of relationships as dangerous. And ultimately, she thought was a friend, who later appeared threateningly to her. Jakarta, she now suspects of causing her most recent illness, was the magic against her.

These retellings assume a cultural and psychological role whose experience has depth and coherence lent by his language and psychic structures. But biological versions of the psyche also exist that are quite different from the cultural perspectives briefly outlined. One of these retellings belongs to a more complete medical anthropology or cultural psychiatry and more biological psychiatry. The larger project in which we are interested—looking at the symptoms and course of the psychoses explained by current diagnostic criteria (in manuals such as the International Classification of Diseases [ICD-10] and the American Psychiatric Association’s DSM-IV), and the role of social factors in influencing the diagnosis of psychotic illness. The details of this work involve the nature of brief psychotic disorders, particularly those seen...
either of these drugs. They are too expensive." (By some estimates, drugs were in much wider use.)

Although the sponsorship of academic sessions by drug firms—a widespread practice in much of the world—and the concomitant pattern of the Continued selling of new drugs for schizophrenia, it is part of the context of transnational psychiatry. Massive technologies and protocols for research for biological essences of mental illness—seeking genetic markers, linking the genome to expression to protein synthesis to neural to neuroendocrines to madness. This truth quest belongs to the industry of knowledge production—but also one that seeks production, marketing, and consumption of pharmacological practices, such as Indonesia are peripheral sites—sites of incomplete commodification—for the marketing of drugs, teaching of diagnostic practices, and development of mental health institutions in the Indonesian Psychiatric Association congress belong to a "regime of truth." They produce fantasies even in the objects, and for the psychiatrists, they facilitate an experience of a sense of belonging to the cosmopolitan world of madness for a moment, and an opportunity to imagine a future reconfiguration of the production of modern biopranalities.

Of course, a counternarrative—or perhaps a more dominant—situation psychiatry amidst an emergent modernity, which takes as a gap between the present and the ideal and as a moment essentialized Javanese. Psychiatry as practiced by many Indonesians is confounded by a lack of resources; is experienced as a deeply medical practice, bedeviled by incompetence and limited by practitioners, new medications, laboratory facilities, and so on. Many Indonesian psychiatrists feel as if they are practicing in a past, relying on drugs and procedures from the 1960s rather than psychiatry’s cutting edge—prescribing haloperidol rather than the atypical antipsychotics discussed at the congress. This gap, produced by modernity, lends a sense of tragedy, a sense of tragic inadequacy in desperate need, simply because resources are lacking. It is often shared. It also produces feelings of inadequacy and shame, physicians. Little wonder that participation in a scientific conference is always a relief from the daily world of practice.

The other face of modernity is nostalgia—a nostalgia for an older Indonesian world that is giving way to industrialization and rationalization and disenchantment. Some psychiatrists speak in an older form of enchanted healing, reporting that they have

Federal and when it is caused by a spiritual force. Some of the healers outside their medical clinics. Others point to Indonesian values, particularly among the youth, as a cause of personal problems and increased psychopathology, evincing a cultural past.

As a "biosocial," its reading of mental illnesses as biologically driven, and yet requiring a set of medical responses, belongs to an expanded cultural truth and pharmaceutical markets. But it also belongs to the world of increasingly effective medications, to a cost of progressive medicine, and to one of Indonesia’s primary industries: the small Indian and Chinese community. In a low-income society like Indonesia, participating in such a project, with its deep commitment to a sense of inadequacy associated with postcolonial identity, is thus a complex project, only partially achieved, and one that is not unique to this narrative as well.

THE MAD VIOLENCE

AND POLITICAL DISCOURSE

We should stop at this point—to attempt to draw some conclusions from the study and the analyses we have outlined. However, presenting an incoherent narrative, we turn briefly to another aspect to consider madness and violence, a network of stories that surmount, and frame the other more clinical discourses that we have been describing in order to raise broader questions about the relation between subjectivity in cultural phenomenology and in critical theory.

During our interviews with Yani and others who suffered during the 1997 korevois, we were unable to ignore the political campaign that had been carried out in April and May 2007. korevois of youth on motorcycles or "bikers," elaborately decorated in party colors and carrying guns, roamed the urban streets throughout Indonesia, as part of the street battles in the final election of Suharto’s New Order. Although little opposition was allowed, the korevois of kampung youth had been a form of protest and class resistance, and they occasionally attacked bumil (see Chapter 8). News reports of the campaign and of the riots in several cities in the year characterized the election as the most violent
scholar, was invited to Yogyakarta's Institute for Journalists for news reporting in Indonesia. At the end of the talk, the journalist for my observations. [BG] observed simply that I was under a near-exclusive focus on campaign violence in the papers. It was not that the violence was reported but that little was reported, focused solely on where it lay along a continuum from order to disorder. Reporters asked whether I thought this emphasis was a matter of quality of reporting or a matter of naturalizing order and treating nearly all political unrest as disorder and thus disruptive of social and political order and potential forarchy.

As I thought later about these comments, I began to think about characterizing political violence as a form of "madness," as a function of pathologizing political protest. A mentally ill man focused our attention on one aspect of the violence.

We found a Javanese friend, a woman from a poor village who worked on the university staff, in tears one afternoon. It was not yet clear, but a man from her village had gone mad and had been killed by a group of village men who attempted to subdue him. He had been mentally ill, though he was relatively well on that day. The police had taken members of her family for questioning. The next several days, the story began to emerge, as the entire neighborhood traveled back and forth to the village where the murder took place. The man who had been killed was a man we had seen on video several months earlier when we had visited another friend's village. He had written to me in a way we later learned had been inappropriate. The whole village was rich, and the man was despondent about the state of the village. The story emerged that he had been periodically mad, and that before, when he sold his house and land to the government for a television relay station. As workers began preparing for the sale of his house, he had begun to go crazy. People speculated about what he had lost. Perhaps the stress of selling his land and seeing his home and farm was too much and he had become crazy. Perhaps the stress of his mental illness had been angered and had possessed him. Or perhaps the hit of failed piah he had received from selling his land had attracted spirits to him as a target of black magic. Whatever the reason, this case was one of the first time in his life, to suffer him, he would become violent, threaten other villagers, chop down the agricultural plants, and resist their efforts to stop him. The incident had been reported several times. Each time he would have his wife and become violent again. Villagers were fed up with his behavior, and the police had stopped responding.

A few days later, it was reported that he had become violent again, attacking a villager. When the man's family tried to stop him, the old man killed him. The man called a friend, but the two friends were not in the village. The two ran for help, found a group of forty village men working on a small road, and asked for help. They were too far away. When he threatened them, they picked up a stick and ran. When the incident was over, the old man was dead. Further, the village was up in the affair, helping support our friends. The two men were held for questioning. My attention was drawn to the interesting reporting of the reports in the local newspapers. One report, for example, was an account of this event. It read, "At the culmination of the emotional events, the owner of the menangon penduduk yang terus mengajar dedak, each the Indonesian verbal form anganuk or the Indonesian form amuk (or "amuk").

More commonly in the noun form amuk (or "amuk").), are cultural psychiatrists (and have, of course, entered common culture) in the literature on "culture-bound syndromes," especially in Southeast Asia—a term often from Malay culture—who suddenly goes crazy, not as a form of mob violence by a group: the madman, the one of the group who killed him. From this perspective, the case of the old man was interesting because it was an example of a much broader phenomenon of mental illness than this literature usually describes. The term amuk nonetheless was used.

When the case occurred, it also drew my attention to the use of the term in the newspaper stories about campaign violence and the use of the term amuk in a headline in Kompas. And so it goes: observers frame the violence as the masses running amuk, as kerusukan or riots, as anarchy, or brutality, of the masses. This conjunc-
tion set me to thinking and suggested the value of research— the historical writing on *amuk* (usually translated as *madness* or *insanity*)— and mass political violence.

Here, we can provide only a few examples of the political violence that might yield. *Amuk*, in its restricted meaning as a psychiatric diagnosis, was defined in 1951 by P. M. Yap as “an acute outbreak of unreasoning, wild behavior, associated with homicidal attacks preceded by a period of being in a daze, with exhaustion and amnesia” (41). This view of an acute onset of amuk was based on reports by travelers, journalists, and colonial psychiatrists, as well as more recent analysis by psychologists and sociologists, including anthropologists, in particular from the nineteenth century onwards. Among the most recent of these reports—from Malaysia, Singapore, Java, and Sumatra— is the "amuk"—becoming depressed, brooding, and suddenly going on a killing spree, which ended only when they were subdued. These cases included individuals who were quickly identified and after brooding, retaliated, until the incidents culminated in the *pengamuk*’s death.

"The impress of the primitive mind lies broad over all the events; the inflated self-esteem, the proportionate amount of self-wounding of it, the tendency of the resentful to pass judgment against the offender, the necessity of re-establishing the appeal to arms... thus explains the action towards which quoted in Winzeler 1990:109).

Or, in another example, Van Loon, a Dutch psychiatrist, Batavia Hospital, writing in the *British Journal of Mental Science* in 1928, combined a cultural and developmental view. There were unbearable shame and embarrassment, especially when in the public, in *mata gelap* (blind rage) and in the *binisut* (shame, etc.), the Malay shows the same characteristics of *resistance against sudden emotion* (167).

Following this reading into the writing on political violence, I find many similarities in the grammar of the discourse. The nature of political violence can be described as impulsive or instinctual, and developmentally primed and uncontrolled—and exotic—antisocial behavior. And, as a single event, it is an overwhelming emotional response to humiliation. Analysis of the sources of mass violence in the late 19th century drew on a similar logic. Mass violence indexes a lack of bound and intellectual development, suggesting that the masses are not yet ready to govern themselves. It represents pathological, impulsive reactions to frustrating social conditions. The presence of the term *amuk* in the popular press reports on the campaign-related events is used to naturalize a reading of mass violence as pathology. The term *amuk* is a complex resource for interpreting views of mass violence in Indonesia.

As noted in the colonial literature does not begin as a psychiatric diagnosis but entered European languages in the mid-sixteenth century as a term of exceptional courage—men who had taken upon themselves in battle against an enemy" (Murphy 1941:8). In the eighteenth century, use of the term *amuk* to refer to heroic acts, especially in the part of warriors, *kris* (sacred dagger) in hand, was described as being largely archaic; the term largely came to mean insurrectionary violence. However, the attempt to define the "true" opposed to "false" *amuk* is a key to understanding colonial society. Galloway was not simply an attempt to distinguish between pathology. It was rooted in a set of debates in colonial society about the Dutch Indies. First, it had roots in legal debates about who committed murder while "running amuk" should be punishable for his acts. In a widely quoted ruling in 1846, Judge Norris stated that a man in Penang who was captured after killing a child while under the influence of *amuk* was guilty despite the defense that he had been grieving for a dying family member and had recently, had killed indiscriminately, and claimed he was only killing anyone. Judge Norris found him guilty, sentenced him to death, and then ordered that his body be "cut into pieces and cast into a ditch or scattered upon the ground" (Winzeler 1990:101-102). This incident contrasted with the behavior of a Dutch sailor on board a ship in Singapore who had "suddenly attacked and slain a relative who was visiting him, then continued to attack and killing everyone in his vicinity," justified by reason of insanity (Earl 1837:377-78, quoted in
Winzeler 1990:101). Psychiatrists' efforts to describe and bind psychiatric disorder thus aimed less to portray the person who runs *amuk* should be punished and the magnitude of the phenomenon. As early as the early 19th century, William Marsden, in *The History of Sumatra*, reported that opium caused the behavior, reporting that it was made by colonialists' mistreatment of slaves or servants (1811:137). A case he had personally observed of a slave, who, “being in distress with extreme severity, for a trifling offence, vowed to revenge if she attempted to strike him again; and ran down the house, with a knife in each hand.” When She cried out, the civil guard came and fired upon him. Marsden reports that such persons “are broken on the wheel, with every aggravation that the most rigorous justice can inflict; the more they frequency,” proving the inefficacy of harsh punishment that influence that mild government has upon the masses of the people. Marsden contrasted detrimental responses to Dutch rule and effects of English rule.

We can see, then, that though people speculated about the *amuk*—whether it reflected Malay or Javanese characters, the lamiic fanaticism, reflected a constitution weakened by disease or represented a culturally distinctive form of native violence in place within larger discussions of native violence in Dutch rule. As with the colonial responses to cases of worker rebellions of Sumatra, which Ann Stoler (1985; 1991) analyzed, *amuk* reflected concerns about order and disorder under Dutch, and included clear examples of resistance to harsh rule. One use of *amuk* as an “instrument of social protest by individuals who abused their power” (Carr 1985:201).

And so it is in the contemporary reflections on violence intellectuals. Writings on outbreaks of violence during the 1997 election often describe the violence as a result of *trasi*, “displaced aggression,” “emotional illiteracy,” with the gap between rich and poor, or the stagnation. However, in an open critique of the gap between rich and poor, the corruption of the elite, and the stimuli of officials, writers in the Indonesian press of the mid-1990s...
and that ethnic/religious fighting in West Kalimantan and peaceful Ambon was a sign of a general societal breakdown. It
the mysterious and the mad emerged not as figures of target
actors. One final story illustrates this view: a journalist
killers in East Java.10

As the sun sets in the towns and villages of East Java, men
quicker than usual from their evening prayers. In some
empty the streets of women and children. Windows shut; the
doors bolted till the next morning. In the darkness
swords or sickles patrol deserted roads. They are ruthless
black-dad, masked men whom residents believe are the
killings of over 150 locals. Since early August, the night has
haunted by mysterious murders. The government issues
slayings or put a stop to them. They have sent shivers
out the nation.

The article reports that Banuywangi in East Java has a history
of suspected sorcerers—dukan sertet, or practitioners of black
magic. But this season of bloodshed has been highly unusual for
the number of victims but in the apparently well-organized
killings. Eyewitnesses report bands of well-trained and
trained whom they call "ninsas." They commit the murders that
incite neighbors to violence. Noha, 59, was one victim. After
fore his murder, his widow, Sa'adah, recalls, rumors of his death
started swirling. One evening as he was watching TV, the door
went out. Noha then heard a harsh knock on the door. He
quickly succumbed to blows and knife thrusts from the
raiders. They left in a minivan and cars. "They never said,
Sa'adah. 'They did their job very quickly,' Noha's throat
head nearly separated from his body.

News reported mobs gathering to kill suspected dukuns,
although who was killing whom remained vague. A number of
opposition at that time—Amien Rais and Ali Dibonacci, the
head of the Parliament and president of the Republic,
ulated that the killings were part of a paramilitary
of former president Suharto who were seeking to prevent
the return to military rule. A November 7, 1998, story in the

Williams ("Indonesia's Black Death") reported additional
information for Victims of Violence, a human rights organization,
the assassins were outsiders who came
be trained. So terrified were the people of
vigilante squads were formed and the lynchings
by the victims of the mobs are not real "ninsas," but
ominously dumped on the streets. The man whose head was
shaped like a melon was a drifter suffering from mental illness.

Theories of Thought

Rather conventional (American) anthropological account
justuxtaposing a cultural and psychological subject with
the subject of contemporary psychiatry. However, we proceed
with critical or liberatory psychology, which asks how hege-
and disorder become embedded in ordinary subjects
of the subject as both subjected and resisting those consti-
structs. And we concluded with images of the subject
duced, hierarchical social relationships.

We need to join these perspectives using a sleight of hand—sugges-
tive as a set of stories, narratives that presume one another,
Becker's analysis of the classic Old Javanese collection of
modern. Becker (1989: 290) writes, "Most of the sto-
jas, and stories within the stories, each framings
the texture is thick and full of nice resonances, like game-
metal. In the end, the theories we have produced are hardly game-
they are incoherent in this way simply because the theories
are so coherent or nearly complementary. In a special issue
epistemologies dedicated to reflections on Geertz's concepts.
of culture, Sherry Ortner (1997) suggests that Geertz’s neutrality of meaning in an era of mechanistic functionalism is by placing issues of power, domination, and social agency of mechanistic theorizing. She argues that the “foundations in American anthropology, influenced by postcolonial and the “subject” of interpretive anthropology. If Francesca Bensman sens, 1995) is correct, at the same moment many French may be passing in the opposite direction, moving from postcolonial meaning-centered theories. Whatever valiant attempts there may make to reconcile these competing views of subjectivity from a unified theory.

At the same time, our sleight of hand fails because of the object of study: madness and social violence. In his chapter of the Ending, Frank Kermode (1966: 129) quotes Ortega y Gasset: “...a violent temper that it does not tolerate the ideal even when it is idealized.” He argues that the simplicity inherent in many ways, at least partly, an illusion, reminding the reader of the Musil’s The Man Without Qualities, who “lost this element” (127). We have tried here to “thicken the texture” and the resonances, in Becker’s terms, rather than to create a narrative have sought to acknowledge the resistances in the moment of our own inadequacies to theorize coherently. We are left with the image of Deleuze and Guattari.

And so we close with a final reflection, based on Deleuze and secrecy (1987: 286–90). For a long time, Indonesians have amnesia—not only of the primal events of 1946 but a num- bing, symptom-atic of the ruling order—voicing the unspoken and the repressed in a language of hierarchy and respect and and consensus. A terror, a modest anxiety seems inside a secret might be a secret, but the guardians of this secret, the secret not be noticed, acknowledged, made real. But the is a moment of irrationality, for the dislodging of the mythical of terrifying and destructive forces: the ninja killers and the masses and the protectors of primal order, the vengeance for eign, the overlords, the Christian, the Muslim. And these emerge as ninjas, the spiritual forms who can and do cosmic energy, destroy, and protect themselves. And those as ninjas as well—sacrificed, dropped into the path of the heads lifted on bamboo. And this madness is supplanted
crowded and disorienting circumstances" is one that is deeply imbedded to the hilt, he notes. We appreciate his reflections.


9. Good and Subandi (2004) explore these issues in depth. Here addresses classic cross-cultural psychiatry questions about the role of culture on the course and outcome of psychotic disorders (see Hooker, 1997 for reviews). It also examines nosological questions about psychotic processes, which differ from both schizophrenia and manic-depressive psychosis but have gone by such names as bouffee delirante, cycloid psychosis, and acute and transient psychoses (Leonard, 1921; Pinel, 1978; Mennic, Legault, Schmidt, and Remington, 1980). Sussner and his colleagues suggest that "nonaffective acute psychosis" is a distinctive disorder and is far more common in developing North America and Europe (Sussner, Finnetty, and Sollert 1979, 1995b).

10. This is an Asiaweek version of the story. November 20, "Death's Long Shadow."

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