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SICKNESS, HEALING AND GENDER IN OMMURA,
EASTERN HIGHLANDS, PAPUA NEW GUINEA

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ABSTRACT

This study examines the cultural meaning of illnesses recognised by the people of Yonura village, Eastern Highlands, Papua New Guinea, and the logic according to which they manage these disorders. This involves analysing illness concepts as polysemic cultural categories that link up with various symbolic domains, in particular ideas, values and attitudes concerning masculinity and femininity, aspects of the person, 'strength', 'fear' and warfare. Diagnosis and therapy are analysed as processes in which multifaceted illness categories are used for a variety of communicative and expressive purposes, and which involve attempting to manage ideological and evaluative implications of sickness and assert the validity of certain gender distinctions in addition to alleviating the patient's condition.

In Yonura, sickness related beliefs and practices constitute potent symbolic media through which specific views of the social order are rehearsed, affirmed and reformulated. Aetiologies and beliefs about the sources of healing power reflect and reinforce a cultural emphasis on the value of strength and bravery and on threats posed to the community by external forces. They also encode two different paradigms of the distinctions between the sexes. One of these affirms the principle that men are stronger than women in certain important senses and ultimately responsible for the life, health and survival of the community - a view that is central to dominant gender stereotypes and integrally bound up with definitions of men's and women's activities. The other paradigm is not entirely consistent with this principle. The thesis examines ways in which, in the contexts of managing illness, particular images of masculinity and femininity are asserted, questioned, adapted and reaffirmed in the wake of changes in patterns and perceptions of men's roles following the banning of warfare by the Australian colonial government.

PREFACE

The fieldwork on which this thesis is based was carried out from June 1975 to August 1976 in Yonura village, Eastern Highlands, Papua New Guinea. It was funded by a post graduate award from the Social Science Research Council of Great Britain to whom I am very grateful.

My greatest debt is to the people of Yonura for their friendship, tolerance and willingness to allow me to attend their healing ceremonies. Many Yonura villagers took it upon themselves to teach me the Ommura language through the 'direct method'. They proved to be very skilled and patient language teachers, and without their efforts, my fieldwork would not have been possible. Taindo Sara and Bvaura Habaiuo provided invaluable assistance with translating tape recordings of healing ceremonies and interviews. I should also like to offer special thanks to Aparara, Nrinri, Note, Ote, Ano, Nondatauro, Antuao, Luhi, Ata, Sylla, Kwamba, Munrabe and Atirahasa.

I was greatly helped by the detailed, incisive and constructive criticisms and suggestions of my supervisor Professor A.L. Epstein and would also like to thank Janice Collinge and Annabel Gregory for helpful discussions about various aspects of the thesis. Ragnar Johnson read the entire draft and made many valuable criticisms.

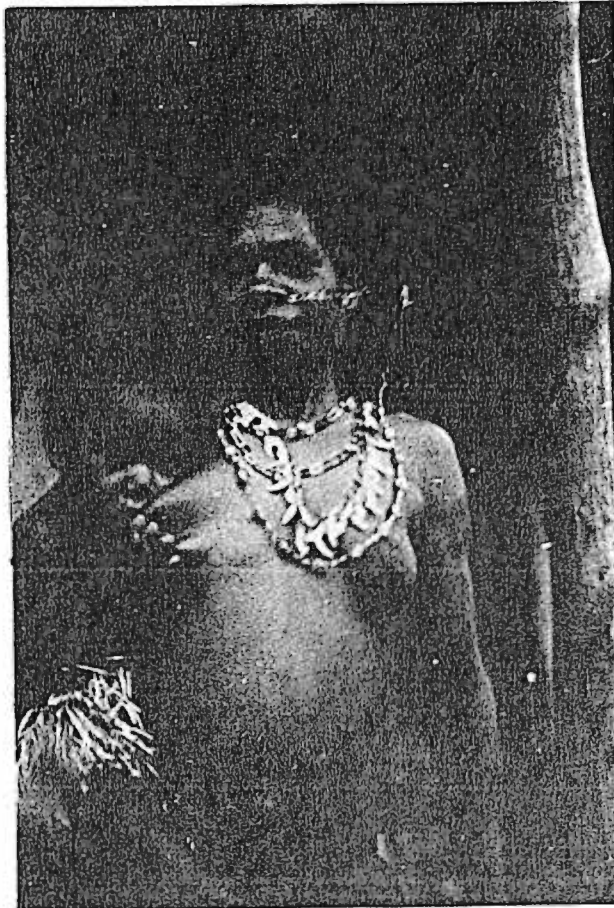
I have disguised the names of those Yonura people mentioned in the study except for those who requested that I refer to them by their true names.



Children dancing.



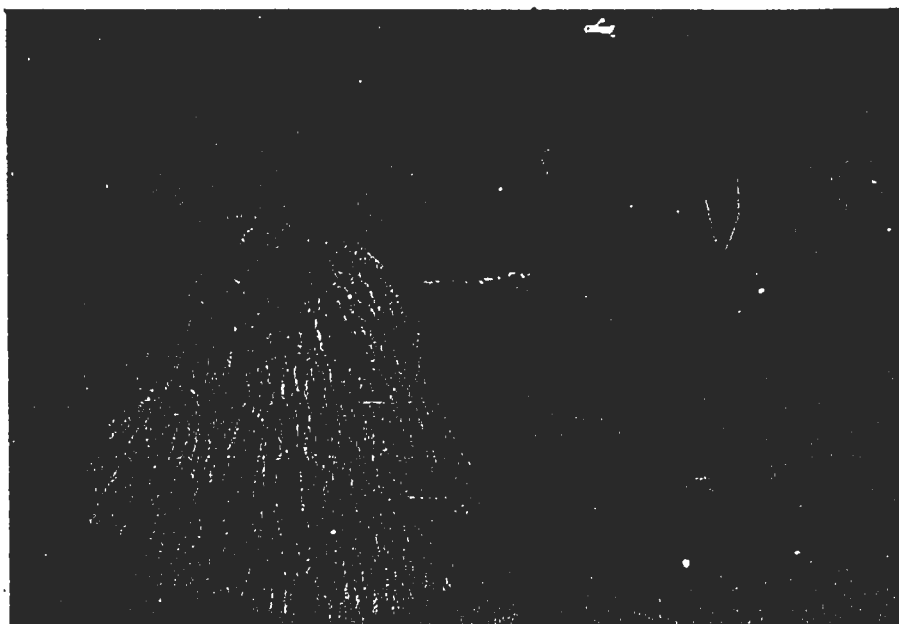
A girl who has recently undergone the nri-i rara nose
piercing ceremony.



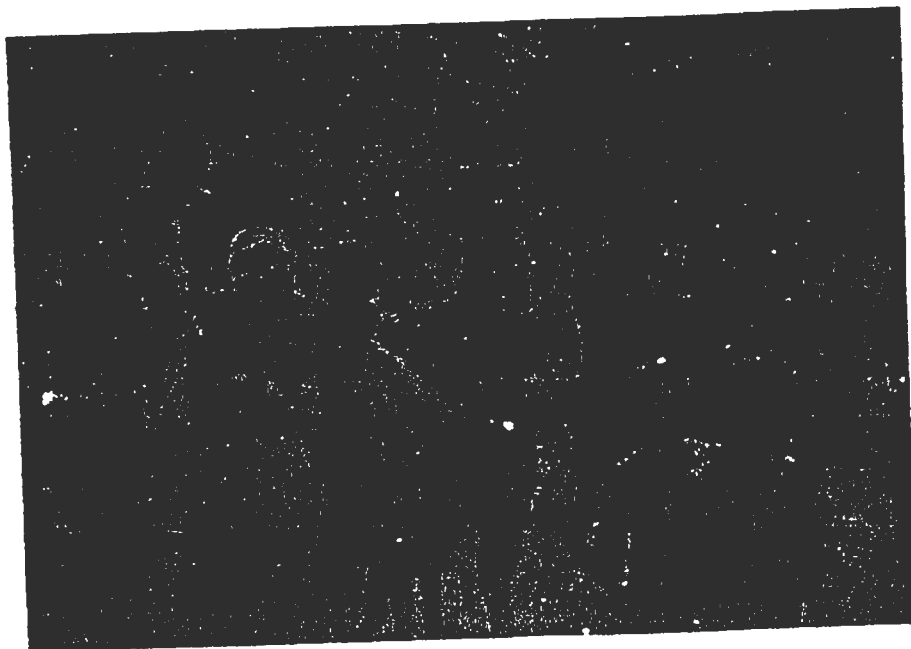
Punrai and her son.



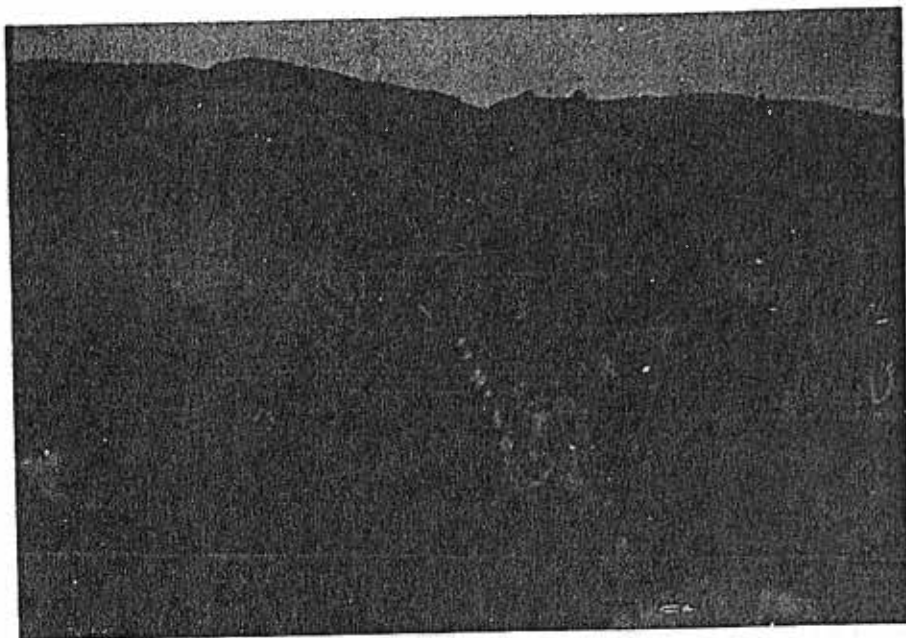
Uru preparing sweet potatoes for an earth oven.



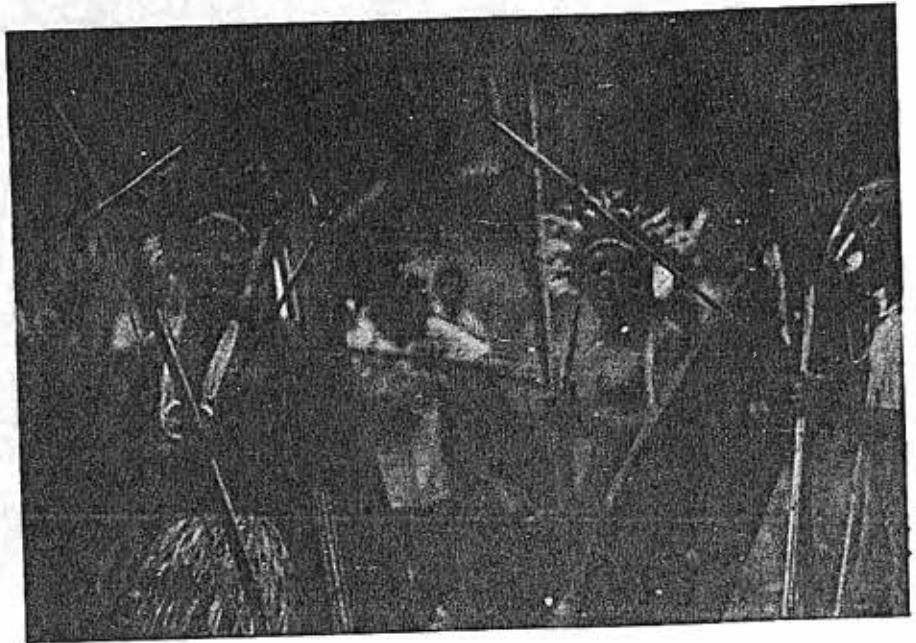
Pahu with a grass skirt (hiara) she has made.



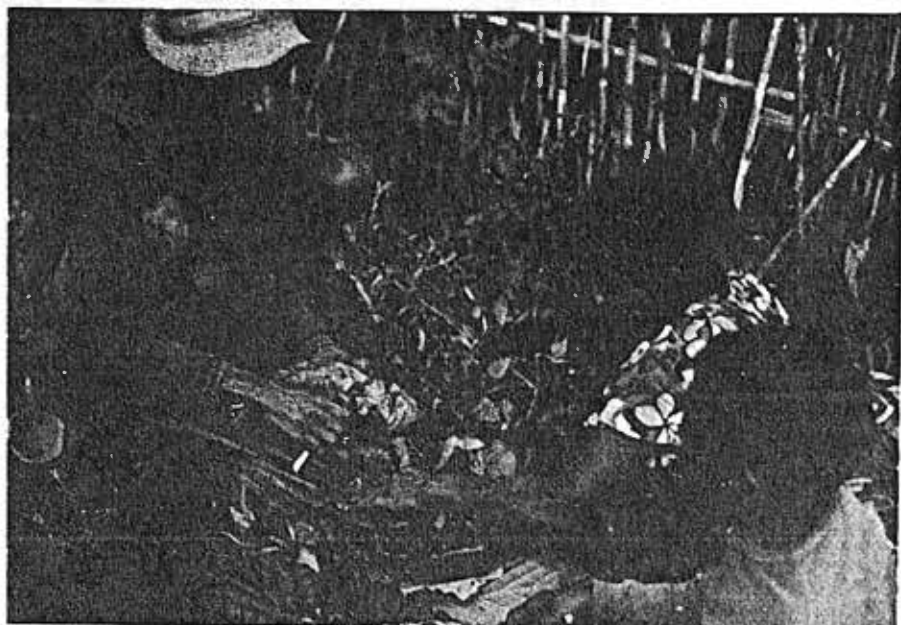
A kamkarura female initiation ceremony.



Men going to an levati male initiation ceremony.



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INTRODUCTION

Anthropological or ethnomedical analyses of how people construe and manage illness are often primarily concerned with medical or therapeutic knowledge and behaviour. They abstract aspects of illness related beliefs and practices that, from an indigenous and/or external perspective, are directly relevant to the control of bodily or psychological malfunctioning or discomfort.

Certain ethnoscientific studies, for instance, focus on cognitive dimensions of the significance of illness categories and analyse diagnosis as a cognitive process - a view of the meaning and use of illness concepts that is modelled on medical diagnosis (Good 1977). Similarly, what Young has labelled the 'explanatory model approach' developed by Kleinman and his associates, involves focussing on 'clinically' relevant aspects of knowledge and practices associated with sickness (Young 1982)⁽¹⁾.

By contrast my concern here is to convey the cultural meaning of illnesses recognised by the people of Yonura village, Eastern Highlands, Papua New Guinea, and the logic according to which they manage these disorders. This involves analysing illness concepts as polysemic cultural categories that link up with various symbolic domains, in particular ideas, values and attitudes concerning masculinity and femininity, aspects of the person, 'strength', 'fear' and warfare. Diagnosis and therapy are analysed as processes in which multifaceted illness categories are used for a variety of communicative and expressive purposes, and which involve attempting to manage ideological and evaluative implications of sickness and assert the validity of certain gender distinctions in addition to alleviating the patient's condition.

In Yonura, as elsewhere, sickness related beliefs and practices constitute potent symbolic media through which specific views of the social

order are rehearsed, affirmed and reformulated. Aetiologies and beliefs about the sources of healing power reflect and reinforce a cultural emphasis on the value of strength and bravery and on threats posed to the community by external forces. They also encode two different paradigms of the distinctions between the sexes. One of these affirms the principle that men are stronger than women in certain important senses and ultimately responsible for the life, health and survival of the community - a view that is central to dominant gender stereotypes and integrally bound up with definitions of men's and women's activities. The other paradigm is not entirely consistent with this principle. I examine ways in which, in the contexts of managing illness, particular images of masculinity and femininity are asserted, questioned, adapted and reaffirmed in the wake of changes in patterns and perceptions of men's roles following the banning of warfare by the Australian colonial government.

Public healing activities are the collective responsibility of the village's initiated males. The recently introduced assochia healing ceremony constitutes an arena in which men publicly and spectacularly demonstrate that any decline in importance of their role as vanquishers of war enemies has been counterbalanced by an increase in the social importance of their role as vanquishers of illness causing forces. In this setting diagnostic decisions are shaped by the aim of ensuring that the explanation of sicknesses is consistent with the image of men as strong protectors of the community.

Throughout this study 'illness' and 'sickness' are used in their ordinary language senses, and thus interchangeably. However it will be useful to clarify my analytic focus by relating it to the definitions recently proposed by Frankenberg and Young.

According to the very similar schemes advocated by these two authors 'disease' refers to 'a biological or pathological state of the organism whether or not it is socially or culturally recognised, and whether or

not the patient and his/her advisers, lay or professional, are aware of its existence' (Frankenberg 1980:199). 'Illness' is restricted to 'the making individual of disease by bringing it into consciousness' (ibid: 199; cf. Eisenberg 1977; Cassell 1976; Kleinman 1980:72-3; Coe 1970:92; Lewis 1975:146-51; Fabrega 1972). A focus on 'illness' makes 'individuals the terminus a quo of medical events'. It 'defers theories about the social relations and processes which have determined what these individuals are perceiving, experiencing and intending' (Young 1981a). 'Sickness', by contrast, incorporates 'the total social process in which disease is inserted' (Frankenberg 1980:199). 'Sickness' is 'a process for socialising disease and illness....the process through which worrisome behavioural and biological signs, particularly ones originating in disease, are given socially recognisable meanings' (Young 1982:270).

In terms of this type of scheme the focus of the present study is on aspects of 'sickness'.

The cultural significance of beliefs and practices associated with illness

My analysis is shaped by the view that a study which aims to arrive at an adequate understanding of the cultural meaning of folk illness concepts must be framed so as to take account of the fact that they are often deeply embedded in their social and cultural contexts, with networks of associations and connotations extending into many spheres of life (e.g. Good 1977; Good and Good 1981; Turner 1967; 1968; Harwood 1970; Helman 1978; 1984:73-4; Pill and Stott 1982; Blaxter 1983; Kleinman 1980:107f; Comaroff 1983; Herzlich and Pierret 1986). Aetiologies 'cast a broad net, implicating objects, qualities and events in every aspect of life; they sort out these diverse kinds of facts, combining them into relationships that cannot be articulated in everyday contexts' (Young 1976:18).

Polysemic illness concepts may be used for various communicative purposes over and above identifying and explaining the sickness, guiding treatment and articulating the experiences of particular configurations of psychosocial stress. They may constitute vehicles for affirming or challenging specific moral principles or views of the social order (e.g. Turner 1967; 1968; Ohnuki Tierney 1981:169-172), pinpointing social tensions (e.g. Turner 1967; Harwood 1970), reinforcing or spoiling claims to authority (e.g. Middleton 1960) or drawing attention to grievances (e.g. Lewis, I.M. 1971). Managing illness often involves managing its social, political or evaluative significance besides attempting to restore the patient to health, as when diagnoses that are stigmatising or might cause unwelcome social tensions are avoided.

More generally, while it seems likely that people of most cultures recognise as a relatively distinct category activity concerned with alleviating the bodily or psychological symptoms of illness (e.g. Young 1976), one cannot expect to fathom the logic of the way in which sickness is managed in concrete instances if 'therapeutic activity' or 'medical activity' is analysed as though it took place in a vacuum (cf. Comaroff 1983). On the contrary one will need to bear in mind that even where 'therapeutic' or 'medical' considerations are paramount (or appear to be so) systematic concessions may be made to sociopolitical, economic, or interpersonal expediency or to the emotionality of patients or healers. This is, of course, as true of biomedical practice as of 'folk' or 'traditional' modes of managing illness (e.g. Stacey 1986; Daniels 1972; Strong 1979)⁽²⁾.

My analysis of the cultural significance and use of Ommura illness concepts may thus be contrasted with ethnoscientific (or ethnosemantic) studies which analyse illness terms as hierarchically ordered taxonomies of categories defined by their boundaries. Ethnoscientific analysis of

this kind construes diagnosis as a process of linking the patient's condition to a disease category through the interpretation of symptoms as distinctive features (Frake 1961; Fabrega and Silver 1973; cf. Good 1977; Landy 1977:182-4; Comaroff 1983:14-15). It tends to reduce 'medical semantics to the ostensive or naming function of language', a theory of meaning which is closely modelled on medical diagnosis (Good 1977:26). The meaning of an illness term is construed as being 'its designatum, the disease to which it points. Its meaning is thus essentially free of social context and free of the perspective of the user' (ibid:52).

This kind of formal approach may throw useful light on the significance of those illness categories in any cultural setting that are 'cognitively and emotionally less loaded' (Ohnuki Tierney 1981:154-5; cf. Dingwall 1976). However it fails to take account of the semantic complexity of many folk illness concepts. Crick has shown how an ethnoscientific approach obscures the 'symbolic weight' that notions such as 'symptom' carry in 'primitive societies' where 'illness is so intertwined with social values' (1976:71). Good stresses the way in which this kind of perspective brackets out the 'social and symbolic context' which gives folk illness categories their 'distinctive semantic configuration' (1977:38), and thus also 'the use of medical discourse to articulate the experience of distinctive patterns of social stress...the use of illness language to negotiate relief for the sufferer' (1977:27). I would add that ethnoscientific analysis also tends to direct attention away from the fact that the processes of assigning illnesses to particular diagnostic categories can involve the systematic pursuit of various goals over and above those considered relevant to identifying, explaining or alleviating the patient's condition (3).

While Good and Crick stress that 'folk' and 'primitive' illness categories tend to be more 'embedded' and semantically complex than those of biomedicine it can clearly also be misleading to construe biomedical

disease terms as referring simply to sets of symptoms. For instance we now have extensive documentation of ways in which biomedical concepts reflect and raise to the level of 'scientific truth' particular cultural and historical definitions of masculinity and femininity (e.g. Graham and Oakley 1981; Ehrenreich and English 1976; Stacey 1986:26; Doyal 1979). Several writers have examined ways in which, in advanced capitalist societies, desocialised views of the human subject are embedded in biomedical notions that define disease as a biological or psychological condition of the individual and bracket out its social, political and economic aspects (e.g. Doyal 1979; Taussig 1980; Frankenberg 1980; Young 1982; Navarro 1976; cf. Stein 1977).

Certain medical anthropological or ethnomedical studies focus primarily on cognitive aspects of illness concepts and the explanation or diagnosis of illness, but without bracketing off the social and cultural context of such beliefs and practices as rigorously as the kind of formal analysis just discussed. Some of the best studies of sickness and its management in Papua New Guinea exemplify this general approach. The present study may be contrasted with these insofar as I emphasise how Ommura illness categories combine cognitive, ideological evaluative and effective referents and are used for diverse communicative purposes.

Lewis' important study of 'knowledge of illness' among the Gnau of the West Sepik District of Papua New Guinea is 'directed towards the cognitive aspects involved in [the] diagnosis and explanation' of illness (1975:3). As a physician as well as an anthropologist Lewis aims to 'observe the relations between the nature of the illness, its explanation and management... [defining] the occurrence of actual illness on external grounds' (1975:1). While his study is not primarily concerned with providing a comprehensive account of the significance of illness in Gnau terms his data is sufficiently rich that we learn much about ways in which

Gnau illness concepts ramify into various symbolic domains. Lewis places these notions in the context of cosmological beliefs and shows how the evidence for diagnosis rests less on symptoms than on 'knowledge of the patient's activities; his visits to other places or the forest, to strangers, the work involving ritual he has done recently, his contacts with women, with other sick people; or the recently dead' (1975:227-8).

Frankel's analysis of the Huli illness category agali and 'the critical variables in the selection of this diagnosis' (1980:95) is also shaped by the fact that his main concern is with cognitive factors underlying the explanation and treatment of this disorder. The same is generally true of Glick's treatment of Gimi diagnosis and views of illness in his pioneering article on 'Medicine as an ethnographic category' (1967). Glick notes that certain Gimi illness concepts are used as sanctions, and that the 'ultimate significance of illness in folk medical systems is so much part of the victim's sociocultural identity and experience that a diagnosis cannot be made or understood in any other terms' (1967: 36). But his descriptions of Gimi illness categories (which are distinguished primarily according to cause) focus on the level of what he calls the 'efficient cause...the question of who was the responsible agent'. He brackets out 'more extensive explanations for why agents act as they do (ultimate causes)' on the grounds that at this point 'one has moved beyond the realm of the medical system and into such considerations as social and political competition, intrafamilial disputes, quarrels, conflicts and crimes...' (1967:52). Similarly, Glick treats Gimi diagnosis as a process of 'making statements about causative agents based on kinds of evidence associated with each agent' (1967:44).

From the kind of perspective taken in the present study such notions about the 'ultimate causes' of a specific illness would be construed as potentially relevant to understanding its wider social, political and ideological connotations, and hence as having a potential bearing on

diagnostic decision making.

Following Crick (1976), Kleinman, the leading proponent of what Young (1982) calls the 'explanatory model approach', defines ethnomedicine as 'first and foremost a conceptual study of an intrinsically semantic subject matter' (1980:380). Like several other writers (e.g. Mitchell 1977; Comaroff 1983; Good 1977) he stresses the ethnocentric nature of categories such as 'medical system' and 'diagnosis' and hence their inadequacy for cross-cultural analysis. What is needed, argues Kleinman, is 'a mediating or overarching set of categories into which culture-specific ethnomedical and biomedical models can be translated in order to conduct truly comparative research' (1978b:662). His influential 'health care system' model - 'a model and related concepts for ethnographic and comparative research on medical systems as cultural systems' - is intended to provide this kind of conceptual frame, and involves important advances on more 'medicocentric' frameworks. It includes, for example, the concept of 'cultural healing' which is based on the recognition that healing 'may be evaluated as successful because the sickness and its treatment have received meaningful explanations and threatened cultural principles have been dealt with appropriately, in spite of the fate of the sick person and his sickness' (Kleinman 1978a:87; 1980:360).

Major differences between the way in which 'explanatory model' studies and the present one deal with illness related knowledge and practice derive from the fact that the former aim to illuminate issues of clinical relevance, an area that falls outside the scope of this thesis. Insofar as 'explanatory model' studies take account of the 'emic' significance of therapeutic notions and procedures they are concerned with abstracting 'clinically' relevant aspects rather than with examining the cultural significance of such beliefs and practices in relation to their social and cultural contexts (e.g. Good 1977; Good and Good 1981; Helman 1978; Kleinman 1978a).

Thus Kleinman's 'health care system' model is specifically designed for studying 'core clinical functions'. That is, how medical knowledge and practices enable people to (a) construct illness as a psychosocial experience, (b) establish criteria for guiding the process of seeking health care and choosing among alternative health care practices, (c) manage illness through communicative processes such as classifying and explaining, (d) provide healing activities (therapeutic interventions, supportive care), and (e) manage therapeutic outcomes (including chronic illness and death) (Kleinman 1980:71-2; 1978a; cf. Young 1982). This kind of approach tends to direct attention to the implications of medical beliefs and practices for individuals rather than to their wider social and cultural context (Young 1982; Stacey and Currer 1986).

Illness related beliefs and practices as ideology

Analysis of illness related beliefs and practices in terms which take account of their multidimensional significance directs attention to their ideological content. Sickness concepts in widely varying social and cultural contexts share certain qualities that would seem to make them particularly 'suited' to reinforcing, constructing or challenging specific views of the social order in an especially forceful way.

Following Young, I am using 'ideology' in a broad sense to refer to:

- any form of knowledge in which an actor represents to himself:
- (a) himself; other actors and human collectivities as subjects, i.e. each as an integral and continuous locus of initiatives, perceptions, potencies, vulnerabilities and responsibilities: and
- (b) relations of dependence, domination, authority etc. between and among these different human subjects (Young 1981b:384).

In many societies one finds analogies between conceptions of bodily health and conceptions of an orderly or 'healthy' state of the body politic or cosmos (e.g. Turner 1967; 1968; Willis 1972; Comaroff 1981; Ahern 1978; Sontag 1978; Bastien 1985). Comaroff suggests that in all cultures 'healers...manipulate symbolic media which address a mutually entailed physical and social order' (1981:396).

Specific views of the human subject and of the nature and sources of power and authority are embedded in beliefs about illness causation, accountability for sickness and the sources of healing power (Glick 1967; Taussig 1980; Comaroff 1981; Young 1981a). Illness related beliefs and practices 'describe some limits to what a person can expect to know or do about his worldly circumstances, and some of the consequences of exceeding these limits', such as that certain illnesses follow from moral delicts (Young 1981b:384; Unschuld 1986; Halowall 1963; Foster 1982).

In contrast to Comaroff, I would not go so far as to suggest that all the dominant value systems and social arrangements in a society are likely to be reflected in its medical beliefs and practices (Comaroff 1981:371). Which social values and distinctions are manifest in the 'medical' sphere is a matter for empirical investigation in each instance. Nor do I assume that the ideological principles encoded in Ommura illness concepts and healing are necessarily consistent with those apparent in other spheres of Ommura culture. The various cultural productions of a society frequently conflict with each other and contain contradictions (cf. Moore 1986:189).

Through being encoded in conceptions of the body and healing practice, views of the social order and human subject are materialised and naturalised: they acquire the status of absolute truth or reality (Foucault 1980; Bordieu 1977; Comaroff 1981; Taussig 1980). Moreover, polysemic illness categories, like other symbols which juxtapose ideological and emotionally charged bodily or affective referents, can have a potent ideological force (Turner 1967; Good 1977; Munn 1974).

Young (1976) draws attention to several other reasons why sickness episodes are what he calls 'ontologically important' settings. They can compel people to reflect on their social order so that the validity or necessity of social values or arrangements is affirmed (or, I would add, questioned) in the light of experience. In addition, sickness forces

people to take action and perhaps mobilise audiences. Social values tacitly or explicitly articulated in the course of managing illness are made 'cognitively impressive' through being articulated in the context of dramaturgical healing ceremonies and in an emotionally charged atmosphere of doubt and anxiety. Moreover sickness episodes are recurrent events: 'No person ever learns or confirms his sense of reality in a once-and-for-all event' (Young 1976:18).

Healing is not merely a context in which existing social values and arrangements are affirmed. It is also, as Comaroff stresses, a setting in which subtle reformulation of collective meanings takes place as the relationship between personal experience and culturally specified definitions of reality is re-examined (Comaroff 1981; 1983; Unschuld 1986). The dominant modes of construing and managing illness in a society tend to reflect and reinforce established definitions of reality and legitimate or naturalise existing social arrangements. However, as in the case of women's health movements in contemporary western societies, illness related beliefs and practices can also constitute media through which established social values and distinctions are consciously challenged.

Illness concepts and therapy can affirm ideological principles in overt and explicit ways as where sickness is attributed to moral delicts or failure to conform to one's allotted social role, or those with authority are seen as repositories of healing power. Analysis of multifaceted medical representations and practices in relation to their social and cultural contexts also reveals subtler, less visible ways in which they reflect and reinforce particular social values and arrangements. Detailed studies of the ideological significance and management of illness in specific settings can inform further research by increasing our awareness of the various, often subtle, ways in which particular views of the social order are constructed and affirmed in the contexts of healing.

Clearly the 'effects' of ideology cannot be assumed. The 'impact' of the ideological content of illness related knowledge and practice on people's views and actions must be empirically determined in each instance.

This thesis examines ways in which dominant definitions of the distinctions between the sexes and of men's and women's activities are rehearsed, questioned and adapted in the course of managing illness. I do not attempt a comprehensive analysis of Ommura medical beliefs and practices as ideological mechanisms contributing to the persistence or change of gender divisions in the society. This would require taking account of the whole range of (perhaps contradictory) ideological and material forces with a bearing on the perpetuation or modification of these distinctions.

Fieldwork

I arrived in Yonura village with two government interpreters who were visiting on official business. The residents received us with what I was soon to learn was their customary response to the arrival of strangers. Men rushed forwards with their bows drawn while women clustered together in the background. I hoped to stay in Yonura as it was the nearest Ommura village to the boarding point for the public motor vehicles on which I would need to rely for transport. After discussion among themselves the villagers indicated through an interpreter that they were willing for me to live in Yonura and conduct research there. My decision to reside in Samura hamlet was determined by the availability there of an empty hut, conveniently close to the road, where I could live until I had had one built next door.

I embarked on fieldwork with the aim of studying Ommura notions of efficacy and modes of explanation as manifest in practical, ritual and magical practices (including those associated with illness). After a few weeks unexpected circumstances and my own interests had led to change in

my plans.

On returning from my first visit to Asara village I was met by a group of furious men and women. A young man explained in Melanesian Pidgin that Yonura people were warning me against visiting Asara and Koronumbura, the other two Ommura villages. Men from these groups were always seeking opportunities to perpetrate sorcery against Yonura people. If I became friendly with these enemies they would use my presence in Yonura as an excuse to sneak into the village with sorcery substances. This first of many encounters with the bitter enmity that exists between the Ommura villages (see chapter 1) prompted my decision to restrict my research mainly to Yonura.

I made only one visit to each of the other two Ommura villages, although trips to the patrol post provided me with opportunities to talk with their residents. These discussions indicated that people from all Ommura villages share the same general views about sickness and its causes. In many respects their modes of managing sickness are also similar. However it must be stressed that assochia, the most frequently performed healing ceremony in Yonura, was not practiced elsewhere in the Ommura area. Moreover the residents of Asara and Koronumbura used the mission aid post more than Yonura people, especially for the treatment of illnesses judged to be relatively serious (nriqa viro).

A second shift in my research plans involved deciding in the first month of fieldwork to restrict my study of modes of explanation and notions of causation specifically to the sphere of beliefs and practices associated with illness. This reflected my growing interest in the assochia diagnostic and healing ceremony, which I attended regularly. It was also prompted by the fact that Yonura villagers were less fluent in Melanesian Pidgin than I had anticipated from conversations with earlier visitors to the Tairora area.

Ommura is an unwritten tongue. There are no dictionaries, grammars or other materials for learning it or any other Southern Tairora dialect. However I had learned Melanesian Pidgin before leaving for the field and planned to conduct the initial stages of my research through this lingua franca simultaneously with learning the Ommura dialect. As it turned out the only villagers who spoke fluent pidgin were young children of both sexes who had learned it at school, and a handful of young men, none of whom was regularly available to interpret for me. This meant that it would be longer than I had expected before it was possible to collect the data regarding notions of causation and efficacy that I considered essential for my proposed research. As my funding would not stretch to extending my stay in the field I decided to narrow the scope of my study. An advantage of focussing on illness related knowledge and practices was that I had been tape recording the lengthy diagnostic process in each assochia ceremony I attended. The recordings could be translated when my familiarity with the Ommura dialect improved.

I became interested in investigating the fact that it was quite common for a sickness to be attributed to different causes by the same person and at much the same stage in its development. After about three months in the field it seemed clear that this would require focussing less specifically on the explanation of illness and taking account of the different kinds of communicative purposes for which illness categories were used in different kinds of contexts - purposes over and above explaining the disorder and guiding treatment.

Much of my time in the field was spent attending healing ceremonies, especially assochia, and talking with patients and others about aspects of illness and treatment. However my research was shaped by the assumption that an understanding of the cultural meaning of Ommura illness concepts and therapy would require taking account of various aspects of

Ommura society and culture. My reading before and during fieldwork indicated that differentiated medical systems in the sense of 'special department[s] of co-ordinated knowledge and practice concerned specifically with the understanding and treatment of illness' (Lewis 1975:245) have not been a feature of Papua New Guinea societies (Glick 1967; Barth 1975:147-42; Lewis 1975:245f; Luzbetak 1957-8; Hamnett and Connell 1981). Work on sorcery (e.g. Fortune 1932; Tuzin 1974; Forge 1980), pollution (e.g. Faithorn 1975; Barth 1975; Hogbin 1970) and illness notions (e.g. Strathern, M. 1968; Brandewie 1973) suggested that illness concepts in this culture area were often deeply embedded in their social and cultural contexts.

Strathern's analysis of Melpa beliefs about illness from popokl or 'frustation' focuses on 'sanctioning elements in the notion of popokl' and demonstrates how presenting with 'popokl turned into sickness' may constitute a vehicle for the expression of anger and frustration and a strategy for drawing attention to grievances and eliciting sympathy (Strathern, M. 1968). In his account of 'group therapy' among Mbowamb Brandewie shows how these Highlanders attribute sickness to social tensions and aim to alleviate it through group support and expressing 'anger' (1973)⁽⁴⁾.

As chapter 5 shows, Ommura distinguish several general classes of illness. This study is primarily concerned with knowledge and practices associated with those complaints classed as nriqa viro. Throughout 'illness' and 'sickness' refer to disorders of this type. The decision to focus on nriqa viro reflects my initial interest in notions of causation and modes of explanation. This is the only kind of illness that is always considered to require explanation and treatment, and the most elaborate Ommura 'medical' concepts relate to the aetiology of nriqa viro. Moreover because knowledge associated with certain

gynaecological disorders is initiated women's 'secret' (uakyera), I was asked not to write about it (chapter 5).

Focussing on nriqa viro involves concentrating on the one type of illness always seen as being 'psychosocially' or mystically caused. Ata nriqa or minor ailments are probably the most frequently occurring type of complaint, and are tacitly understood as being physically caused (chapter 5), although there are not elaborate notions about the causes of such ailments and they are rarely considered to require explanation. It is important to note this for, as Gillies has shown with reference to African ethnography, anthropologists have sometimes conveyed distorted impressions of how particular people manage sickness by concentrating on explanations based on mystical or 'psychosocial' principles and glossing over the existence of those based primarily on physical principles (1976).

Nriqa viro is primarily an adults' disorder. In general discussions about illness causation informants invariably represented it as something that did not affect children. During fieldwork one case of illness in a child was treated as nriqa viro as opposed to eighteen cases in women and nineteen in men⁽⁵⁾.

While the diagnosis and treatment of nriqa viro is defined as men's work, there was far less variation in adults' knowledge concerning the significance, causes and treatment of such complaints than in their knowledge concerning other classes of disorder (ati nriqa), women's reproductive disorders and vunrato afi. Children typically knew significantly less than adults about nriqa viro. However I found only a few minor individual variations, and no systematic differences between the extent or content of men's and women's knowledge or between that of healing experts and other adults. This reflects the fact that nriqa viro is the only class of illness that is diagnosed and treated in large

public ceremonies. Moreover the special therapeutic capabilities with which experts and other men are credited derive from 'strength' (kyapuk-ya) rather than from specialist knowledge concerning illness or bodily functioning.

As will be seen, it is generally men who take the initiative in using nriqa viro concepts as vehicles for assertions about male strength and superiority and feminine weakness. In certain contexts women seem to concur with such statements, but I suggest that they do not place the same value as men on strength and resistance to illness.

My data come primarily from participant observation, discussion and informal interviews with Yonura people. The thesis also draws on semi-structured interviews concerning aspects of illness, and on tape recordings of assochia and initiation ceremonies which I transcribed and translated with the aid of Yonura people (see below). I was invited to attend initiation rites for both sexes on condition that I did not write about secret initiation knowledge or divulge it to villagers not entitled to know it.

My understanding of the cultural meaning of illness categories is derived from observation of how people speculated about, explained, managed and generally responded to illness, and conversations with patients and others about particular cases of sickness and sickness in general, interpreted against the background of my knowledge of other aspects of Ommura life. In addition I conducted interviews with seventeen married men including two assochia experts, and one man who was particularly expert at performing the vuha healing ceremony: respondents were asked to describe all the illnesses that they could think of. A later set of semi-structured interviews, aimed at determining how patients and experts evaluated treatment for nriqa viro also provided insights into notions of illness causation and the significance of particular kinds of

sickness⁽⁶⁾. The most clearly articulated 'naturally occurring' statements about the nature, causes and significance of actual or hypothetical sicknesses are to be heard in healing and diagnostic ceremonies, when patients expound and justify their own explanations for their disorders (see chapter 9), and in the general conversation that takes place in village clearings or during or after public ceremonies and gatherings.

The analysis of diagnostic processes draws heavily on semi-structured interviews about personal 'seeing' (chapter 9) and tape recordings of assochia ceremonies.

During my first month or so in Yonura I was able to communicate only with or through Melanesian Pidgin or English speakers. By the end of fieldwork I had acquired a fair working knowledge of the Ommura dialect, although my solecisms continued to provide my hosts with an endless source of amusement, and I still relied on the assistance of pidgin or English speakers during complicated discussions.

Taindo Sara, a young married man, had learned English during a stay in Kavieng. He had gone there as a teenager to work as a plantation labourer but had been taken to live in the house of some English nurses. He generously listened to many of my tape recordings of healing ceremonies and interviews, translating them in the earlier stages of fieldwork and later correcting my mistakes. He also explained complicated Ommura concepts with great skill and insight. Bvaura. Habaiuo, a young boy who had learned to speak English at the mission school, also provided much valuable assistance with translation.

Organisation of the thesis

The thesis is divided into three parts. Part one provides general ethnographic information about the Ommura and Yonura village and looks at the relations between Ommura and successive governments. The detailed discussion in chapter 1 of hostile relations between political groups is

intended to provide a background for subsequent analysis of the inter-relations between Ommura notions about illness and about warfare.

Chapter 4 focuses on selected aspects of gender in Ommura that are integrally bound up with illness notions and therapy. It presents data on the sexual division of labour and spheres and on associated images of masculinity and femininity. It also examines how men and women perceived these patterns as being affected by the enforcement of pacification.

Part two focuses on Ommura views about the nature of illness and their general views about illness causation. Chapter 5 is concerned with views of illness as a general state and hence with the cultural paradigms on which Ommura people draw in the initial stages of constructing illness from disease, with ways in which 'sickness as a "natural" phenomena is cast into a particular cultural form through the categories that are used to perceive, express and value symptoms' (Kleinman 1980:72)⁽⁷⁾.

Nriqa viro categories typically have bodily, affective, evaluative and ideological referents, and chapters 6 and 7 trace out various dimensions of the significance of each type of nriqa viro currently recognised. Clearly, in Yonura, as elsewhere, illness concepts are continually developing and changing. Chapter 8 summarises the characteristic semantic structure of nriqa viro categories and Ommura views of the process of illness causation.

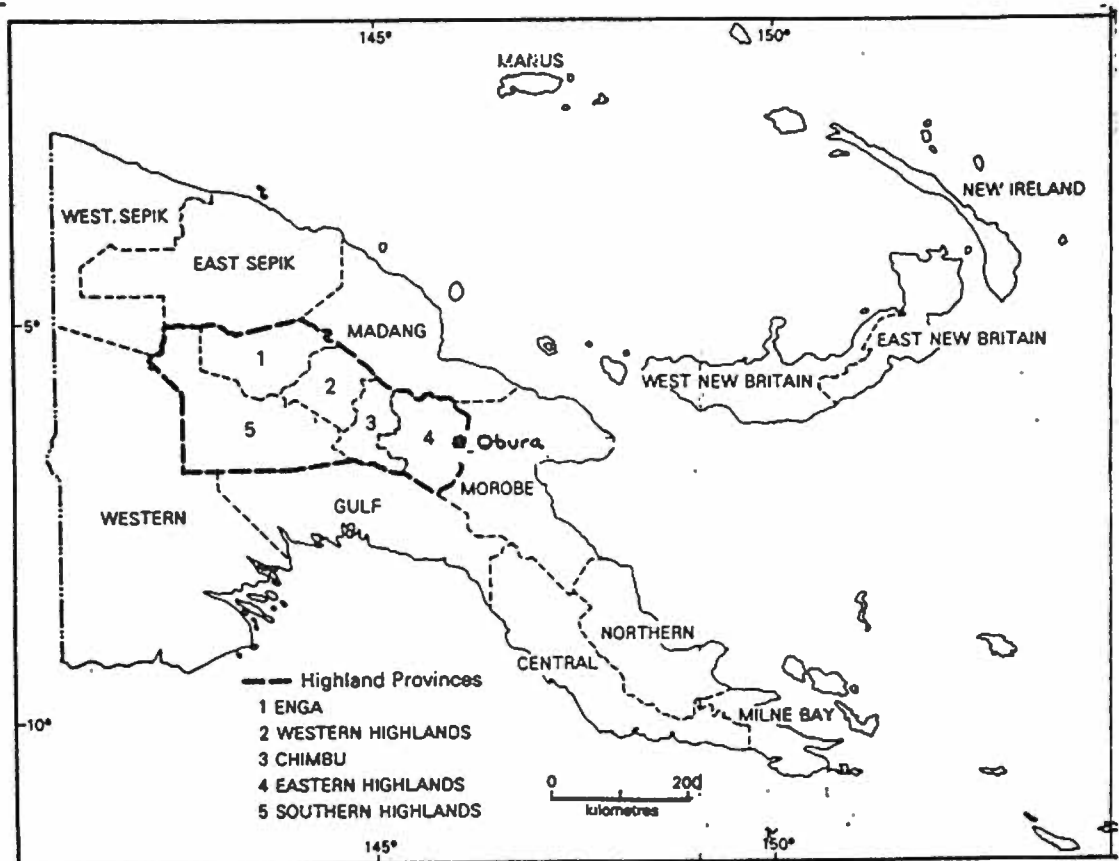
Prior knowledge of the whole range of illnesses recognised and of the various dimensions of significance of each category is important for understanding the analysis in part 3 of how actual sickness is labelled, diagnosed or explained. Aspects of the cultural meaning of illness categories which have an important bearing on diagnostic decision making may not be made explicit in diagnostic ceremonies. This is true of what

these terms connote regarding the nature of femininity and masculinity. Moreover, awareness of the different communicative purposes for which Ommura illness terms are used is necessary as a background to understanding systematic differences in the logic according to which diagnoses are selected in different types of diagnostic context.

It is important to distinguish people's theoretical knowledge about the nature and causes of illness, whether articulated spontaneously or in response to questions from the ethnographer, from that which they apply in labelling, interpreting, explaining, diagnosing or treating actual cases of sickness. There will not necessarily be a high degree of correspondence between what is said in the abstract about the relative frequency of an illness and the frequency with which it is actually diagnosed, or between the aetiology, symptoms or distribution of a given type of disorder as described in the abstract and the criteria according to which sicknesses are assigned to that category in practice (cf. Young 1981c). Similarly, in selecting a particular diagnosis, people may systematically follow rules which are not articulated in 'theoretical' accounts of the criteria for that diagnosis. Harwood has shown, for example, how the particular diagnostic category to which Safwa assign an illness often depends on the specific nature of the status relationship between disputing parties associated with the patient. These rules are not consciously articulated though they are consistent with a number of other beliefs Safwa hold (Harwood 1970). Hence in what follows, discrepancies between 'theoretical' and 'applied' knowledge are noted.

Part three describes the various procedures for diagnosing and treating nriqa viro. I focus on the general logic according to which illnesses are assigned to particular categories rather than on the specific criteria for selecting each individual diagnosis.

PART I : THE SETTING

MAP 1:PAPUA NEW GUINEA

Papua New Guinea

Source: adapted from Grossman 1984.

CHAPTER 1:

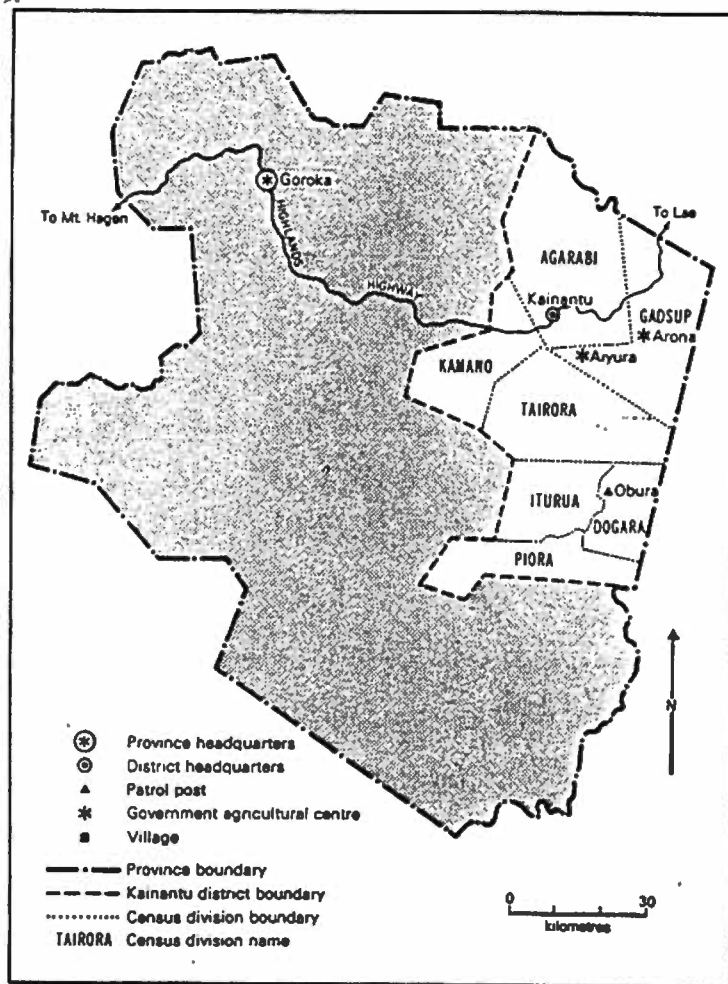
THE SETTING

THE OMMURA

The people whom I refer to as Ommura number about 1,140⁽¹⁾. They occupy the area around the Obura patrol post in the Dogara Census Division of the Kainantu District of the Eastern Highlands Province of Papua New Guinea at approximately 146° latitude and 6.5° longitude⁽²⁾. The patrol post is some thirty two miles from Kainantu. Ommura live in the three villages Yonura, Koronumbura⁽³⁾ and Asara which lie in a rough north-south line along the eastern banks of the Llamari river. The area is overshadowed by a range of six named mountain peaks from which Ommura say that their first forbears emerged to become the original inhabitants of the area.

The Ommura terrain consists mainly of rugged expanses of 'kunai' grass (imperata cylindrica). These slope upwards from the Llamari river ending where the mountains are topped by dense rain forest. The altitude ranges from 4,000 to 5,300 feet along the valley floors to 8,000 on the mountain ridges. There is little seasonal variation in temperature. Daytime temperatures range from the upper eighty degrees F. in sunny weather to the mid forty degrees F. on cold nights. Average rainfall is around eighty inches per annum. Rainfall is generally at its heaviest between October and May. However the 'dry' and 'wet' seasons tend not to be markedly distinct.

Linguistically Ommura are classified as Tairora speakers, Tairora being part of the Eastern Family of the East New Guinea Highlands Stock (Wurm 1978). Ommura fall into the Southern Tairora sector which has so far been little documented by research, linguistic or

MAP 2:KAINANTU DISTRICT, EASTERN HIGHLANDS PROVINCE

Kainantu District, Eastern Highlands Province

Source: adapted from Grossman 1984.

otherwise.

McKaughan (1973) and Vincent (1976: personal communication) suggest that a major linguistic division occurs at approximately the southern border of the Tairora Census Division (see Map 2). According to Pataki Schweizer the language division corresponds to a 'natural biotic separation' between Northern Tairora and Southern Tairora marked by an area of primary forest (1968:81). McKaughan notes that:

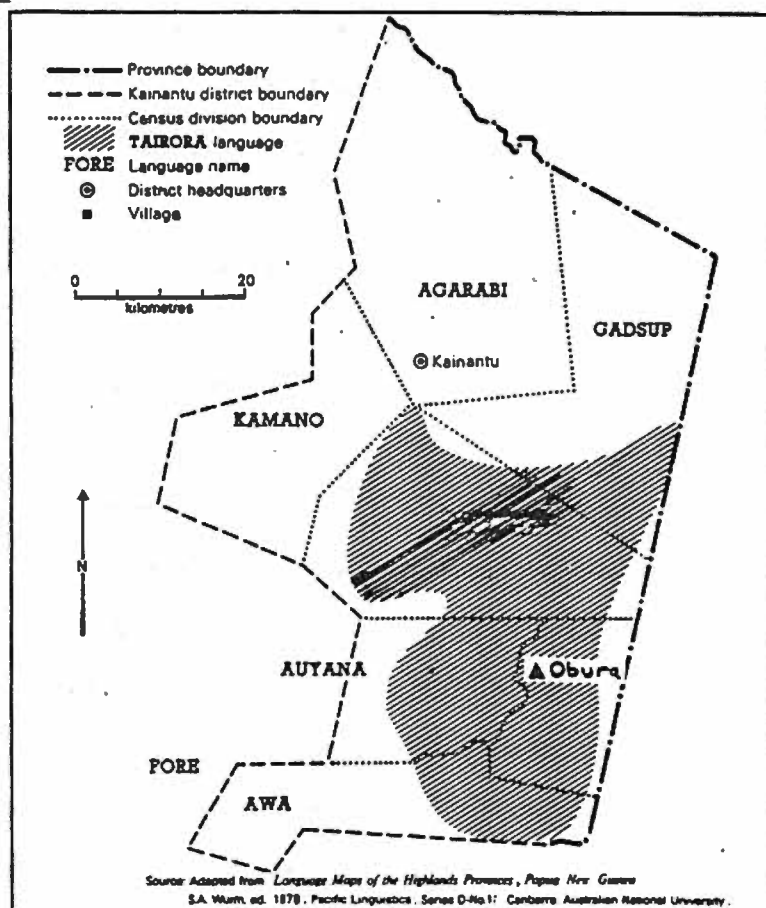
Southern Tairora may be as divergent from Northern Tairora as is Agarabi from Gadsup. But so little is known of the Southern Tairora that the general name will no doubt be brought down for the whole area linguistic information for the Southern Tairora is the one large gap in our study of the Eastern Family (1973:693).

Vincent has suggested a provisional division of Northern Tairora into at least two dialect groups and Southern Tairora into at least five. He classifies Ommura, together with the people of a number of neighbouring villages (Motokara, Kaurona, Kobara, Anima and Tokena - see Map 4) as speakers of the 'Asara' dialect of the Southern Tairora Language (Vincent 1976: personal communication; cf. Vincent 1974).

In his ethnobotanical study of the Ndumba, a group of Southern Tairora speakers, Hays suggests there may well be 'considerable social and cultural differences between the Northern and Southern [Tairora] populations', reflecting their geographical separation and the fact that the Southern groups regularly interacted with Waffa and Anga speakers to the east and further south who were unknown to the Northern Tairora groups. The latter interacted, depending on their geographical location, with Auyana, Kamano, Agarabi and Gadsup speakers. (Hays 1974:38; Watson 1973:227) (See Map 3). Ommura claim not to have known of the existence of most Northern Tairora peoples until the early 1960s.

The greater diversity of dialects in the Southern compared with

MAP 3:

DISTRIBUTION OF THE TAIORA LANGUAGE

Distribution of the Tairora Language

Source: adapted from Grossman 1984.

the Northern Tairora area seems to reflect a relative lack of contact between communities in the south rather than population patterns. Northern and Southern Tairora each contain approximately half of the total population of Tairora speakers, numbering between 12,000 and 15,000 in the early 1970s (Hays 1974:38).

Due to lack of data detailed comparisons of Tairora speaking groups are not yet possible. Watson's recent monograph of two Northern Tairora villages is the first full length social anthropological study of a Tairora group to appear in print (Watson 1983). The Hays' pioneering paper on initiation rites among Ndumba constitutes the only published social anthropological material to date on Southern Tairora people other than the Ommura (Hays, T. and P. 1982). On Ommura see Johnson 1982a; 1982b; Mayer 1982; Mayer in press). Some additional material is provided by Grossman's human geographical study of commodity production in a Northern Tairora village (Grossman 1984).

Generally speaking Ommura exemplify what Watson refers to as an 'Eastern Highlands pattern of subsistence' (1975:227). They raise pigs but as elsewhere in the Tairora area and the Eastern Highlands generally on a noticeably smaller scale than in many parts of the Central and Western Highlands (Grossman 1984:160-72; Boyd 1984; Brown P. 1978:142; Feil 1984; Feachem 1973)⁽⁴⁾. Sweet potato constitutes the staple crop. Other important items in the Ommura diet are bananas, sugar cane, greens, yams, taro, winged beans (*psophocarpus tetragonolobus*), maize, pumpkins, squash and 'pitpit' (Melanesian Pidgin for setaria palmifolia and saccharum edule). This kind of diet may be supplemented with store-bought foods such as tinned fish, meat and rice, with small wild animals including marsupials, frogs, rats and eels and with wild vegetable foods such as mushrooms and wild greens.

Ommura distinguish three named types of gardens, ama uta ('sweet potato garden'), kiera uta ('taro garden') and ova uta or tana uta

('yam garden'). They also have gardens of coffee trees and many residential houses have small yards in which are grown various vegetables and tobacco. Banana trees are often planted close to houses as Ommura people say this enables them to protect the fruit from the ever present threat of damage by fruit bats or flying foxes (dobsonia moluccensis). 'Sweet potato gardens' typically contain any combination of sweet potatoes planted in mounds, bananas, sugar cane, corn, greens, pumpkin and squashes. Ommura maintain that taro and yams do not grow well on higher ground. Hence while 'sweet potato gardens' are made at various elevations 'taro gardens' and 'yam gardens' tend to be situated at relatively low elevations along streams or near the river banks. 'Yam gardens' typically contain yams and winged beans, both plants which are run up poles.

Agricultural work is subject to some seasonal variation. The major crop, sweet potato, is planted and harvested throughout the year. However yams and taro are planted only around the start of the period known by Ommura as 'rainy time' (vati enta) and only harvested at the end of this season. 'Rainy time' extends from about October to May and is marked for Ommura as much by the location of the rising or setting sun as by differential rainfall. The clearing and burning of ground in preparation for making gardens seems to be more frequent during drier weather, while people sometimes prefer to leave the digging and tilling of the soil and the preparation of the ground for planting until a rainy period when the ground is damp and easier to work.

Like other Eastern Highlanders Ommura live in discrete villages rather than in dispersed homesteads such as are found in the West (Brown, P. 1978:142; Feil 1984:64). They also share with other Eastern Highlands people a lack of emphasis on agnatic idioms in political organisation. In 1973 de Lepervanche wrote:

In most Highlands societies each parish⁽⁵⁾ consists ideally of an exogamous patri-clan whose members claim exclusive rights to parish

territory...ideally parish members consist of males of the one clan, plus their unmarried sisters, wives and children. At marriage a sister goes to live with her husband on his parish land. (1973:31).

In Ommura, however, the members of a village community - the basic local territorial/political unit corresponding to de Lepervanche's 'parish' - represent themselves simply as 'people of one ground' (quamatanahua) or as 'people of one house' (quanramunahua). They do not try to conceptualise their solidarity or territorial rights in terms of genealogy or common descent. A significant proportion of women and men marry within their own village although no prescriptive rule of village endogamy exists.

It has become apparent over the past decade or so that similar features are quite common in the Tairora speaking area and elsewhere in the further reaches of the Eastern Highlands. The Kamano village is not exogamous nor 'thought or spoken of as an agnatic group: it is a village state, a political and territorial unit' (Mandeville 1979a:107). Its members represent its unity in terms of idioms such as the sharing of food production and consumption and the defence of a territory (Mandeville 1979a:106-7). Among the Northern Tairora of Abiera, Batainabura and Kapanara villages, the Southern Tairora of the Ndumba basin and also South Fore the local group is not exogamous. Nor is it clearly represented by its members as an agnatic group (Watson 1983; Grossman 1984:41; Hays 1974:76; Glasse and Lindenbaum 1973:365, 369; Sorenson 1976:134; cf. Craig 1969). Marriage within the local group is also practised among Sambia and in Auyana (Herdt 1981:39f; Robbins 1982:221f)⁽⁶⁾.

In other ways too Ommura villages manifest the kind of 'boundedness' that Feil (1984) suggests is typical of Eastern as opposed to Western Highlands societies⁽⁷⁾. The relationships created by inter-village marriages are frail and do not generally provide a basis for inter-group alliances of any kind. One does not find the kind of elaborated ceremonial exchange systems that play such an important role in some other

parts of the Highlands in creating links between groups. Furthermore leadership in pre-colonial Ommura was, as elsewhere in the Tairora region, based more on military skills than manipulation of wealth or success in competitive exchanges (Watson 1973:264; Grossman 1984:76). The kind of entrepreneurial 'big man' described by Sahlins has not apparently been a feature of Ommura society (Sahlins 1963).

The bounds of Ommura are clearly defined in people's own perceptions. Ommura not only fail to recognise any grouping ~~com~~extensive with McKaughan's 'Southern Tairora speakers', let alone 'Tairora speakers'⁽⁸⁾; they also emphasise that 'Ommura talk' (ommura ua) is significantly different from the 'talk' of other villages classified by Vincent as speaking the 'Asara' dialect. Along with language they distinguish themselves from their neighbours by claiming a separate autochthonous origin as related in their myth of origin.

Until colonial times the three villages, standing some miles apart, were virtually self contained and autonomous units in both economic and political senses. Inter-village warfare was endemic and there was no group or body transcending village boundaries which convened for any purpose or carried ritual or political functions. As just explained there has been little emphasis on creating inter-village links either through marriage or exchange. However all Ommura did acknowledge in principle a convention limiting the killing of opponents in fighting between their own villages. The injunction was to spare the life of an opponent with whom one had a quaokiera name in common (the nature of quaokiera is discussed in the following section).

This principle is clearly presented in the Ommura myth of origin. According to the myth the Ommura area was first populated by six groups of people who emerged simultaneously from the six named mountains⁽⁹⁾. The groups that emerged from the Wamina, Imunara and Oravaraior mountains

were called respectively Obaira, Tchiauxi and Nronrakyamatana. Each of these groups of people was 'put' by a different mythical figure, an uri, on a particular strip of land running down from the mountain top from which they had emerged down to the Llamari river. Then each uri 'gave' his group a particular plant or natural substance. Warerata were given the plant known as taukiera by the uri Wamina, and Tchiondera a species of sugar cane and one of cordylyne by the uri, Tchionderavai. Matota and Obaira respectively were given soil and wood for making arrows by Oravanaior and Matairi, and Tchiauxi and Nronrakyamatana were given respectively water and fish by Tchiauxivai and Marairosina.

The uri then marked out three villages to which they gave the names still in use: Yonura, Asara and Koronumbura. They divided each of the six groups between all three villages so that people ceased to reside and garden immediately below the same mountain from which they had emerged. One of the uri told the men to remember their mountain of origin and to pass this knowledge on to their children. In future when fighting occurred between Ommura villages the men from opposing sides who drew bows at one another should shout out the names of 'their' mountains. If the name were the same they would know that they were quaokiera, 'people of the same distant origin',⁽¹⁰⁾ and therefore spare each other's lives.

It will be noticed that Ommura do not, as in the case of the phratries or 'tribes' described for certain parts of the Highlands (cf. Meggitt 1965:8f) define themselves genealogically as descendants of a single founder. In the myth none of the six groups is said to have been linked by ties of kinship to any of the others. In this Ommura resemble Eastern Highlands groups such as the Southern Tairora speakers of the Ndumba basin who regard themselves as the descendants of seven, mostly unnamed, autochthonous 'ancestors' who sprang up in Ndumba territory,

and the Gururumba who claim to be descended from a common set of unnamed 'ancestors' who do not form a descent group among themselves and were simply the original group to occupy Gururumba territory (Hays 1974: 76-80; Newman 1965:31). Moreover, as I shall note, people who are avowedly immigrants from outside the Ommura area, or the children of such immigrants, may come to be regarded as established members of an Ommura village through residing there for some time and participating in its affairs. It is claimed that a non-Ommura who resides for a while in an Ommura village will, through eating food grown on its land, automatically begin to speak 'Ommura talk'. This view does not involve a clear fusion of 'descent' with 'locality' idioms as in the case of the Siane who hold that eating food grown on a group's territory can connect a person with that group specifically because the food is suffused with the group's 'ancestral spirit' (Salisbury 1962; 1964. cf. Strathern A. 1973).

Thus a person's identity as an Ommura is not based simply on whether he or she is represented as a descendant of one of the original inhabitants or as participating in the spirit of these beings. Residence in a village they founded is equally if not more significant. Here there are some parallels with Kamano who consider their villages to have been established by ancestral beings, but also as resembling 'houses which retain their names and positions in space and some constant relationships with other houses and their occupants, while the occupants themselves change....' (Mandeville 1979a:112).

QUAOKIERA

In principle most people should be able to cite one or another of the six groups of original inhabitants as their 'distant origins' and claim the associated name. Quaokiera or 'people of the same distant origins' cut across village boundaries, and representatives of all or most quaokiera are found in each Ommura village. Men and women take on

their quaokiera affiliation from their fathers. In associating themselves with one of these groupings they do not trace their origins to specific named or unnamed members or genealogical links going further back. While quaokiera may once have played a more important social role, at the time of my fieldwork Ommura people did not attach much importance to them either in intravillage or cross-village contexts. A person's association with a particular group of original inhabitants or with other contemporary 'descendants' of that grouping was rarely invoked. This section looks at the current significance of quaokiera.

Women and men alike were quite frequently unable to specify the quaokiera affiliations of their co-villagers. Moreover of the married men and women whom I questioned about their own affiliation⁽¹¹⁾ about a quarter of the men and just over half the women answered that they 'did not know' or 'had forgotten'. Included in such answers were all of the respondents who had been born outside the Ommura area. While these were all regarded as established Yonura residents it had apparently not been considered important for them to adopt an affiliation. Watson describes a similar vagueness regarding membership of the Northern Tairora groupings he terms 'sibs'. In both villages where he worked a number of people gave 'don't know' answers to his questions about their sib affiliation (Watson 1983: 104-9).

In earlier work I referred to quaokiera as 'dispersed clans'. This seems the best term available, but as is quite often the case where categories such as 'clan' and 'lineage' are used for New Guinea groupings it is necessary to draw attention to ways in which such terminology might constrain our view of the data at hand (e.g. Langness 1969:38, 1973a; Glasse and Lindenbaum 1973; cf. de Lepervanche 1973)⁽¹²⁾. In noting this it is not my intention to revive the controversies over the use of descent models that marked Highlands anthropology in the sixties and early seventies (e.g. Barnes 1962; 1967-8; Sheffler 1973; Meggitt 1965;

Langness 1964; McArthur 1967), nor to join the more recent and fundamental debates about the status and utility of 'descent theory' (e.g. Kuper 1982; Verdon 1980; Hammond-Tooke 1984; Feil 1984), but simply to clarify the picture of quaokiera.

Quaokiera are 'clan-like' insofar as a hereditary common name is transmitted through one line with an associated assumption of shared origin. However the common reference point is not a single ancestor or even an ancestral group of kin. Even within a village kin grouping (i.e. quanranre)⁽¹³⁾ whose members share the same quaokiera affiliation are, like the constituent lineages of the 'sibs' and 'patrilineage clusters' described for Northern Tairora (Grossman 1984; Watson 1970; 1983), represented as having a shared provenance rather than ancestry⁽¹⁴⁾. A common ancestor is not even posited. The six mythical groups of original inhabitants are described as having been groups not of kinsmen but of 'people of the same ground' (quamatana). As noted earlier this is the idiom still used today to conceptualise the solidarity of the members of contemporary Ommura villages. Accordingly, quaokiera like 'clans' and 'sibs' described for a number of other Eastern Highlands groups are named after geographical locations rather than ancestors - in this case after the mountain from which the group supposedly emerged (Glasse 1969; Westermarck 1981; Watson 1970; 1983. cf. Mandeville 1979a).

Considering the significance of the quaokiera concept in myth, the status of quaokiera today appears somewhat shadowy. This applies both in inter-village and intravillage contexts. There are no situations where the members of a quaokiera or even its representatives in a village or hamlet have occasion to convene, act together or show solidarity. Possession of a common name does not imply nor give rise to joint rights. Finally there are no offices or leadership roles associated with a quaokiera or special terms by which members address one another.

As noted earlier the origin myth associates each group of original inhabitants with a tract of land near the mountain from which it emerged. However the quaokiera does not control land. In remembered history the relationship between each quaokiera and a particular territory has been considered to belong to the mythical past ('the time of the uri') with no significant bearing on current land rights. While the land associated with each group is said to run from its mountain of origin down to the Llamari river, there is no attempt to demarcate its boundaries as in the case of the territories of many localised Highlands 'clans'. The village is the only social unit with a corporate interest in a particular territory, although rules regarding access to land are rarely spelled out and highly flexible as in other Highlands groups where perceived land shortage and land disputes are rare (e.g. Langness 1964; Grossman 1984; cf. Harding 1973).

There are apparent parallels in these regards among other Tairora speakers. The people of Batainabura represent particular 'sibs' resident within the local group as having originated in specific parts of its territory. However they seem not to treat such historical or mythical associations as a basis for current land rights (Watson 1983:19). The basic territorial unit is the local group whose members, apparently, place more emphasis on locality than 'descent' idioms in conceptualising their unity and solidarity (Watson 1983:44, 206). In Kapanara village, which is composed of several 'patrilineage clusters' not related by kinship ties, each cluster 'is associated with a particular tract of land... where its ancestors first settled' (Grossman 1984:96). However, until recently, when the economic value of land increased, members of different 'patrilineage clusters' frequently held proprietary rights in the lands mythically associated with each cluster (Grossman 1984:96-80)⁽¹⁵⁾.

Quaokiera like Northern Tairora dispersed and localised 'sibs' are

not exogamous (Watson 1983 126, 133). Nor was it ever suggested that, within a village, kin groups (quanranre) whose members were of the same quaokiera should not intermarry⁽¹⁶⁾. This would seem to 'fit' with the emphasis on intravillage marriage which Ommura, as noted earlier, share with other Tairora speakers and some other Eastern Highlanders. Among Kamano lineage 'clusters' are insignificant enough and criteria for membership in them uncertain enough...for membership to be declared irrelevant to marriage' in many instances. Mandeville relates this lack of emphasis on 'lineage cluster' exogamy to a desire to marry if possible within the village and hence not to reduce the comparatively small chance of finding a suitable spouse there by prohibiting marriage within the cluster (1979a:113). Similarly in Kapanara, where a majority of women and men marry within the village the 'patrilineage cluster' is not exogamous (Grossman 1984:41).

As will be seen, warfare between the three Ommura villages was endemic and there was little in the way of peaceful interaction between them. In keeping with this cross-village quaokiera relationships are not and were not in the remembered past a source of refuge, hospitality or assistance of any kind. Quaokiera do not, like the dispersed 'clans' or 'descent categories' described for certain parts of New Guinea, play an important role in tempering the discreteness and self sufficiency associated with local group endogamy (de Lepervanche 1973:34). The one commonly named obligation to fellow quaokiera members resident in other villages is to avoid killing them in the course of inter-village hostilities.

I heard several war reminiscences in which, in accordance with the injunctions of the mythical founder (uri) men of opposing sides spared each other because both called out the same mountain name⁽¹⁷⁾. In a male initiation rite I attended the novices were reminded not to forget

this rule. Some people said that women might also avoid being killed by the enemy if they called out the mountain names of their fathers. Yet it was stressed that in practice warriors commonly killed members of the same quaokiera 'accidentally', due to the difficulty of hearing mountain names against the din of battle. Moreover people sometimes 'did not know' which group of original inhabitants they were descended from. I also heard of a number of incidents in which men had decided for tactical reasons not to spare others of the same quaokiera.

While these dispersed quaokiera may exert a moderating influence on inter-village hostilities, quaokiera membership has and had in the remembered past little significance as regards intravillage relationships. Within the village kin groups (quanranre) associated with the same quaokiera do not for that reason regard themselves as having specific rights or obligations in relation to one another. I never heard a person invoke quaokiera ties with a fellow villager in order to secure a favour. The strength of other kinds of ties between co-villagers would seem to make this redundant. Within the village, quaokiera affiliation is not considered to have an important bearing on residence or men's house membership. A similar pattern apparently exists in the Northern Tairora villages of Abiera and Batainabura where 'informants repeatedly stress that members of sibs are residually intermixed as if to acknowledge to the contrary would imply a lack of sociability between them' (Watson 1983: 125)⁽¹⁸⁾.

I would suggest that the role played by quaokiera and the significance placed on them is likely to have changed over time. In particular, given their moderating role in warfare, it is a reasonable inference that they were more important in inter-village contexts before pacification. On the other hand I have no clear evidence of the kind of development reported for some other parts of the Eastern Highlands where 'lineage clusters' within the village increased in importance following the

imposition of control by the Australian Colonial Government.

Writing of Kamano 'lineage clusters' Mandeville suggests that these

loose associations of lineages...gained importance only with pacification and census taking...pre-pacification memories and anecdotes reveal that a man's neighbour in the men's house or a woman's neighbour in the stockade might be a member or the wife of a member of any of the village's lineages. My information suggests that modern clusters represent a more formal organisation of lineages previously very loosely associated... (1979a:108).

As already indicated, criteria for membership in contemporary Kamano 'clusters' is uncertain and they are not exogamous. Nor do they control land (Mandeville 1979a: 108). However Mandeville's respondents claimed that they had become more important as, following pacification, they began to be used as a basis for organising public works, voting in local elections and allocating positions of public responsibility (Mandeville 1979a:109). Moreover Kamano are beginning to place 'some emphasis on the desirability of cluster exogamy' although 'this is not firmly enforced' (Mandeville 1979a:108).

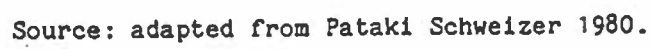
Similarly Grossman shows how with the suppression of warfare and the advent of commodity production 'patrilineage clusters' in Kapanara began to gain importance as property owning groups. When war was still endemic in the area 'security in numbers was the prime consideration and, given the abundance of land, the people of one cluster did not prevent members of another cluster from gardening on their land' (Grossman 1984:98). However with the introduction of cattle projects and consequent enclosure of land the villagers began to perceive land as an increasingly scarce and valuable resource. 'Consequently some villagers assert that one should obtain proprietary rights only on the territory of one's own patrilineage cluster, and in several cases membership of one cluster prevented those of another from establishing such rights' (Grossman 1984:244).

In Ommura the administration has treated the village and hamlet rather than the quaokiera or its representatives within a village as the significant unit for voting and the allocation of official posts such as those of 'luluai' and tultul'. Moreover payment for land leased to the government and mission has been to the village as a whole. As will be seen cash cropping has quite recently begun to provide a significant source of income. Ommura do not yet, like some other Highlanders (e.g. Westermarck 1981; Grossman 1984) perceive themselves as being short of land for traditional horticulture or cash cropping. However they are aware of how, among some neighbouring people, the introduction of coffee and cattle production has led to changes in the value placed on land and a new emphasis on membership of various kinds of groups. One man suggested to me that in the Ommura area too a situation could arise in which increasing shortage of land for growing coffee led people to claim land rights on the basis of quaokiera membership. Ommura might thus be seen as having 'potential' (rather than 'actual') clusters of kin groups (quanranre) which might become more active in the future if, for example, land began to be perceived as scarce. Of course these kin groupings might then 'cluster' according to principles other than those of quaokiera.

CONTACT BETWEEN OMMURA AND NEIGHBOURING PEOPLES

An elderly man recalled having heard from his father that Yonura had been visited a 'very long time ago' by a party from 'Nompia', the Northern Tairora community known by the administration as Turabura (see Map 5). Ommura had obtained stone axes from these men who had in turn acquired them from people further north, possibly Gadsup or Agarabi 'who had a river which rubbed stone axes extremely smooth'. There is no recollection of any other contact with Northern Tairora before the early 1960s when some Yonura men accompanied a patrol as far as Barinabuta. Ommura claim to have been unaware until quite recently of the existence of Gadsup and Agarabi to

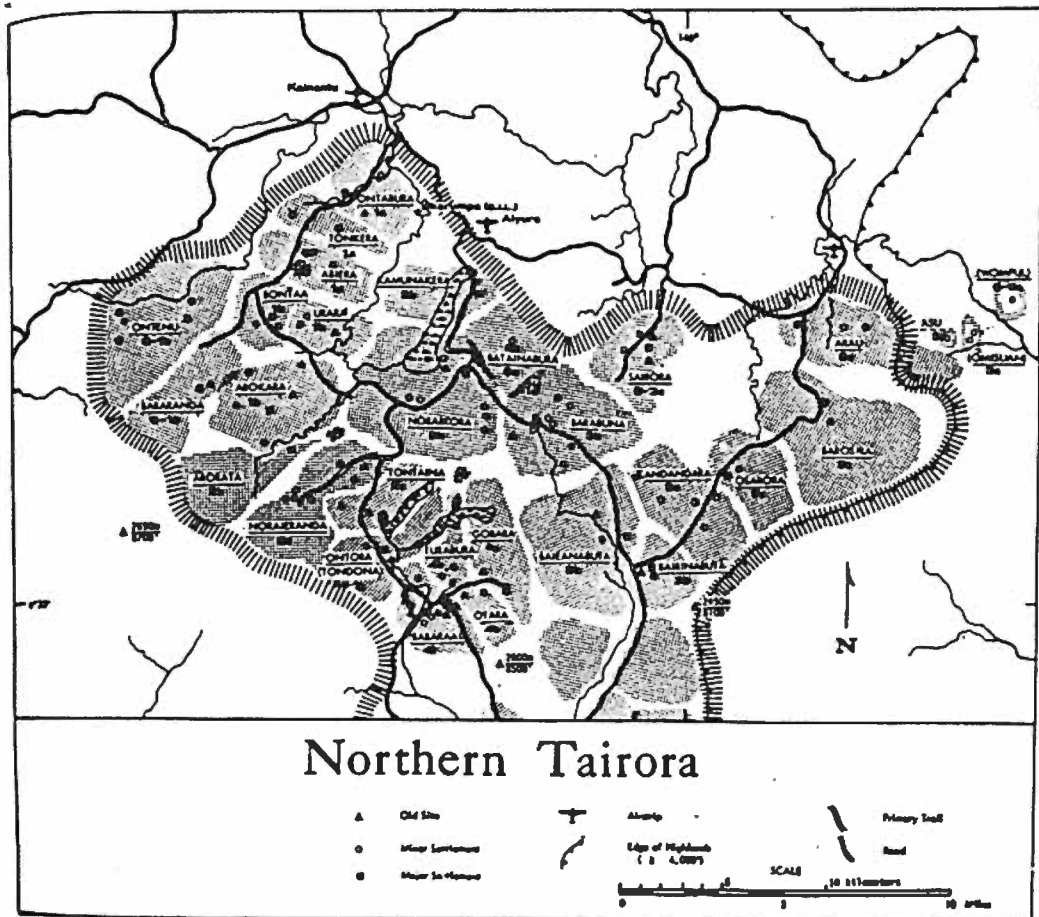
SOUTHERN TAIORA



Source: adapted from Pataki Schweizer 1980.

NORTHERN TAI RORA

NORTHERN TAIORA



Source: adapted from Pataki Schweizer 1980.

their north and the Awa, Auyana and Fore speakers to the west (see Map 3).

Natural sources of salt are rare in Southern Tairora (Hays 1974) and until the 1960s when store-bought salt became quite easily available, Ommura were visited regularly by Anga speakers (Baruya), whom they call 'Imani' and from whom they obtained blocks of salt manufactured from coix gigantea (Godelier 1977). In return Ommura supplied these trading parties with black palm for the manufacture of bows, arrows and adze handles, shells, and later steel axes and bush knives. These transactions did not involve the formation of long term individual trading relationships. Because they lie past the terrain of potentially hostile groups to the south Ommura did not apparently visit Baruya villages until quite recently when some Yonura men were contracted to work on a government air strip at Wonenara. Relations with Baruya were generally amicable. However I heard of a case in the early 1960s in which they had been held responsible by Yonura people for the death through sorcery of a youth. There was no attempt at reprisal.

To the immediate east, on the slopes of the Markham valley, are a number of villages inhabited by Waffa speakers who are known to Ommura as 'Ana'. Ommura claim never to have fought with these people or feared military or sorcery attack from them. Exchange or torti partnerships between individual Waffa and Ommura men were important sources of trade items for both parties as well as of refuge from the military attack and tension at home. Yonura people tell of how Atirahasa, an Ommura fight leader and his torti Ngaungau a Waffa fight leader helped each other to avenge the death of close kin. Generally speaking, however, torti did not provide military assistance.

In each Ommura village men apparently formed their torti relationships with men of particular Waffa villages that they could reach in about

a day and with relatively little risk of encountering enemies. Previously Ommura exchanged mainly piglets and arrows with Waffa in return for items such as clay pots, betel, pandanus nuts and stone axes. Around the early 1930s Waffa began to supply Ommura with steel implements and also with maize, pumpkin, squash, beans and other foods new to the Ommura diet⁽¹⁹⁾.

The Markham valley, further to the east, was known only by hearsay as 'Rahamamata', a dangerously hot place rife with lethal snakes and populated by huge men who killed people with sticks rather than bows and arrows.

Except for Motokara which is near an easily crossed point of the river, Ommura had in the remembered past, and even now have, little contact with Southern Tairora villages on the west side of the river. Those along a north-south axis from Motokara and Kaurona to Habiina (including the Ommura ones) seem to have constituted a sphere in which each generally regarded the others as currently or potentially hostile⁽²⁰⁾ (see Map 4). In the Southern Tairora area, as among Kamano, the most intensive inter-group fighting frequently occurred between adjacent villages (Mandeville 1979 a; Hays 1974). Thus in the remembered past Yonura people usually regarded Asara and Koronumbura as their main enemies, always liable to attack even after a truce. They rarely fought on the same side as members of either of these villages and preferred to avoid marriages with them. Yonura sometimes joined with other villages in this sphere against a common enemy. These alliances occasionally led to some visiting between the two villages, the formation of a few torti relationships or one or two marriages. They were however ephemeral and constantly shifting. Yonura people claim that they did not cease to regard those with whom they co-operated in this way as a military threat.

The banning of warfare by the Australian Colonial Government has not been followed, as in some other parts of the Highlands, by a marked increase in contact with neighbouring peoples (e.g. Sorenson 1976:227).

While the threat of attack from military enemies has decreased that from sorcery is felt to have grown and fear of sorcerers significantly restricts mobility in the area. Sorcery, like warfare, is considered to be intense between adjacent villages.

Ommura were reluctant to use the footpaths cleared for the use of patrols in the 1950s and linking the Ommura area with Barinabuta and later Kainantu. Like Northern Tairora they regarded as potential sorcerers any strangers encountered on these theoretically safe 'government roads' (Watson 1983:298). Contact with Northern Tairora increased following the construction in the late 1960s of a road providing vehicular access to Kainantu. Towards the mid 1970s when the road was improved Ommura began to travel to Kainantu in the relative safety of coffee buyers' trucks, sometimes stopping off in Northern Tairora villages to obtain pineapples and beef⁽²¹⁾. While Ommura attitudes to their Northern neighbours are still tinged with apprehension a few men have formed relationships with Northern Tairora to whom they regularly give cash and arrows in return for beef and pineapples. Two Yonura men have such relationships with partners from Barinabuta. For the first time in remembered history some marriages have occurred between Ommura and Northern Tairora.

As Ommura turn their attention to the north interest in the Waffa seems to be declining. Ommura men still value their torti exchange relationships with these people as a source of betel and pandanus nuts. However visits to the Markham valley slopes have become less frequent as Ommura have become less dependent on Waffa for wartime refuge. As already indicated visits from Baruya have become increasingly rare as Ommura demand for their salt has declined although not disappeared.

'CONTACT' HISTORY AND RELATIONS WITH GOVERNMENT

By the end of the nineteenth century northern and southern coastal regions of present day Papua New Guinea were being brought under colonial

rule by the Germans and British respectively. These areas were later taken over by the Australians. Lutheran missionaries visited the Eastern edge of the Highlands in 1919. However the first major exploration of the area by people of European descent was not until the 1930s when gold prospectors began to push forward into the interior (Radford 1972). It was apparently the miners' reports about the Highlands that prompted the Australian colonial administration to sponsor reconnaissance patrols to assess the human and physical resources of the area. The government's efforts to bring the Highlands under administrative control commenced shortly afterwards with the establishment of a number of stations from which patrols were sent out to make contact with and pacify the inhabitants. Missionaries also increased their activities in certain parts of the Highlands, exhorting people to abandon traditional beliefs and rituals such as initiation rites (e.g. Radford 1972).

Initial contacts between Highlanders and the administration were usually peaceful, though subsequent patrols were sometimes attacked with bows, arrows and stone axes, and there are reports of Highlanders being killed in retaliation despite official directives to avoid violent reprisals as far as possible (e.g. Westermarck 1981:93; Watson 1983:188; Brookfield 1972). In comparison with other parts of the world pacification in the Highlands involved relatively little bloodshed. Highlanders armed only with bows and arrows, and without patterns of inter-group alliance facilitating organisation into large fighting units, were quick to recognise their vulnerability in the face of Australian patrol officers and indigenous policemen with guns. They seem often to have been impressed with the material possessions of the patrols and approving of their announced intention to end warfare, although this approval may sometimes have been based on incomplete understanding of the long term changes pacification would bring (Rodman 1979; Berndt 1964; Sorenson 1976).

By the late 1950s or early 1960s even the most remote parts had been officially pacified.

According to Amarshi the post war interest in the Highlands was partly a reflection of an increased demand for plantation labour (1979a). Certainly the area quickly became an important labour reserve for the expanding colonial economy based largely on cocoa, copra and rubber plantations in the coastal areas. After the war a boom in commodity prices lent urgency to the colonial planters' attempts to rehabilitate their devastated plantations. Shortage of labour was a major problem, a solution to which was sought by tapping the Highlands in the late 1940s. Shortly afterwards the government set up the Highlands Labour Scheme under which thousands of Highlanders were recruited for contract labour on coastal plantations (Mair 1948; Amarshi 1979a). The post war administration adopted a policy of encouraging village as well as plantation based export production and various cash crops, most importantly coffee, were introduced by agricultural extension officers. From the 1950s onwards the introduction of taxes in conjunction with Local Government Councils impelled Highlands subsistence horticulturalists to become involved in wage labour and cash cropping (Boyd 1975; Brookfield 1972).

Unprecedented by gold prospectors or missionaries the first government patrol to reach the Ommura area was in the early to middle 1950s. The white Australian patrol officer in charge was accompanied by a number of policemen from the Papua New Guinea coast and a Northern Tairora interpreter. Until this time the only Yonura person to have encountered a white person was the fight leader Atirahasa who had met a missionary while visiting a Waffa village.

Most of the villagers fled to the bush as the patrol entered Yonura from the north, demonstrating the power of their guns by shooting into the air. Munrabe, one of the few people to remain in the village,

described his encounter with the intruders as follows:

Naroto [the Ommura name for patrol officer Norton] looked at me. My heart was thumping and I thought 'Why did I stay here? These men will kill me'. The people heard his talk and I heard the women cry for me their tears falling to the ground. He asked 'Have you killed many people?' and I answered 'Yes I have killed many people' [an indication that he was a fight leader]. Then he called to me to come closer. Holding my shield in front of me and my bow and arrows I came closer and he gave me a bushknife, 'laplap' cloth, salt, matches and a badge. In the afternoon the policemen (piripo) dragged some people out of the bush and brought them to the village. Naroto said I must carry his things back to Nompia. I refused.

In the next seven or eight years three patrols passed through the Ommura villages and by the early 1960s the area was being patrolled regularly. Communication between the villagers and government officers was poor. There were no local Melanesian Pidgin speakers or interpreters fluent in any Southern Tairora dialect and no Ommura person was willing to train as a government interpreter. While the patrol reports do not mention violent encounters with the villagers, Yonura people claim that one of the early patrols entered a men's house in their village and shot dead eight of its occupants as a reprisal for fighting with Koronumbura. Programmes emphasised by the administration during this period were concerned with road building, improvement of village health and eradicating the warfare in which Tairora, like other Highlanders, were continually involved in pre-colonial times. By the mid 1960s Yonura men had been prevailed upon to assist with clearing a footpath from Yonura to Barinabuta for the use of patrols. Most villagers had received anti-yaws injections and some had complied with government orders that pigs should no longer sleep with women but in specially built shelters. Latrines had been eagerly adopted as a means of preventing sorcerers from gaining access to faeces. Inter-group fighting was still frequent although it had apparently decreased in scale. A patrol report from the early 1960s stresses the need for improved law and order in the area.

A 'luluai' for each village in the administrative area had been appointed during the first patrol. 'Tultuls' were appointed to work

under them a few years later. These village officials, like their counterparts elsewhere in the Highlands, were supposed to act as mediators between their villages and the administration and to assist with the maintenance of law and order in their communities and the implementation of government projects such as road building. In the Ommura area as in other parts of New Guinea there was no real precedent for leadership roles such as these (Lawrence 1973). The Yonura 'luluai' at least was a flight leader at the time of his appointment. However patrol reports and villagers' reminiscences suggest that in Ommura and elsewhere in the administrative area 'luluais' and 'tultuls' did not command the kind of authority that would have enabled them to perform effectively the duties officially required of them, and were not strongly committed to or even clearly informed about their official responsibilities.

Some Ommura men and women say that they were optimistic during this early phase of 'contact' that the government's ban on warfare would lead to an improvement in the quality of life. They began to look forward to a time when fear of enemy attack would no longer rule their lives. The fact that they did not, like some other New Guineans, readily comply with the government's injunctions against warfare reflected a feeling that military activities were necessary for defence (Sorenson 1976: 41; Rodman 1979). At the same time the government's ability to suppress fighting through the threat and occasional use of firearms seems to have induced a sense of powerlessness in relation to the powerful intruders. It also undermined confidence in the validity of dominant images of masculinity and femininity. As will be seen definitions of the distinctions between the sexes were closely tied up with the image of men as near invincible warriors.

Fear of government personnel was combined with defiance manifested in refusal to enter into reciprocal relationships with them or obey their orders. Patrol reports for the 1950s and 1960s describe the people of

the administrative area as 'truculent', 'uncooperative' and 'unfriendly' in comparison with other Highlanders. They also note their frequent refusal to co-operate with attempts at census taking and to provide food for sale to patrols.

Ommura reminiscences do not reveal the kind of marked admiration shown by some Highlanders for government representatives' material possessions, nor a preoccupation with obtaining wealth through contact with the newcomers or acquisition of their knowledge (cf. Lindenbaum 1979: 111; Grossman 1984:22). This seems consistent with their lack of emphasis on wealth exchange in comparison with many other Highlands groups. Moreover from the time of their first contact with patrols Ommura people have likened the bodies of white people and coastal Papua New Guineans to types of bamboo which are long, slender and 'weak' (hia kyapukya), unlike Ommura physiques which had the 'strength' (kyapukya) of shorter, more resilient bamboo. The 'red' (eara) skin of whites is compared to the 'weak', easily sunburned and 'bad' skin of Ommura albinos. On the other hand villagers were impressed by the 'strength' of government representatives' firearms. They also sought to imitate the officials in certain ways. After the first few patrols Ommura men began to cut their long hair and wear shorts or 'laplaps'. Traditional 'beehive' thatched-walled dwellings were gradually replaced by huts with woven bamboo walls like those of the government rest house.

In the early 1960s several Yonura men were convicted in the Kainantu court of killing a party of Chimbu traders who had ventured on foot into the village to purchase locally made traditional valuables. It was apparently this incident that prompted the administration to take steps to improve law and order in the administrative area by setting up a government station there. The Obura patrol post was established in 1965 on land leased from Yonura people. Those convicted of the murders were

sentenced to work without payment on the construction of the station buildings and airstrip. Soon afterwards a road was constructed providing vehicular access to Kainantu in the dry season. A store was then set up on the station grounds where staff and local villagers could buy items such as tinned meat, fish, rice, tobacco, kerosene and paper.

The first senior patrol officer was a white Australian who was replaced in 1975 by an officer from Manus Island. In addition the patrol post has usually been staffed by three junior patrol officers, five policemen and two clerks all from coastal parts of Papua New Guinea, two agricultural extension officers and a driver from elsewhere in the Highlands and two interpreters and two carpenters from villages in the administrative area. The presence of these officials led rapidly to a marked decline in the scale, duration and frequency of inter-village fighting, especially between groups in the immediate vicinity of the station. Several outbreaks of such conflict occurred between the establishment of the patrol post and the end of fieldwork. However in each case hostilities were halted within a day by policemen arresting the combatants or threatening to do so. Those arrested for fighting are usually tried in the patrol post court. In some cases the court also attempts to settle disputes considered to have caused the hostilities. However it has generally been unsuccessful in solving the issue to the disputants' satisfaction. The fining or occasional gaoling of an attacker or thief brings little solace to the injured and grievances remain (cf. Brown, P. 1978:210; Meggitt 1971:11; Berndt 1962:247).

Another important development arising out of the establishment of the Obura patrol station was the recruitment of young village men by the patrol officer to work, mainly on coastal plantations, as labourers under the Highlands Labour Scheme. Until this time opportunities for earning cash had been largely limited to occasional short term casual labour for

men on government projects. Ommura were not within easy reach of any administrative centre, plantation or large mission station which might have provided regular employment or a market for local produce. Only a handful of men from the administrative area, including one Ommura, had left to seek work. Nor, as in some other parts of the Highlands, had land sales to the government provided a significant source of cash (e.g. Westermarck 1981).

The wages for this plantation labour were \$A 50 per annum for each year of a two year contract plus \$ 90 on completion⁽²²⁾. Often most of this cash was spent before returning to the village on food from the plantation store and items such as clothing, soap, hair oil, sun-glasses, mirrors, radios, watches and ukuleles. Plantation labour was an important source of direct and indirect knowledge about the 'outside world' as well as of consumer goods. The journey provided Ommura men with their first experience of urban living and of sustained contact with culturally different people such as coastal New Guineans, co-workers from elsewhere in the Highlands and whites. However because Ommura labourers tended to stick closely with their co-villagers during their time on the plantations few learned to speak Melanesian Pidgin fluently.

By the early 1970s the Llamari Local Government Council had been established. It represented part of a general policy by the administration to replace direct rule through government appointed 'luluais' and 'tultuls' by Local Government Councils as the lowest echelon of a national bureaucratic structure. Each village in the Dogara Census Division constitutes a ward represented by an elected councillor (kaunsil) and one or more committee men (komiti) whose official role is to assist him. Thus the Llamari Council is not, as are some other Local Government Councils, based on traditional groupings or alliances (cf. Strathern, A. 1974: 248; Nelson 1974:121; Lawrence 1973:28-9). It includes villages that regard each other as major or potential enemies as well as groups that had

and even now have very little contact with one another.

The council was designed to provide a wider basis than traditionally existed for co-operative regional development. Councillors and committee men from each village in the council area are supposed to meet regularly at the Obura patrol post to discuss and formulate policies on issues of local importance, in particular the use of council funds for projects to stimulate local economic development. They do not have official court powers⁽²³⁾. In practice attendance by councillors and committee men is low and, as in some other parts of Papua New Guinea, the council advisor, in this case the senior patrol officer, takes much of the effective responsibility for the allocation and administration of council funds (Nelson 1974:121; Keris, P. 1975: personal communication).

These funds are mainly from taxes which the council levies on men over fifteen and not considered to be infirm or non-productive. Taxation was introduced for the first time in conjunction with the establishment of the council thus making it necessary for most men to earn cash. To enable local people to pay their taxes the administration encouraged them to grow coffee as a cash crop, and in the early 1970s agricultural extension officers supplied each household with arabica coffee plants. In 1975 residents of villages selling coffee were assessed at K5 each. Members of villages without coffee as a saleable crop were required to pay only 30 toea each⁽²⁴⁾.

The Llamari Council has not as yet played a significant role in overcoming long term enmities between its constituent villages or uniting villages in the area into more extensive alliances than traditionally existed. This is a reflection of villagers' general lack of involvement in the council system rather than of the kind of situation reported for some parts of the Highlands where the council becomes an arena for the expression of long standing antagonisms between member groups

(Reay 1973; Lawrence 1973:28). People in the Dogara Census Division do not regard the establishment of the Llamari Council as having involved significant changes in the relationships between its constituent villages or their relations with the administration. Like some other Highlanders they tend to see their council as representing the government or patrol officer rather than their own communities (Colebatch 1981). The patrol officer commented on the 'apathy' and lack of commitment regarding council affairs shown even by the councillors themselves (Keris, P. 1976: personal communication). Ommura represent their council taxes as money paid to the government (gavmani) rather than as funds deployed for their own benefit, and roads built with council funds were described as having been built for the government or patrol officer (kiripa). Even councillors and committee men speak of their council meetings as 'going to the patrol station', and few have heeded the patrol officer's attempts to persuade them to attend meetings regularly. This also reflects the fact that Ommura, like some other New Guineans, regard the local patrol post as a place where they are likely to be ensorcelled by people from enemy villages (Poole 1981:72).

So far council funds have been spent mainly on a programme of road building and improvement aimed at stimulating local economic development. It aims to link all parts of the council area with Kainantu and thus with the Highlands highway which provides the only road link between the Highlands and lowlands. In 1973 the road from the patrol post to Kainantu was made passable with four wheel drive vehicles all the year round. Roads linking Obura with Wonenara, the Waffa speaking area, and the most southerly Southern Tairora villages are currently under construction. The council also provided each village with one or two subsidised hand-operated coffee machines for communal use by the residents.

By the mid 1970s coffee was the main source of cash for those villages for whom the roads and hence coffee buyers were relatively accessible. Plantation labour had become less popular although some men still undertook it, especially those from villages without coffee as a significant source of income. Returned labourers told of poor working conditions and assaults by other workers. Moreover recruiting under the Highlands Labour Scheme had ceased in 1974. This was in line with the official emphasis placed on local development by the first indigenous parliamentary cabinet which came to power in 1972 under the leadership of Michael Somare. A small number of men from the council area had permanent jobs elsewhere in Papua New Guinea, but had in most cases virtually lost contact with their villages of origin. The only paid employment available locally was occasional casual labour for men on council or government projects and the carpenters' and interpreters' posts at the patrol station. Some local youths worked as gardeners and cleaners for patrol post staff, receiving 'pocket money', food and clothing for their services.

According to a 1975 government survey the first coffee trees had begun to bear around 1974 and most had not yet reached maximum production. The 180,000 or so coffee trees in the council area had yielded an average of $1\frac{1}{2}$ pounds of coffee per tree. The report attributed this unexpectedly low yield to insufficient spacing between trees and inadequate pruning and fertilisation. The estimated average income from coffee for the year 1975 was K41.60 per adult male. However by the end of fieldwork in 1976 coffee prices had risen following damage to the Brazilian crop. Most of the coffee is sold at the roadside to buyers from elsewhere in the Highlands who then sell the beans to processing factories in Kainantu. While villagers can obtain significantly higher prices for their beans by taking them to town themselves, people in the

Llamari area have little opportunity to do so as there are no locally owned vehicles. The owners of the public motor vehicles that sporadically enter the area charge passengers extra for each sack of coffee.

Other than coffee production there is little in the way of commercial activity. Coffee buyers and other Highlands visitors to the area provide an occasional market for traditional valuables such as grass skirts and arrows, and patrol post staff sometimes buy locally grown foods such as peanuts. People from the Llamari council area quickly gave up attempts to market produce in Kainantu as they discovered that the cost of transport there tended to cancel out any profits. A few local men, including two in Yonura, had used their coffee income to open licensed 'canteens' or stores stocked with small amounts of tinned fish, rice, soft drinks and newspaper which they transported by public motor vehicle from Kainantu. Of those in the Ommura area none was functioning during fieldwork. In each case the stock had been depleted within a day or two and not been replenished. The owner claimed to have made a loss or just broken even - due to the pressure to give away the goods without payment and the high cost of transporting them. Shortly before my departure both Yonura store owners had taken advantage of the rise in coffee prices to restock. As yet no villages in Ommura or apparently elsewhere in the council area has become involved in the kinds of business enterprise common in many parts of the Highlands such as purchasing and reselling coffee beans, operating vehicles for transporting fee-paying passengers or running smallholder cattle and piggery projects (Grossman 1984:25). A recent patrol report states that in the Dogara Census Division there is 'not enough good land to support business activities', and local people have not, like some other Eastern Highlanders, received government loans or subsidies for cattle projects (Friend, A.P.: Obura Patrol Report no. 4, 1973/4; Grossman 1984). So far there is no indication

of the pattern that has been developing elsewhere in the Highlands whereby villagers themselves hire others to help in commercial activities such as coffee production and cattle raising (Grossman 1984; Howlett 1980; Finney 1973).

The first primary schools in the Dogara Census Division were established by the Swiss Evangelical Brotherhood in the mid 1960s at their missions in the Tokena and Ommura areas. They were taken over and expanded by the administration in the early 1970s as part of the Somare government's stated policy of equalising services in different parts of the country. Government paid teachers were sent to each school to join the existing staff of Swiss missionaries, and a third primary school was opened in Baira. As only a handful of children from the census division had completed primary school the government initiated a scheme to raise the educational level in the area by providing secondary education for those without standard six. In 1975 twenty five children, three from Yonura were receiving secondary education in Kainantu and Goroka.

At the end of 1973 self government was granted to Papua New Guinea, and in September 1975 the country became independent. By mid 1976 these nationally important events had not involved abrupt or major changes in administrative policy towards the Dogara Census Division, at least of a kind that the villagers saw as having a significant impact on their lives (Johnson 1980). Local people had received little official information about self government and most were unaware that it had been granted. The Melanesian Pidgin leaflets through which the administration sought to disseminate information about the significance of national independence made little sense to most villagers. Nor, during fieldwork, were there any working radios in the Ommura villages. Self government and national independence were not, it seems, important subjects of local gossip and speculation. In the Ommura area at least people did not,

as did some other Highlanders, anticipate that these events might lead to major changes in their lives such as the weakening of administrative control and resumption of chronic warfare or violent self-help (Reay 1974: 236; Meggitt 1977:207; Josephides 1985:72. See also Strathern, A. 1980). The widespread fear of encountering the patrol post sorcerers from enemy villages made for a poor attendance at the independence day celebrations organised by the patrol officers.

As will be seen men bemoan the implications of pacification as regards traditional definitions of masculinity. Nevertheless two decades after their first contact with government patrols Ommura seemed unanimous that the banning of warfare by the administration brought about an overall improvement in the quality of their lives. They claimed that food crops were generally larger, tastier and more plentiful now that gardens were not so regularly neglected and destroyed due to fighting. The chances of surviving to old age were felt to have improved even allowing for the partial replacement of physical aggression by sorcery.

Reminiscences suggest that, following the establishment of the Obura patrol post, government personnel came to appear less fearsome and threatening to the image of Ommura men as strong and powerful. With increasing familiarity the newcomers began to lose the aura of exoticism which in Ommura culture is often associated with power. Moreover villagers were aware that the patrol officers and policemen avoided antagonising local people and turned a blind eye to many of their offences because they were afraid of sorcery and violent reprisal. The patrol officer considered non-compliance with government edicts to be significantly higher than in many parts of the Highlands (Keris. P. 1976; personal communication), and a patrol report for 1974 notes the persistent failure of attempts to maintain 'law and order' in the area. It suggests that 'One can only conclude: that it is the volatile nature of the people themselves that does not allow...warfare to cease' (Friend, A.P.,

Obura patrol report 1973/4). In Yonura I heard many anecdotes about patrol post staff displaying 'weakness' (hia kyapukya) and fleeing in alarm upon encountering local people on the road, or locking themselves up in their houses during outbreaks of inter-group fighting. Yet other references to government representatives seem to reveal an underlying sense of fear and powerlessness in relation to them. Thus a rumour circulated that the chief patrol officer had hidden in his house a snake (kiunda) so large that it occupied an entire room and could easily suffocate many men at once. Munrabe, a Yonura man, told me: 'The government (gavmani) has guns and radios, but only umara and ievati (Ommura male initiation ceremonies) can make men strong (kyapukya)', a statement which I interpret as containing an element of bravado.

MISSIONARIES

In 1964 the Swiss Evangelical Brotherhood leased some land from Koronumbura and set up the first mission in the Ommura area with a primary school and medical aid post on its premises. It was staffed in 1975 by two Swiss missionaries and a Swiss nurse, all of whom taught in the school, and an evangelist and two aid post orderlies from coastal Papua New Guinea. The school and aid post officially came under the aegis of the government in the 1970s. However both remained on the mission premises and continued to be staffed mainly by mission personnel.

In the Ommura area the direct influence of mission teachings has not been marked in comparison with other parts of the Highlands (cf. for example Josephides 1985:74). While Ommura may originally have hoped to derive some benefit from association with the Swiss Evangelical Mission most people seem to have decided quite quickly that adoption of its teachings had little to offer them. This attitude was probably fostered by the fact that these missionaries did not show the same degree of

outward affluence as the patrol post staff or indeed many other missionaries in Papua New Guinea. Moreover they placed little emphasis on sending evangelists into the villages, claiming that people who genuinely wished to adopt their religion would seek them out (Somerdin, P. 1975: personal communication).

The fifteen or so Ommura adults who have been baptised by the Brotherhood are all from Koronumbura and Asara. While a few children from Yonura sporadically attend the mission school the Brotherhood has little contact with and no converts among the adults of the village. This partly reflects the fact that the mission is situated between Koronumbura and Asara so that a Yonura person travelling there risks encountering enemies. Mission influence has not, as elsewhere in the Highlands, led Ommura to abandon important indigenous rituals and customs (cf. Lindenbaum 1979; Berndt 1972:101; Josephides 1985:74). The majority of those baptised by them have shown no indication of complying with the Brotherhood's ruling that members should abandon Ommura initiation, healing and crop fertility ceremonies (Somerdin, P. 1975: personal communication). Religious affiliation is not acquiring political significance as, for example, among the Kewa of the Southern Highlands where religious affiliation is sometimes used as a symbol of group unity, and differences in mission adherence reflect political cleavages (Josephides 1985:52,79).

The mission aid post is the only source of biomedical treatment in the Ommura area. It provides basic primary health care and, where possible, transport to the Kainantu hospital for the seriously ill. People from Koronumbura and occasionally Asara attend it for minor ailments and disorders they regard as serious (Klink, T. 1975: personal communication). Yonura residents, like some other New Guineans, tend to seek aid post treatment only for what they regard as minor ailments (Welsch 1978:243;

Boyd 1975:48). During fieldwork a number of Yonura people went to the aid post to have cuts and skin ailments bandaged or disinfected, to obtain cough mixture or for children's disorders. However no one considered to be suffering from a serious illness (nriqa viro) was willing to seek treatment there. Yonura people say that aid post treatments may well be able to ameliorate some severe disorders but not to completely cure them because the missionaries are not very 'strong' (kyapukya). More than this, Yonura villagers, like some other New Guineans, regard aid post visits as exposing them to the risk of sorcery for serious illness (nriqa viro) is said to lower one's resistance to harm from sorcerers (Poole 1981:72).

A year after the arrival of the Swiss Evangelical Brotherhood a Lutheran evangelist from Henganofi-in the Eastern Highlands visited his brother the patrol station driver. He baptised a number of Yonura residents, married a local woman and then settled in the village. While Yonura people soon lost interest in his church he continued to hold services for patrol post staff who avoid the Swiss Evangelical Brotherhood church because of its ban on alcohol, tobacco and betel nut.

INTER - VILLAGE TIES

In Ommura, as already indicated, one does not find well marked groupings above the village level such as the 'tribes' or 'phratries' described for some parts of the Highlands whose members represent themselves as sharing a common ancestry and/or recognise a commitment to combine for purposes such as large scale ceremonial activities or defence of a common territory (e.g. Meggitt 1965:8f; Strathern A. 1971: 20-32; Newman 1965: 31-3; cf. also Strathern, A. 1973; Brown, P. 1978: 189; Langness 1973b:147). The village is the largest unit with a corporate interest in a particular territory and within which there is a

commitment to peaceful settlement of disputes. As will be seen it is also the largest unit which regularly co-operated for military purposes. As noted earlier the establishment of the Llamari Local Government Council has not as yet effectively widened political loyalties or provided a broader basis for co-operation or alliance between villages than traditionally existed.

A number of scholars have pointed to broad contrasts between different Highlands societies in terms of the emphasis placed on inter-group alliances and the maintenance of group boundaries. Feil notes a tendency for Eastern Highlands groups to be 'less involved in exchange and widened contacts through women' than are western groups (1984: 64. See also Strathern, A. 1969). Mandeville stresses the existence among the Kamano of the Eastern Highlands of 'a social pattern singularly lacking mediation and orderly peaceful competition between political groups' (1979a:120). In Ommura a tendency to marry within the village and lack of emphasis on inter-group exchange contribute to a situation in which channels for establishing inter-group ties are less developed than among many Highlands peoples, particularly in the west. The dispersed quaokiera do not provide an alternative basis for effective inter-village links. Several Ommura myths may be interpreted as containing statements about the futility and danger of attempting to initiate peaceable inter-group exchanges. In one such myth members of the uri Oravanaior's village give some marsupial meat to the uri Marairosina and his co-villagers. The recipients not only refuse to provide a return presentation but they raid Oravanaior's village and steal the portion of the meat that the inhabitants had put aside for themselves.

In Ommura warfare and peace making ceremonies were traditionally the only occasions on which villages were perceived as interacting as groups. As elsewhere in the Tairora area and among some other Eastern Highlands

peoples (Grossman 1984:80; Watson 1983:52; Herdt 1981:46) one finds neither large scale ceremonial exchanges in which the organisers and initiators are individual big men (e.g. Strathern, A. 1971; Meggitt 1973) nor the types of exchanges or pig festivals practised for example by Chimbu in which groups such as 'clans' or 'tribes' participate as units (Brown, P. 1978:231; Boyd 1985). The decline in warfare has not led to an efflorescence of exchange institutions (cf. Strathern, A. 1971; Salisbury 1962). Cross-village marriages are not treated as a means of creating advantageous alliances between political units (Meggitt 1965. Brown, P. 1969), nor as a bar to fighting between the bride's and groom's villages.

In Yonura most ~~in~~married wives are from a range of Southern Tairora villages with which Yonura has not in living memory been engaged in constant hostilities. Outmarrying women have mostly gone to the same range of villages. Ideally marriage initiates a series of ritual presentations from the husband's kin (quanranre) to that of his wife. In addition the mother's brother should play a significant role in the initiation of both boys and girls. However, in the case of inter-village marriage political tensions may prevent these obligations from being discharged. As among Kamano the affinal ties created by such unions are felt to be frail and at the mercy of hostile relations between groups (Mandeville 1979a). This is one reason Ommura give for favouring marriages within the local group. While cross-village unions sometimes lead to the development of torti relationships between affines, the affinal relationship does not in itself involve any obligation to provide refuge or military assistance.

As noted earlier torti relationships also connect Ommura individuals and families with people in other villages, mainly in the Waffa speaking and Southern Tairora regions. These provide a source of trade items, refuge and hospitality for both parties, although migrants may also be

welcomed by people with whom they do not have established torti relationships. While inter-group hostilities no longer provide a regular impetus to seek refuge, circumstances such as tension at home still lead Ommura people to change their villages of residence on a short or long term basis. Such moves are usually to villages outside the Ommura area. In recent years, at least, most involve individual men or a man with his wife and children. I found no clear evidence of the kind of 'group immigration' described by Watson for Northern Tairora (1970; 1983. See also Westermarck 1981:90)⁽²⁵⁾.

Several writers have stressed the limitations of analysing political processes in New Guinea Highlands societies simply in terms of interaction between well defined social units such as villages or clans. It is necessary also to take account of the way in which networks of interpersonal relationships, often cross-cutting group boundaries, are mobilised for particular activities. Writing of Korofeigu in the Eastern Highlands Langness suggests that:

Because of the emphasis on individualism....to understand any given public affair...whether warfare, marriage or whatever, it is probably necessary to begin from the standpoint of one or more 'egos' and proceed from there outward. (1973a:313.
See also Brown, P. 1978:182; Strathern, A. 1971:220; Langness 1973b).

In Ommura cross-cutting systems of relationships are not so well developed as in many other Highlands groups. One does not find the kind of wide ranging leader-follower formations described for parts of the Highlands where large scale ceremonial exchanges are important and big men attempt to build up extensive partnerships outside their own local groups (cf., for example, de Lepervanche 1973:23; Meggitt 1965).

WARFARE

The establishment of the Obura patrol post was followed by a rapid decline in the frequency, scale and duration of inter-group fighting. However Ommura social life is still strongly coloured by a history of constant warfare and people continue to regard themselves as living under threat of military attack. Ommura representations and practices associated with illness must be understood in relation to their conceptions of the nature and significance of war and its importance in their lives. A striking feature of their views of the nature and causes of sickness is the extent to which they are shaped by a warfare paradigm. The kinds of circumstances to which Ommura attribute illness are metaphorically linked with circumstances perceived as typical sources of bodily harm from enemy attack.

I deal first with warfare in which Ommura were involved before the patrol post was set up and give some examples of fighting during this period. I then look at recent changes in the nature of hostile relations between villages. Although there are many continuities between the nature of inter-group fighting before and after the establishment of the patrol post I shall, for clarity's sake, use the past tense in describing the former period. My account of motives, strategies and patterns of warfare is based mainly on the reminiscences of four middle aged or elderly men, all native members of Yonura: Atirahasa, Munrabe, Nondatauro and Apaia. Additional insights came from the comments of the male audience that almost invariably gathered to hear these reminiscences: women claimed to be ignorant of many aspects of the conduct of the war. The material is thus most detailed with regard to inter-group fighting directly involving Yonura. Moreover, given the value placed on military prowess and maintaining the fighting strength of the village my informants may well have idealised to some extent the roles played by Yonura

people. Descriptions of the military exploits of Yonura fight leaders sometimes had a distinctly exaggerated tone. Clearly accounts of past military alignments may also be coloured by current political situations (Strathern, A. 1971:55).

The precise frequency of inter-village warfare in the pre-colonial era cannot be estimated. However older Yonura residents maintained that it was rare for a year to pass without their becoming involved in armed fighting with another village. Watson has arrived at a broadly comparable estimate for the Northern Tairora area where he worked. He suggests that there in the precontact period 'fighting may not have been "constant" as it is sometimes described if by that is meant a weekly affair'. However there 'can seldom have been whole seasons ... let alone years ... without interterritorial skirmishes, killings or larger scale hostilities' (1967:71).

Langness distinguishes two major kinds of motives for warfare in New Guinea societies: 'the desire or necessity for land' which is often a primary motive in Chimbu and the Western Highlands and, secondly, vengeance or retaliation which he holds to be a typical motive for warfare in the Eastern Highlands (1973b:162-4. See also Healey 1978). It appears that for Ommura, as among neighbouring peoples, the acquisition of land has not been an important reason for engaging in war (du Toit 1975:85; Robbins 1982:214; Westermarck 1981:95). Yonura men maintained that they knew of no occasion on which Yonura or any of the villages with whom they fought went to war in order to obtain more land, over land boundaries or rights to particular tracts of land or in order to weaken the enemy by encroaching on his territory (26). I was also told that no village in the area ever occupied land vacated by its enemies (27). Yonura people almost always represent their motives for participation in inter-village warfare as having been purely retaliatory or defensive. They place great

emphasis on the notion that a village which fails to exact vengeance for harm inflicted on it by another will be regarded as weak and an easy target for attack. The desire of individual men to enhance their prestige by establishing a reputation for military prowess was never mentioned as a motive for inter-village fighting (cf. Josephides 1985:28; Read 1982:69).

Yonura men make statements of the type: 'We only fight with people from other villages over harm to or theft of our men, women, vegetables and pigs'. In this kind of context 'theft of a woman' (nrahesi mbuara) refers primarily to a woman being raped or sexually assaulted by a man from another village. This phrase is also used with reference to failure to make adequate bridewealth prestations or to deliver affinal prestations that must be made by a husband's group to that of his wife. In fact, marriage between members of villages that fight extensively is comparatively rare. In the accounts I heard of inter-group fighting involving Yonura hostilities were generally represented as having been triggered by the desire to seek revenge for bodily harm considered to have been inflicted by the enemy through physical or sorcery attack, or for other offences involving women, pigs or garden crops. Ommura social ideology stresses that the continued survival of the village community depends on it constantly struggling to maintain an adequate supply of four basic resources: men, women (or wives), pigs and vegetable food. There are many myths and stories in which entire villages perish because they are short of men to protect them, vegetable foods to eat, wives to contribute to the production of pigs and vegetables, and pigs which are essential for ceremonial payments and life saving healing ceremonies. Such is the symbolic significance of the four resources that even slight harm to a pig or appropriation of a few vegetables by someone from outside the owner's village tends to be interpreted as an attack against the

community as a whole and hence as grounds for it to launch an attack against the offender's village⁽²⁸⁾.

As elsewhere in the Eastern Highlands inter-group fighting mainly takes the form of surprise attacks or ambushes sometimes followed by a general confrontation between the sides (Brown 1982:208; du Toit 1975:78; Robbins 1982:184f). Occasionally the attackers would assemble outside the enemy village and challenge its men to come out and fight. However there is no memory of the more formal kind of fighting engaged in by some Highlanders in which battles took place at a prearranged site and/or time (e.g. Brown 1978:208; Josephides 1985:29; Meggitt 1977).

Attacks were planned in the men's houses. Preparations involved making war magic, manufacturing and overhauling bows, arrows and shields and singing war songs and boasting of past military exploits in order to raise morale and 'make the men strong'. Before setting off to fight men blackened their faces and engaged in various procedures for enhancing their bodily strength, for example beating the skin with stinging nettles and rubbing it with chewn up pieces of the 'strong' (kyapukya) wood from which arrows are made (known in Ommura as huru kiatar). Usually warriors decorated their shields with plumes of feathers of a type known as numuna which were mounted at the end of a flexible stick so that they would vibrate with the wind and the bearer's movements. Sometimes intricate arrangements of leaves were stuck into the fibre binding at the top of the shield.

I heard many accounts of surprise attacks on individual men and women. The attackers would lie in wait for them on the trails to their gardens or creep up while they were gardening. Individuals who remained in the village while most people were away in their gardens were also common victims of such enemy assaults. On occasion raiding parties invaded enemy gardens and uprooted the crops or covered them with dried 'kuna

grass' (imperata cylindrica) which was then set alight. Other strategies involved setting an enemy men's house on fire or surrounding it just before dawn in the hope of shooting the occupants as they emerged in a sleepy state. For protection against such attacks men built emergency exits in the walls of their men's houses and surrounded them with stands of bamboo designed to prevent enemies from approaching without alerting the occupants with a rustling noise. Sometimes they slept in small huts outside the men's house in order to set up a cross fire if it was ambushed.

Following a surprise attack the aggressors would retreat or become involved, sometimes unwittingly, in a more general confrontation. In relatively large scale encounters each side would attempt to humiliate its opponents by mutilating or burning the corpses of fallen members, and also to save its own dead from this fate by dragging their bodies away. As with some other Eastern Highlanders Ommura rarely took hostages or captured women as wives (Robbins 1982:187-8). However enemy women were sometimes raped. I also learned of an instance in which a Koronumbura man adopted a baby girl whom he found abandoned after her parents fled from Asara.

Fight leaders (ieta vaisi or kyapukya vaisi) were often credited with special abilities regarding strategy and tactics as well as fighting. However, while they led their sides into battle neither they nor any other men appear to have occupied such clear cut leadership positions in the fight field as, say, the Enga fight leaders who assumed command at the start of a fight and were responsible for tactical decisions (Meggitt 1977:69. See also Josephides 1985:29). Yonura men consistently denied to me that any man or combination of men determined strategy (cf. Robbins 1982:186), maintaining that fight leaders were often regarded as sources of good advice during fighting but that their co-villagers did not

generally depend on their advice or guidance and tended to make their own decisions in the field.

In the discussion so far warfare has appeared as an affair between village groups. This has involved some oversimplification. In the first place women have traditionally been excluded from most activities of direct military significance. During major confrontations women of a village would stand on a nearby mountain side and cheer on the men of their group by singing songs praising their strength and bravery. When a party set out to fight women sometimes followed carrying extra bundles of arrows and food for the warriors. However the use of weapons was (and remains) a male prerogative and military plans have traditionally been kept secret from women ⁽²⁹⁾. Thus unmarried wives did not, as in some parts of the Highlands, have the opportunity to act as go-betweens who warned their natal groups of hostile intentions (e.g. Josephides 1985: 30-1; Strathern, M. 1972:139). I learned of no context in which women were or are formally recognised as capable of making a positive contribution to inter-group fighting, as for example in the marriage custom found in the Kainantu area where a bride presents the groom with an arrow thereby, according to Berndt, 'symbolising her willingness to aid him in fighting' (1962:123).

As a rule only initiated men under middle age actually engaged in combat. However older men performed tasks said to be equally demanding and important for protecting the community against its enemies. They advised on strategy and took much of the responsibility for performing war magic, manufacturing weapons and constructing palisades and emergency exits from the men's houses. They also guarded the village while the warriors were away fighting.

Langness has pointed to ways in which it can be misleading to analyse New Guinea Highlands warfare as though 'the units of social structure

identified on the ground or in genealogies are the warring units' (1973b:160. See also Strathern, A. 1971:64n). Such an approach can fail to take adequate account of the 'individual emphasis and flexibility' which Langness sees as characteristic of the social and political organisation of Highlands societies and reflected in warfare (1973b:161). His analysis of war among the Bena Bena of the Eastern Highlands illustrates these features:

...although the descriptions are given in terms of districts or clans I am personally satisfied that this means only 'selected men' of those places and does not imply an activity between districts or between clans acting as 'corporate' in the usual meaning of the term. Individual men could and did elect not to take part and, ... even to take the opposite side at times the polity most typically at war seems not to have been a district or a clan, or even an alliance of such units, but rather an essentially unpredictable alliance of numbers of men from different places who joined together on a purely temporary basis (1973a:307-8).

A similar flexibility was apparent in wars involving Ommura. However it is my impression that there was more emphasis on local group solidarity than in the Bena Bena case and less tendency for men to act independently of their village membership. Of course given the value placed by Ommura on village solidarity there may have been some tendency to present an idealised picture, at least with regard to Yonura, of the extent to which the village's men operated as a unit in war. Instances in which individuals acted against the interests of their villages might have been glossed over or forgotten.

It was often not possible to determine precisely which individuals had been involved in inter-group fighting at any given stage of the hostilities (cf. Robbins 1982:194). However it seems clear that surprise attacks and ambushes were commonly carried out by only a handful of men. Quite often plans for an attack were initiated by a few individuals with pressing grievances against members of another group. Their success in mobilising military support depended on factors such as personal prestige, the number of others wishing to wreak vengeance on the target group, the

state of inter-village relations and the current military strength of the village. Reminiscences indicate that members of a man's men's house group and even his close agnatic kinsmen (members of his quanranre) would not automatically assist in such instances. Fight leaders seem generally to have been able to muster more military support than other men. However I learned of a number of instances in which even renowned warriors were unable to persuade more than two or three men to join them in revenge attacks. It was apparently rare for anyone, fight leader or otherwise, to be able to persuade others of his group to refrain from launching an attack.

Alliances were typically described as though the majority of each village's warriors had been directly involved in the fighting (e.g. 'Yonura and Motokara fought against Asara and Habiina'). However questioning revealed that often those who actually engaged in combat were mainly from one village that had been involved in the initial stages of the fighting. Members of other groups joined them in relatively small numbers⁽³⁰⁾.

On the other hand men who refused to join their co-villagers in launching an attack might nevertheless help with the preparations. Moreover Yonura men maintained that participation in a raid or alliance by even one man from a given group was generally assumed to have the sanction of the men of his village and hence as implicating the village as a whole (cf. Berndt 1962:234, 267). It was liable to lead the other side to regard his group as a current enemy and any member as an appropriate target for avenging death inflicted by himself or others on the side against which he had fought. They also claimed that it was quite exceptional for co-villagers to fight on opposite sides (cf. Meggitt 1977:29). It was also clear that villages frequently responded as a unit to attacks on individual members. A surprise attack by a few men on a lone gardener was liable to escalate to the point where most warriors

from both victim's and attackers' villages were actually fighting.

As will be seen it was permissible, even obligatory, for warriors to refrain from killing members of the enemy side with whom they had certain kinds of relationship. However, despite intensive questioning, I learned of no instance in which a Yonura man or woman had actively assisted members of the opposite side, for example by divulging plans or issuing warnings. Given the high incidence of intravillage marriage and the tendency to avoid marriage between members of villages that fought with each other intensively, it was rare for a married woman to find herself in a position in which her village of residence was at war with that of her natal kin. Moreover, as already mentioned, women were rigidly excluded from information of military relevance. Yonura men also maintained that it was quite exceptional for a man to fight against his current village of residence and were able to recall only one occasion when this had occurred. In this instance the two defectors were both from Habiina. On the one remembered occasion on which a recent migrant had found his former and current co-villagers fighting on opposite sides he had remained neutral.

The village is the largest unit which has regularly combined to attack other groups or for defence. It is also the widest unit within which restrictions on fighting apply. For instance in conflict between co-villagers only blunt sticks should be used, never bows and arrows. In the remembered past Southern Tairora groups have not recognised alliance spheres or buffer zones wider than the village or local group (cf. Berndt 1964; Newman 1965; Salisbury 1962; Strathern, A. 1969). No Ommura village has regarded itself as having an obligation to assist either of the others or any non Ommura village in warfare or to remain neutral towards it.

As already indicated the groups with whom Ommura recall having fought

are within a sphere of Southern Tairora villages situated mainly to the east of the Llamari river and extending from Motokara and Kaurona southwards to Habiina. Waffa and Ommura provided each other with refuge from enemies but not normally with assistance in inter-group fighting. Conflict was intensive between adjacent villages, a pattern found elsewhere in the Southern Tairora region (Hays 1974). Fighting escalated when members of different villages united against a common enemy. It was rare for more than two groups to fight together although in one instance members of five villages combined.

TABLE 1:

INTER-VILLAGE WARFARE INVOLVING YONURA (approximately 1945-1965).

1)	Yonura	vs.	Asara
2)	Yonura	vs.	Anima
3)	Yonura/Kaurona	vs.	Asara
4)	Yonura/Motokara	vs.	Asara/Habiina
5)	Yonura	vs.	Motokara
6)	Yonura/Motokara	vs.	Anima/Asara/Koronumbura
7)	Yonura	vs.	Motokara/Koronumbura
8)	Yonura	vs.	Kaurona/Koronumbura
9)	Yonura/Koronumbura	vs.	Asara/Anima/Ahea/Tokena/Himarata
10)	Yonura/Anima	vs.	Tokena
11)	Yonura	vs.	Koronumbura/Asara
12)	Yonura	vs.	Asara
13)	Yonura/Motokara	vs.	Koronumbura/Asara
14)	Yonura	vs.	Koronumbura

Table 1 lists in approximate chronological order military alignments involving Yonura between about 1945 and 1965. It is impossible to be certain that I learned of every relevant incident and that the historical sequence has been precisely reconstructed at all points. There were

occasional inconsistencies between the accounts of different men. Nevertheless this material indicates clearly that alliances were shifting, at least when seen from a Yonura perspective (cf. Berndt 1962:233; 1964; Josephides 1985:37; Langness 1973a; 1973b; Watson 1983:211f). During the period covered Asara consistently fought against Yonura, but all the villages which combined with Yonura people (Kaurona, Motokara, Koronumbura and Anima) also fought against them.

These alliances were generally ad hoc affairs. In none of the cases for which I have details do the various parties appear to have made advance arrangements to combine for an attack. Village groups did not, as in some parts of the Highlands, bribe each other to provide military assistance (Berndt 1962:254f; Langness 1973a:308). An alliance was typically formed on the spur of the moment when the sound of two villages fighting attracted particular members of other groups who felt a need to avenge themselves against one side or the other. Another indication of the informality of these arrangements is the absence of rules such as have been described for some Highlands groups regarding the compensation of allies (e.g. Brown, P. 1978:209; Modjeska 1982:91; Strathern, A. 1971: 55). The groups which initiated the hostilities were not expected to compensate their allies for any deaths sustained in fighting nor held in any way responsible for casualties sustained by them.

Langness draws a distinction between 'restricted' and 'unrestricted' types of warfare in Papua New Guinea. Restricted warfare, which he suggests may be more typical of the Western than the Eastern Highlands, 'takes place within a public in which there are known rules accepted by all participants'. Unrestricted warfare 'is not limited to any special season or motive and does not take place within a system of rules' (1973b:162). As Berndt's analysis of Eastern Highlands warfare suggests, lack of emphasis on formal rules restricting the impact of warfare does not necessarily imply that steps are not regularly taken to limit the

extent of destruction. In the Kainantu area

generally speaking there is no 'international' law or (in Fortune's term) 'intermunicipal' law stipulating what should or should not be done. But...it is often suggested that there are ideally limits beyond which destruction should not go....The drawing of blood or the killing of one victim may be enough to stop the fight. This is not always so. There is a strong feeling that it should be like this but no sanction is brought to bear to encourage it. (Berndt 1962:240).

The inter-group fighting in which Ommura were involved was often halted after one or two fatalities on each side, reflecting a general feeling that fighting beyond this point would be excessively destructive. Yet there was little in the way of formal or explicit rules designed to moderate the impact of war. To this extent warfare in the area appears relatively 'unrestricted' in Langness' sense. As already indicated the people of Ommura and neighbouring villages do not distinguish any spheres outside the village within which fighting is subject to restrictions. The emphasis on surprise attacks has already been noted. Moreover restrictions on killing certain categories of person were open to interpretation. New Guinea Highlands warfare was rarely 'total'. In fighting between opposed groups there were usually some persons who would 'hold their hand' in regard to some other person (Berndt 1964:203). Ommura recognise an obligation not to kill members of one's own quaokiera. However I learned of several incidents in which men had decided for strategic reasons against sparing fellow quaokiera members. In any case it was considered impossible to regularly honour this obligation due to the difficulty of identifying particular individuals in the heat of battle, and because some people were uncertain of their quaokiera affiliation. While there was no formal prohibition against shooting or killing a torti, torti partners tended to spare each other on the rare occasions on which they found themselves on opposing sides in battle. On one occasion Atirahasa of Yonura spared a man from the enemy side whom he recognised as his torti. I also learned of a number of instances

in which men spared their mother's brothers (ninau), sister's sons (ninausi) or people whom they simply regarded as close friends (nivaishi)⁽³¹⁾. However, unlike many Highlanders Ommura recognise no prohibition against shooting at or killing matrilineal or affinal kin (cf. Berndt 1964; Meggitt 1965; Strathern, A. 1971:64n).

There was little emphasis on formal peace making or truces. Yonura men recall participating in only four performances of the obu peace ceremony during the two decades or so preceding the establishment of the patrol post. They maintained that it was generally considered to be not worth performing as it was as likely to exacerbate tensions between the participating groups as to end them. Certainly in the one case for which I have details fighting seems to have broken out again very shortly after obu. This ceremony involves the two sides exchanging pork cooked with obu leaves. The meat should ideally be divided among each side and eaten on its own home territory. Usually, however, this food was thrown away for fear that it might contain poison. Sometimes one or both sides demanded death compensation (vaisi ieta). However I learned of few instances in which this payment had actually been made. I was told that any attempt to compensate the enemy was generally regarded as a waste of resources because it would not prevent or even delay further attack.

Some examples of inter-village fighting.

Some of the points made in the previous section are illustrated in the following descriptions of specific episodes of fighting which occurred in the decade or so before the establishment of the patrol post. The first is based on an account by Nondatauro and the second on one by Atirahasa. In each case the motives of the various parties involved are described from the vantage point of the narrator, and the selection of events reflects his particular involvement in the fighting. From the perspective of any Ommura village the history of inter-group fighting

appears as an ongoing series of attacks and counter attacks rather than as, say, in the Tsembaga case, discrete episodes of fighting punctuated by clearly defined truces or states of peace (Rappaport 1968).

1) Just before dawn a Yonura man who was keeping guard in a small shelter beside his men's house heard a party of Asara men creeping up on the house with the intention of staging an ambush. He alerted the occupants who quickly armed themselves and leaned their shields against the walls to prevent enemy arrows from penetrating the house. The Asara men pressed their shields against the outer walls as protection against arrows shot from inside the house. Then two Yonura men jumped out of a secret exit in the rear wall and shot one of the enemy who fell to the ground but later escaped. The rest of the Asara party dispersed and fled.

At this point armed men from the other Yonura men's houses arrived on the scene. They were joined by a party from Motokara who announced that they wished to wreak vengeance on Asara because a man from that village had recently caused the death by sorcery of a Motokara man. The Yonura side set out to find the enemy and surrounded some Asara men who had just shot a Yonura pig and were dragging it away. In the fighting that ensued an Asara man killed one from Yonura leaving his body under a tree. The Asara party was joined by some men from Habiina. Towards dusk Asara men shot dead two Yonura men and the groups from Asara and Habiina retreated. The Yonura men hid the bodies of their fallen co-villagers to protect them from mutilation. They then pursued their opponents but lost sight of them in the darkness and returned to their own village.

In the morning the Asara party returned to Yonura, apparently without their allies from Habiina. Men were lying in wait for them hidden in clumps of bamboo around the men's houses and there followed an encounter in which no one was killed but a Yonura man accidentally shot a co-villager whom he had mistaken for a member of the enemy side. The Yonura

side divided into two groups. One chased their opponents back towards Asara and the other lay in wait for the enemy and shot at them as they approached. The Asara men shot back killing a Yonura man and later went to the mountain slope where his side had buried him and thrust a large pole into his grave, shouting that they had smashed his skull. Infuriated, the Yonura side killed an Asara man, mutilated his head with a pole and then an axe and dispersed, reassembling on the way to Yonura.

2) On returning from a visit to a Waffa torti Atirahasa learned that his father had just died from arrow wounds inflicted by Asara men who had crept up on the elderly man while he was alone in his garden. Enraged, Atirahasa set out for Asara and killed a woman from that village on the footpath to her garden. He then shot and killed an Asara man who was alerted by her screams. In retaliation a party of men from Asara set fire to some Yonura gardens and shot pigs belonging to Yonura people. A few days later a large party of men from Yonura approached Asara. Some hid in a cave on the slopes of the Oravanara mountain overlooking Asara. The others headed towards the village intending to drive the Asara men towards Oravanara from where those in the cave could shoot down on them. However some Asara men saw smoke coming from the mountain side and crept up on the Yonura group hiding there. They dragged one man out of the cave and a confrontation ensued in which the Asara side was joined by parties from Anima and Koronumbura, and one Yonura and two Asara men died. Atirahasa drew his bow to kill a wounded Asara man who begged to be spared and called out the name of the mountain Oravanaiaor, thereby indicating that he and Atirahasa shared the same quaokiera affiliation. Nonetheless Atirahasa killed him by hitting him in the face with the corner of his shield. The corpse was burned by some Motokara men who had joined the Yonura side only a few minutes earlier.

After this incident both sides returned to their villages. Then some days later Asara men shot a Samura man working alone in his garden.

His shouts alerted several of his co-villagers who pursued the attackers for a short distance without harming any of them. Asara people then killed a member of Atirahasa's men's house group and followed up this attack some days later by uprooting vegetables from a Yonura garden. Atirahasa and others from his men's house prepared for battle and during the night visited the other Yonura men's houses asking the occupants to join them against Asara. Eventually, however, many of them agreed to join the fighting party, persuaded by Atirahasa's warnings that Yonura would be considered weak and an easy target unless it wreaked vengeance on Asara at this point.

Just before dawn the Yonura party surrounded an Asara men's house, shot some arrows through the wall and then set the place on fire. The occupants emerged unharmed and a Yonura man shot and killed one of them. The Yonura side withdrew. As they entered their home village they looked back at the flames from the burning house and performed war dances and sang songs to celebrate its destruction.

Some months after this encounter Asara and Yonura held a peace making ceremony. It was conducted in such a way that the two groups did not come into direct contact. Each left its offering in a prearranged place to be picked up later by the other. Only days afterwards a Yonura woman died suddenly and her co-villagers attributed her death to tuhi sorcery substance secretly introduced by Asara people into vegetables growing in her garden. While Yonura were preparing for revenge against Asara a party from Koronumbura raided some Yonura gardens and shot a Yonura pig. The raid escalated into a large scale encounter in the course of which some Asara men joined forces with Koronumbura. However the Asara/Koronumbura side retreated before any casualties had occurred.

CHANGES IN THE NATURE OF HOSTILE RELATIONS BETWEEN VILLAGES

In the decade or so following the establishment of the patrol post there were at least four instances of armed inter-village fighting involving Yonura as well as several occasions on which the police intervened at the last moment to prevent such conflict from occurring. Between 1967 and 1971 at least three outbreaks of fighting occurred between Yonura and Asara, and in 1974 or 1975 Yonura fought with Koronumbura. In terms of strategies, tactics and the way in which parties are mobilised this fighting does not appear markedly different from the traditional pattern just described. The ostensible motives for conflict are also similar, although in two of these more recent instances the fighting was precipitated by injuries sustained not in fighting but during an inter-village football game organised by patrol post staff. However police intervention has prevented armed inter-village fighting from lasting for more than a day. Moreover in this period no Ommura village has been involved in armed conflict involving more than two adjacent villages. Seen from a Yonura perspective the sphere within which fighting occurs seems to have narrowed now to include only the three Ommura villages. Nevertheless Yonura people say that they still live in constant fear of attack from all the groups with whom they previously fought. The Northern Tairora groups with whom Ommura have more recently come into contact were never represented as a military threat.

Ommura men still sleep with their bows and arrows beside them and are rarely parted from them during the day. They say that in the men's houses they regularly discuss defence strategies and strive to maintain the sense of military solidarity against a common enemy that is considered essential for military strength. Rumours of an impending attack are frequent and evoke responses that are quite striking to an outsider in their intensity. Men hasten to tie their bow strings, perform military

dances and utter war cries to frighten away the enemy, while women cheer them on by praising their strength and military prowess and tie up pigs to keep them out of harm's way. Unlike many Highlanders (cf. Herdt and Poole 1982; Read 1982) Ommura have shown no sign of abandoning male initiation ceremonies in which the novices receive intensive instruction in fighting techniques and other military skills such as the manufacture of weapons (Johnson 1980). Reminiscing about past military exploits remains a popular and frequent pastime. As in some other parts of New Guinea positive attitudes towards peace have not markedly diminished the emphasis placed on qualities such as military prowess and the strength to protect the community against life-threatening forces (cf. Koch 1979; Herdt 1981:50). As will be seen such values powerfully shape dominant views of the distinctions between men and women as well as the management of illness.

Previously sorcery was regarded primarily as a weapon used by enemy villages against one another at times when they did not feel sufficiently strong to engage in physical attack⁽³²⁾. Ommura, like some other Papua New Guineans, maintain that the banning of warfare by the administration led to its use as a replacement for inter-group fighting (Zelenietz 1981; Westermarck 1981). As a Yonura woman put it: 'Before, if the men were angry with the enemy, they would pick up their bows and fight. Now the government is here so they make irama [a form of sorcery] instead'. In 1973 the road linking the Obura patrol post with Kainantu was improved sufficiently for public motor vehicles to enter the area. People from other Southern Tairora villages, including those from whom Yonura most feared sorcery, increasingly began to walk along the road that cuts through Yonura in order to board public motor vehicles waiting at the patrol post. Yonura villagers say that these developments greatly exacerbated their sorcery fears. There was now more risk than ever before of scraps of their food leavings and bodily emissions being

obtained by members of hostile groups wishing to ensorcel them. In contrast to some other Eastern Highlanders Ommura seem not to have represented events directly associated with national independence as having affected the incidence of sorcery (cf. Westermarck 1981:93).

As in the pre-colonial era sorcery is seen as typically an affair between hostile political groups and Yonura people claimed to have no memory of any instances of sorcery accusation within the village. Sorcery, like armed fighting, is defined as an activity that only adult men are capable of performing and every man is said to be familiar with at least some sorcery techniques. The sorcerer's activities are generally treated as an offence by his village against that of the victim, and any of his co-villagers is liable to be treated as a suitable target for counter-attack. Accordingly there is little emphasis on identifying particular individuals as sorcerers (cf. Lindenbaum 1979:87-8).

Sorcery accusations are not necessarily made public. However, Yonura people say that, as in the past, most acts of sorcery against members of their village are perpetrated by the groups with which they have traditionally fought, or in a few cases other Southern Tairora villages or Baruya. It is said that the sorcery acts launched by Yonura against enemy villages are responses to the same kinds of grievance that traditionally motivated them to engage in military attack: grievances concerning harm to or 'theft' of the four 'basic resources' (men, women, pigs and vegetables). The peoples with whom Ommura have more recently come into contact (e.g. Northern Tairora and coastal Papua New Guineans) are sometimes represented as potential sources of sorcery attack. However I learned of no instance in which a Yonura resident was considered by his or her co-villagers to have been ensorcelled by a member of such a group.

New Guinea Highlanders commonly claim that sorcery attacks previously directed at 'outsiders' now occur among former allies or within groupings

such as the village or phratry (e.g. Lindenbaum 1981:119; Westermarck 1981; Lederman 1981). In the Ommura area there is as yet no indication of such a shift from 'exo-sorcery' to 'endo-sorcery' (Lindenbaum 1981: 119). Lindenbaum relates the new emphasis on 'endo-sorcery' in the Highlands to developments such as cash cropping, cattle raising and associated new evaluations concerning ownership of land. She suggests that these factors have, together with the cessation of warfare, 'strengthened relations between the village and the government or the village and the market at the expense of local ties' (1981:119). Lederman similarly relates the increase in 'endo-sorcery' among Mendi to social tensions resulting from unequal access to new opportunities for earning cash (1981. See also Westermarck 1981). It remains to be seen whether Ommura sorcery beliefs will also develop in this direction, perhaps as a result of the recent increase in opportunities to obtain cash.

Ommura, like some other Highlanders, also claim that there has been a proliferation of sorcery techniques in their area and that some of the new ones have been imported from urban and coastal areas of Papua New Guinea (Lederman 1981:20; Lindenbaum 1979; Zelenietz 1981). There was considerable variation regarding the specific sorcery techniques that individual men were willing or able to describe to me though all the techniques of which I learned were classifiable either as tuhi or irama, both of which are traditional categories.

Irama techniques vary widely but generally share the three features that Glick sees as characterising those forms of sorcery practised in Papua New Guinea that he classes as 'projective sorcery' (1973:183). The irama sorcerer tends to work on his own although he is normally seen as operating on behalf of his village. Generally the victim of irama hopes to recover since ailments attributed to this form of sorcery are not considered to be beyond the range of ordinary curative powers.

Thirdly, irama techniques work at a distance. The sorcerer performs magical operations on and then buries scraps of the victim's bodily emissions, food leavings, cigarette ends or chewed betel nut. As the substances rot in the earth so the victim falls ill. Alternatively the irama sorcerer may wrap the substances he has collected in edible green leaves (hondi) and smoke them over a fire until they blacken and the victim weakens. Hence Ommura people are extremely careful over the disposal of food leavings and bodily wastes which are usually burned or thrown down deep pit latrines. Irama may also harm crops and pigs.

Tuhi is said to be much rarer than irama and to cause irreversible harm often leading to sudden death. In this type of sorcery technique substances are introduced into the victim's body through food or water and 'shot' into him from a distance. Tuhi never involves the more direct physical assault characteristic of the techniques referred to by Glick as 'assault sorcery', and sometimes described in Melanesian Pidgin as sanguuma (Glick 1973:183). Ommura have heard of sanguuma but represent it as something practised only in coastal areas of Papua New Guinea⁽³³⁾.

LEADERSHIP

Discussion of leadership in the New Guinea Highlands has tended to evoke images of the kind of entrepreneurial 'big man' described by Sahlins, a man who 'uses wealth to place others in his debt' (Sahlins 1972:136; 1963). In recent years, however, it has become increasingly evident that this kind of figure is less characteristic of Highlands societies than has often been assumed, and that the bases and forms of leadership in this area are more varied and complex than Sahlins' analysis indicates (Godelier 1982; 1986; Lindstrom 1984; Modjeska 1982; cf. Keesing 1976:354; Herdt 1981:44-8). Certainly in pre-colonial Ommura, as among other Highlands groups without elaborate ceremonial exchange systems, prestige and

influence were derived less from manipulation of wealth than from pre-eminence in military and ritual activities (Godelier 1982; 1986; Herdt 1981:44-8; Watson 1973:264; Grossman 1984:76).

In Ommura and other parts of the Tairora speaking area those with the greatest influence and prestige were fight leaders (kyapukya vaisi) or ieta vaisi), men noted for their strength, courage and military prowess as well as their ability to perform war magic (Watson 1973; Grossman 1984:76). Ommura fight leaders are said not to have been significantly wealthier than others, in terms of pigs or other valuables, and to have avoided polygyny because of the allegedly weakening effects of contact with women.

Men also acquired prestige through demonstrating skill at certain public ritual and magical activities considered to require great 'strength' (kyapukya), in particular performing anti-sorcery and war magic and conducting male initiation, fertility and healing rites. These tasks are defined as 'men's work' and, as will be seen, described as being performed collectively by the village's initiated men rather than by individuals.

It has traditionally been stressed that while some men show greater skill (kahara) than others at performing particular public ceremonies or magical techniques, the knowledge necessary for these activities is shared by all fully initiated men, that is by all males over the age of about eighteen. Nor has the right to practice any type of socially important ritual been restricted to men of particular families or kin groups (cf. Barth 1975; Godelier 1982; 1986). Ritual expertise has not been a significant source of wealth. Previously, as during fieldwork, experts generally received only cooked food for their services.

It seems clear that in pre-colonial Ommura, as in other Highlands societies without elaborate wealth exchange systems, status differences among men were not pronounced by Highlands standards (Josephides 1985:113; Keesing 1982:21). As noted earlier, fight leaders appear to have commanded

relatively little authority. Apart from a few exceptional warriors such as Atirahasa of Yonura who were able to enlist military support from torti partners, men did not exercise influence or have followings beyond their own villages.

In discussing pre-eminence Ommura still focus primarily on fighting ability and other military skills, qualities which today are more likely to be demonstrated in ceremonial war dancing than on the battle field (cf. Watson 1973:244). 'Rubbish man' (vehi vaisi) is used mainly as a term of abuse for someone who has shown himself to be cowardly (cf. Herdt 1981:52). People also draw attention to skill at public ritual activities. In Yonura the positions of village councillor and committee man have not been a significant source of status. However a number of men have acquired some prestige and influence through their ability to speak fluent Melanesian Pidgin and communicate effectively with government officials. As we have seen there are indications that increasing access to education and incorporation into the world economy are setting the scene for new forms of economic differentiation among co-villagers. Children in the Llamari council area are receiving secondary education and some men have accumulated sufficient cash from selling coffee to open small stores. By the end of fieldwork, however, no Yonura villager had run a store profitably or embarked on any other commercial enterprise. Most cash was still being channelled into life-cycle payments (Johnson 1980). There is as yet no sign of the 'big peasant' or 'rich peasant' described for various parts of the Highlands - a situation which may reflect the absence in pre-colonial Ommura of 'entrepreneurial big men' as well as the fact that cash earning opportunities were relatively limited until quite recently (cf. Grossman 1984; Finney 1973).

Ommura say that they no longer have any men who are as 'great' (nronra) or influential as the fight leaders of the past. When asked for

the names of the leaders or 'big' or 'important' men of their village. almost invariably Yonura people answered that there were none nowadays. The separateness of the various activities through which prestige is derived is stressed (cf. Modjeska 1982:87). People note, for example, that some men are good at conducting the levati initiation ceremony but not at sweet potato fertility rites, while others speak fluent Melanesian Pidgin but show no particular skill at anti-sorcery magic. Certainly there is no one who can easily be identified as a generalised 'big man', leader or spokesman for the whole village or any faction or grouping within it. Rather the situation appears as one in which there are many individual men who derive a measure of prestige and situational authority from pre-eminence in one or two specific areas.

CHAPTER 2THE VILLAGE AND ITS CONSTITUENT SUB-UNITSTHE VILLAGE

The population of Yonura village in July/August 1975 was 43 (213 females and 218 males) (author's census⁽¹⁾). The number of actual residents was reduced by the absence of thirteen people. These included five bachelors and one childless married man away on contract labour, one bachelor serving a long gaol sentence, three children away at school and three youths working as gardeners and cooks for patrol post staff. The government census of early 1975 recorded the population of Asara village as 384 (199 males and 185 females) and that of Koronumbura as 321 (163 males and 185 females).

An Ommura village is composed of several named hamlets which are clustered together rather than dispersed. This compact form of layout is not a postcontact phenomenon as it is in some parts of the Northern Tairora area where the administration created nucleated villages by bringing together dispersed hamlets (Grossman 1984:151. See also Brown, P. 1978: 141; Watson 1973:229).⁽²⁾ In the mid 1960s some Ommura villagers responded to the patrol officer's requests for their residences to be brought closer to the village centre for reasons of administrative convenience. However I was told that the need for common defence had 'always' prevented Ommura villages from becoming significantly more dispersed than they are at present and that the hamlets of a village were never more than a couple of minutes walk apart.

Yonura village contains three hamlets, Samura, Sonura and Mussouri, each of which has its own men's house (vainya). In each hamlet the men's house occupies a central position and is surrounded by thick stands of bamboo which would alert the occupants with the sound of rustling leaves

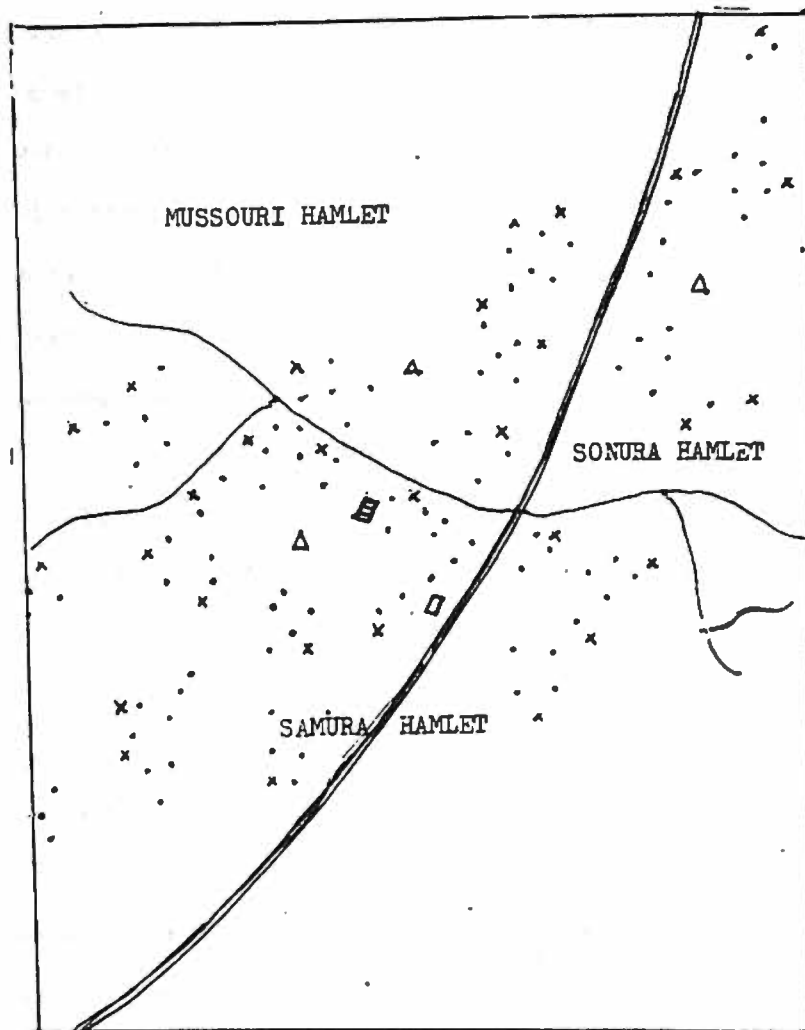
if enemies or eavesdroppers approached. The men's house is distinguished from others in the hamlet by its relatively large size and the fact that its central pole (buha) rises far above the roof and is visible from most parts of the village. Just in front are patches where men grow plants that they use for ritual and medicinal purposes.

Smaller residential houses are scattered around the hamlet sometimes in clusters. Individual residential houses, even those within a cluster, are usually separated from each other by fences high enough to allow the occupants some degree of privacy. Women's menstrual houses (kapa) are located among the residential houses and of similar design to them⁽³⁾. Most are shared by the women of between one and three residences. Nowadays Ommura houses are constructed of wooden frames with walls of plaited bamboo and thatched roofs made from 'kunai' grass (imperata cylindrica). The majority (including men's houses) have the traditional round floor plan with low walls and conical roofs with overhanging eaves that protect the walls from the rain. Others are rectangular, a more recent design. Pig shelters are now built outside the residential part of the village. Many residences have small front gardens where tobacco and perhaps some vegetables are grown. However the majority of gardens border on the residential part of the village.

Most men spend a significant amount of their time in the men's house discussing public affairs, gossiping and singing war wongs. Initiated bachelors and some widowed and divorced men also sleep there. In 1975 there were 101 residential houses in Yonura not counting the men's houses (or the house occupied by myself). As Table 2 shows the majority of these were occupied by a man together with his wife or wives plus in most cases children. The remainder were (with one exception) occupied by divorcees, widowers and widows living alone or with children.

In Ommura the co-residence of husband and wife is not a postcontact phenomenon as it is in many parts of the Highlands, including Northern

MAP 6:

SKETCH MAP OF YONURA VILLAGE.

/// Road

• Residential house

□ Ethnographer's house

△ Men's house

× Menstrual house

▢ Lutheran church

Tairora, where traditionally men and women normally slept under separate roofs (e.g. Watson 1983:94-6; Langness 1967; Brown, P. 1978:47). In pre-colonial times married Ommura men normally slept in houses shared with their wives and unmarried children⁽⁴⁾. They spent nights in the men's houses with the bachelors and other single men when their presence was considered necessary for defence or ceremonial reasons. Following the decline in warfare the majority of Ommura husbands began to sleep more frequently with their families and less, or even not at all, in the men's houses. Ommura family houses are today, as in the pre-colonial era, divided into a rear zone which only men may enter (turuara) and a women's and children's living space just behind the entrance.

The wife of a monogamously married man is largely responsible for tending, harvesting, preparing and cooking the vegetables that provide herself, her husband and their dependent children with most of their daily food. Her husband generally plays an important role in preparing the garden land on which she works and keeps the fences in repair. A polygynist's wives garden individually on separate tracts of garden and each cooks separately for herself, her children and her husband. Ommura place much emphasis on the notion that a man's wife is the only woman from whom he has the right to expect regular food and that a married woman cannot rely on anyone other than her husband to prepare gardens for her; as will be seen, certain aspects of garden preparation are defined as exclusively male activities. Children residing with their parents usually help them sporadically with gardening, harvesting and food preparation. However neither men nor women normally perform everyday productive tasks in pairs or groups. To this extent husband, wife and any co-resident children may be seen as constituting a relatively distinct unit as regards the production and provisioning of everyday food. The occupants of a house containing an able bodied married couple could in this sense be described as comprising a household (bearing in mind Yanagisako's contention that 'household'

TABLE 2:OCCUPANTS OF RESIDENTIAL HOUSES IN YONURA 1975(excluding men's houses)

	<u>Number of residences</u>
Married couple plus their child(ren) (a)	67
Married couple, no resident children (b)	15
Polygynist plus wives and children (c)	4
Divorced or separated woman plus child(ren)	3
Divorced man	1
Widow	6
Widower (d)	2
Other	3
Total number of residential houses	101

(a) I have included here children of one spouse from a previous union as well as adopted children (not always a clear cut category). Children residing with their parents were unmarried except in one case in which a newly married woman returned to live with her parents when her husband left the village for contract labour.

(b) I have included in this category married couples living with children whom I judged to be visitors rather than adopted. It was not always possible to distinguish between residents and visitors.

(c) All four polygynists lived in separate houses from one or more of their wives. However in each case the husband's house and that of each of his spouses were within the same fence and have therefore been included here as one residence.

(d) Some widowers lived in the men's houses.

should be seen as an 'odd job word' which can be useful in descriptive statements but is not necessarily productive as a tool for analysis and comparison) (1979:199-200). A polygynist's residence could be seen as incorporating two or more overlapping households depending on the number of his wives.

The boundaries of such households cannot, however, be rigidly delineated. Informal food sharing between friends and neighbours is common. Moreover food cooked by a wife may be shared by a bachelor son living in the men's house as well as by an elderly relative who is partially, or, less commonly, wholly dependent on her for food. A husband may clear garden land, normally less than for his wife, for a widowed or divorced sister or a mother whose husband is very elderly. The woman usually reciprocates with cooked food, usually on an irregular basis.

Elderly couples and widowers, widows and divorcees vary in the extent to which they constitute relatively distinct food producing and provisioning units. Ommura tend to represent able-bodied widowed and divorced men as being more independent in this respect than able-bodied widows on the grounds that a woman must rely on a man to prepare gardens for her while a man can, if necessary, cook for himself.

As already indicated the village is the largest grouping that can be regarded as having any effective political unity. It is the widest unit within which there is a commitment to peaceful settlement of disputes and whose members regularly co-operate for military and ritual purposes. Major healing and crop and pig fertility ceremonies as well as certain male initiation rites commonly involve the whole village.

Each Ommura village is associated with a particular territory in which its members hold a corporate interest and within which each small area and distinctive environmental feature (stream, knoll, large rock and so on) bears a name reflecting village traditions, history and mythology.

Rights to gardening land within this territory are individually held. All villagers have the right, generally denied to members of other villages, to gather or hunt for environmental resources in bush and fallow throughout the territory (e.g. firewood, imperata cylindrica for roof thatching, edible wild plants, animals and insects, and plants used for therapeutic, ritual and ornamental purposes). Alienation of village land to members of other groups does not normally occur. Visitors may be allocated temporary garden rights and if they become permanent residents are granted full rights to gardening land. Among Ommura, as among other Tairora speakers, the village is not an exogamous unit and a significant proportion of women and men marry within their own village. This issue is discussed in the following chapter.

In Yonura and probably in the other Ommura villages the initiated males of each hamlet constitute a men's house group. Each village also contains a number of groupings known as quanranre whose members are represented as being linked through agnatic kinship. Each of these types of grouping will be discussed later in this chapter.

I remarked earlier on the extent to which Ommura villagers still feel themselves to be threatened by military attack and on how strongly their lives remain coloured by values and attitudes associated with warfare. During fieldwork I was constantly struck by Yonura people's emphasis on the role of the village as a military unit and on the notion that their survival depended on maintaining a strong and undivided fighting force and hence on minimising tensions and divisions among the village men. During an ievati (male initiation ceremony) the novices were warned:

If a man from another village (mbomatana) goes into your garden or shoots your pig you can be very angry (inronra hita) and kill him. But if a man from your own village does these things you must say 'We are people of the same ground (quamatana) so I cannot be angry with him or people from other villages will say "These people are always quarrelling with each other so we can easily burn down their men's houses and destroy their gardens"'.

Similar attitudes are voiced when disputes or quarrels between co-villagers become heated. Men hasten to warn each other against becoming drawn in lest the quarrel should escalate or break out into fighting. Fighting within the village is regarded with abhorrence and if it does occur should not involve use of any weapons other than blunt sticks, last for more than a day or be aimed at maiming or killing. While Yonura men often denied any memory of bow and arrow fighting amongst themselves reminiscences suggest that this has sometimes occurred.

A number of recent studies conducted in the New Guinea Highlands refer to claims that intragroup tensions have increased. Agarabi, for instance, maintain that sorcery accusations previously aimed at their external enemies are now directed within the group. They explicitly link this to a reduction in the need for group solidarity following the banning of warfare (Westermarck 1981). Mendi relate a perceived rise in sorcery accusations among former allies and 'brothers' to tensions arising out of new inequalities in opportunities to earn cash (Lederman 1981). Yonura people did not suggest, in my experience, that the intra-village conflicts that they perceived as threatening their security were the outcome of new sources of tension or had recently increased. Theft and the shooting of pigs for breaking into gardens were consistently named as the most typical sources of quarrelling and disputes within the village. Yonura people also stress the threats posed to village solidarity by tension among affinally related co-villagers.

As I mentioned earlier there is as yet no indication of the kind of shift that appears to have occurred elsewhere in the Highlands from 'exo-sorcery' to 'endo-sorcery'. It is generally accepted in Yonura that a man who ensorcelled a co-villager would automatically suffer the same fate as his victim and that knowledge of this constitutes a powerful deterrent against intravillage sorcery.

Idioms of village unity

New Guinea Highlanders commonly employ agnatic idioms to conceptualise the unity, internal composition and boundaries of their local groups. They describe these groupings as being composed of 'brothers', 'fathers and brothers' or the descendants of a common ancestor (e.g. Brown, P. 1973:211-2; de Lepervanche 1967:144; Meggitt 1965; Strathern, A. 1972). Such use of agnatic dogmas need not reflect the actual composition of local groups or the rules which people themselves say shape the processes of recruitment to these groups (Strathern, A. 1972). It is generally possible to become a member of a Highlands group on a variety of grounds other than agnatic links, and those who do so may suffer no significant status disadvantages (e.g. Barnes 1962; de Lepervanche 1967-8; Scheffler 1973; Strathern, A. 1972). Moreover Highlanders who describe the unity and solidarity of their local groups in terms of descent may also represent these relations in other ways (e.g. Feil 1984; de Lepervanche 1973; Strathern, A. 1969; 1972). Melpa speakers, for example, speak of their clans in certain contexts as '(founded by) a single father' or 'old father and sons' (Strathern, A. 1971:33). They may also think of these groupings as 'garden divisions'. Here 'the emphasis ... is on the territorial nature of land-holding and on a symbolisation of residence which states that joining a group implies making "roots" with it, as a plant roots itself in a garden.' (Strathern, A. 1972:222).

In Ommura, as elsewhere in the Highlands, the majority of men live in the same local groups (villages) to which their fathers belonged⁽⁵⁾. This is so despite the fact that circumstances such as internal quarrels and the need to seek refuge from enemies have led to a constant turnover in the population of each village, probably more before pacification than in recent years. Yet, as I noted earlier, Ommura, like other Tairora speakers and some other Eastern Highlanders, do not use agnatic idioms to describe their local groups. They reserve such idioms for the

small kin groupings (quanranre) found within each village, making no attempt to represent these groupings as segments of a wider agnatically conceived whole.

In describing the unity, internal composition and boundaries of their local groups Ommura people draw extensively on idioms of shared language, knowledge and 'ground'. They say that each village has its own body of myths (uri) known to all male and female members, which explain the origins and special characteristics of certain distinctive features of its territory (caves, streams, rocks, pools etc.)⁽⁶⁾. Moreover the 'talk' (ua) of each Ommura village is said to be distinguished from that of the other two by certain features of pronunciation and vocabulary. The 'sharing of ground' (i.e. village territory) is an important symbol of group solidarity. The term for village is matuchia, a cognate of mata = ground, and the established residents of a village (including women, whether unmarried or natal members) are described as quamatanahua '(people of) one ground' or as quanramunahua '(people of) one house' (namu = residential house)⁽⁷⁾. When co-villagers emphasise that they are 'of one ground' they are describing themselves as being linked both through co-residence and co-operation and through the fact that they produce and eat food 'from the same ground'.

In his detailed analysis of Northern Tairora idioms of local group solidarity Watson shows how

no gifts in Northern Tairora culture are more distinctive of a land or people than their food and water. The sense of a topical identity is much clearer with respect to food or water, for example, than with respect to the semen, blood or milk of group members. Indeed the distinctiveness is an active property conferring on those who consume these substances an identity with the land and people wherein they originate (1983:265).

Ommura too assert that each village's food has certain unique properties which distinguish it from the food and water of any other groups. I was given detailed descriptions of differences between the flavour,

aesthetic properties and 'repletive value' (Meigs 1984:23) of vegetable foods of the same species but grown on the territory of different villages. Many Yonura songs extol the distinctive virtues of locally grown food. One much in vogue during my stay may be roughly translated as follows:

Vatekya fruit growing in Sonyavira [part of Yonura territory]
 ripe and soft falls to the ground
 Eat, eat, eat, eat red flowers [of vatekya tree]
 Eat, eat, eat, ripe and soft falls to the ground
Vatekya fruit of Sonyavira, Sonyvira.

There is much emphasis on the view that co-villagers are connected through having, over a period of time, produced food and derived their nourishment 'from the same ground' and thus sharing in food unique to their territory. That 'sharing food' or 'eating the same food' may create, reinforce or emphasise bonds between people in a pervasive theme in Ommura culture. Perhaps there is here an underlying notion that villagers share a common substance although no one in my experience implied or explicitly stated that consumption of local food linked co-villagers specifically through the food being transformed into bodily substance (cf. Strathern, A. 1973).

Linked to the view of co-villagers as people who produce food from the same source is the image of the local group as a community of men and women who co-operate in the nurturing and rearing of the next generation - a notion reminiscent in some ways of the Northern Tairora dogma of the 'community as parent' (Watson 1983:273) or the Kamano view that the mature men and women of a village have acquired 'a kind of collective parenthood' through nurturing village children (Mandeville 1979b:230). Children are taught that they should 'help' and behave respectfully all their adult co-villagers 'because all these men and women have worked

hard to make you grow up strong' through producing food, performing initiation rites and breast feeding. Ommura place great emphasis on the importance of men's 'work' during initiation rites for ensuring that boys and girls reach maturity. Like Northern Tairora they also explicitly recognise breast feeding as 'work' (kyayha) and as something which women do for the benefit of village children in general (Watson 1983:265). As in some other parts of New Guinea, children may be regularly suckled by other women in addition to their own mothers (Chowning 1973; Watson 1983:264).

In describing their villages Ommura men and women also draw on idioms which represent the unity of these groups as deriving primarily from co-operation among men. A pervasive image underlying statements about the unity and solidarity of local groups is that of the men of the village as a solidary group that co-operates to perform the tasks on which the survival of the community is seen ultimately to depend, and which are defined as exclusively 'men's work': protecting the village from military threats as well as through healing and crop and pig fertility rites that safeguard it from the external human and non-human forces that threaten the community's health and food supply. It will be recalled that inter-group fighting is often represented as involving all or most of a village's men in some capacity even though only a few may actually fight. Large scale public healing and fertility rites are similarly described as activities that are performed collectively by the initiated men of the community rather than by individuals. By contrast there are no contexts in which the majority of village women co-operate as a group distinct from men.

Initiated male co-villagers are described as people who sing 'well' (avu avu) together. Such statements refer to the singing of war songs and male initiation songs known only to men. The ability of village men

to sing these harmoniously in unison is represented as an indication that they are committed to co-operating as a military unit as well as in other ways. Women, by contrast, are said by people of both sexes to be incapable of singing together in a harmonious way (although they are expected to sing in groups during battle and on other public occasions). It is maintained that even when women sing in groups of only two or three while in menstrual seclusion together the effect is cacophonous (afi, literally 'crooked', 'muddled' or 'unclear'). This is attributed to their alleged inability to refrain from constantly squabbling with each other over trivialities such as the destruction of a few garden crops by a pig.

As mentioned earlier men claim that because military plans are kept from women, unmarried wives have never been suspected of secretly assisting the enemy. Nor apparently were such women suspected of harming their husbands' co-villagers in revenge for harm inflicted on their own kin (cf. Strathern, M. 1972:178). Marriages with women of groups with whom Yonura regularly fought were rare and Ommura women are not credited with powers of witchcraft, sorcery or poisoning (although, as will be shown, they are considered capable of making their husbands, but not other men, ill through contact with their menstrual blood).

In terms of New Guinea Highlands group ideologies women commonly appear as to some extent peripheral in relation to male based groups, or as occupying an 'in between' position in which they are not fully or permanently identified with a group although they carry messages between their natal group and their husband's group and link these groups through exchange relations (e.g. Strathern, M. 1972; Feil 1984; Josephides 1985).

The Kewa of the Southern Highlands are an example of a people who put considerable ideological emphasis on the notion of women as peripheral. Kewa descriptions of their 'tribes' and 'clans' are strongly coloured by a marked underlying distinction between men as 'base-people

of the place' and women as peripheral 'sojourners' (Josephides 1985: 65-6, 217). In describing these groups Kewa stress agnatic descent idioms in a way that 'does not exclude non agnates from being full members of the group. It does however exclude women who cannot pass as "brothers"' (Josephides 1985:27). Further:

Because as a part of normal social practice (marriage, divorce, widowhood) women are expected to move at least once in their lives, men talk of them in general as being sojourners in respect of any one group. This status then informs their position vis a vis group ideologies, and physical sojourners become ideologically peripheral. (Josephides: 1985:65).

In fact many Kewa women become stable residents in their husbands' settlements following marriage. However the ideological representation of women as peripheral sojourners serves, according to Josephides, to validate a situation in which women cannot participate in group affairs on the same level as men (1985:65-6, 219).

Ommura group ideologies do not appear to me to define women as peripheral so unequivocally as in the Kewa case - although clearly such comparison can only be of a very general kind and does not constitute a statement about women's actual status or participation in public affairs. Ommura represent the village as male-based to the extent that they describe its unity as deriving from bonds among men, and its survival as depending ultimately on 'men's work'. However both women and men also use other idioms in terms of which women, whether natal members or in-married wives, appear as integral members of the village (e.g. adult co-villagers as people who produce and eat food from the same ground and co-operate in bringing up village children). These idioms of group unity seem not to lend themselves so readily as the agnatic ones emphasised by Kewa to defining women as peripheral - a situation that fits with the fact that a significant proportion of Ommura women marry within their natal villages or villages of residence. Moreover Ommura idioms of village unity seem to allow for inmarried wives to be relatively easily

defined as members of their husbands' villages (although women's membership is never of the same order as men's).

There are ~~some~~ parallels here with the situation described by Mandeville for Kamano who also, it will be recalled, do not describe their local groups in agnatic terms. Among these Eastern Highlanders:

immigrant men gain membership not in patrilineages or clans but in a local village group, and the recognition that they fully belong is marked not by the provision of an agnatic uniform (in Barnes' phrase) but by admitting them to full and active participation in village councils and activities on the basis of their contribution as warriors, workers, fathers and so on. Membership of a domiciled patrilineage is neither a condition nor a corollary of local group membership. ...Women, whether as wives, immigrants or adoptees can earn full rather than formal membership in the same way as men, that is, by contributing reliably to the strength and prosperity of the village. (Mandeville 1979b: 238).

THE HAMLET

The men of each hamlet gather regularly in their men's house to gossip, sing war songs, air disputes and problems and plan matters such as military defence, sorcery and the timing and staging of initiations. These men's house groups (as I shall call them) are not named. Nor are they land holding groups. No hamlet is associated with particular tracts of village territory. The only property that the members may be said to hold in common is the men's house itself ⁽⁸⁾. The men of a hamlet occasionally hold small crop fertility rites together and may also make the initial plans for initiation ceremonies. They co-operate for repairing their men's house but do not form work groups for clearing land or any other purpose. The women of a hamlet do not form comparable groupings. There is no type of occasion for which they regularly gather and, as already indicated, a menstrual house is not used by women from more than two or three residences. Nowadays men and women of each hamlet are required by the Local Government Council to work together without payment to maintain government sponsored roads. Most tend to avoid such work as far as possible.

In present day Yonura at least none of the hamlets or men's house groups has a clear identity as a distinct political unit. As already indicated the men of a hamlet traditionally operated to some extent as a unit in warfare. They might be forced to combine for defensive action when their men's house was the target of enemy attack. However it appears that they could usually expect assistance from co-villagers from other hamlets and that the parties that launched military attacks were commonly drawn from more than one hamlet. Moreover Yonura people are adamant that military plans or decisions made in one men's house are always promptly communicated to members of the other village men's houses. This seems also to apply to plans concerning sorcery. While I do not have detailed information about voting in the Local Government Council elections held shortly before my arrival Yonura people say that 'all' members of the village were in agreement that Tahea of Samura hamlet should be the Yonura councillor. I observed no clear tendency for the members of any men's house group to act as a unit or even to sit or stand together in village level disputes. There was considerable turnover in the membership of each hamlet and men's house. This would seem to counteract any tendency for the village to become divided into sharply distinct hamlet based groupings. Men quite commonly moved between hamlets and men's house groups within the same village as well as between villages⁽⁹⁾. Moreover members of each of a village's men's houses commonly spend much of their time visiting the others.

Yonura men themselves are eager to play down the significance of the division of their village into hamlets and men's house groups, an attitude which reflects their preoccupation with the necessity for maintaining a unified village front in the face of external enemies. They recognise that long hours spent together in the men's house create close bonds and are critical of men who seem to interact too exclusively with members of their own men's house group and to spend too little time in the village's

other men's houses. Such men are warned that if they do not visit other men's houses more often they will not be able to 'sing well' with their members, that is to co-operate successfully with them for military and other purposes. All able bodied men of a village are expected to contribute to the building of each men's house on its territory and it is stressed that every man of a village is therefore entitled to spend as much time as he wishes in any of its men's houses⁽¹⁰⁾.

THE QUANRANRE

Each village contains a number of groupings the generic term for which is quanranre, literally '(people of) one blood'. Quanranre are not individually named. In earlier work I referred to these as shallow patrilineages. However their nature needs further explanation.

Ommura use the 'one blood' idiom to signify agnatic kinship⁽¹¹⁾.

Males are normally associated with the same quanranre as their fathers. The male members of a quanranre are, in principle, close biological agnates although some quanranre contain men who are adoptive sons of natal members or who are considered to have become affiliated through participating in the affairs of the quanranre over a period of time. Women are identified with their husbands' quanranre in certain respects but also regarded as retaining certain bonds with their natal quanranre (see chapter 3). In Yonura in 1975 no quanranre contained adult males more distantly related than FFBS, and in many cases none beyond FS (true or adoptive).

Ommura have short genealogical memories. As in some other parts of the Highlands very few people can name their great grandfathers and some cannot name their paternal (or maternal) grandfathers (e.g. Langness 1973a:300; Mandeville 1979a:109; Watson 1983:220). There is no attempt to link people through reference to more remote named or un-named ancestors. Ommura stress the filial and fraternal links between the members

of a quanranre rather than their relationship to a common ancestor. In defining agnatic relationships Ommura, like Kamano, do not draw on conceptions of 'a family tree descending from an ancestor and "placing" a large number of people, known and unknown, living and dead' (Mandeville 1979a:122. See also Scheffler 1973).

At birth both male and female children are said to have some blood from both their fathers' quanranre and their mothers' quanranre of origin⁽¹²⁾. However between the ages of about seven and twelve a child's links of shared substance with his or her mother's natal kin are symbolically severed. At this stage boys and girls undergo initiation ceremonies (kamkarura for girls and umara for boys) during which, as often in Eastern Highlands initiation rites, the novices' noses are ritually bled (e.g. Berndt 1965:91; Hays, T. and P. 1982; Salisbury 1965:62; Newman 1965:79; Herdt 1981:223f)⁽¹³⁾. In the Ommura case the significance of this ritual blood letting is complex. However one of its explicit aims is to eliminate from the novice's body the blood of his or her mother's quanranre of origin. Initiation practices also reflect the attitude that males are more integral members of their natal quanranre than are females, a view sometimes expressed by saying that men have more of the blood (nranre) of their natal quanranre than do women. In male but not female initiation ceremonies each novice is made to eat a leaf of the variety known by Ommura as ahiri on which has been sprinkled some blood obtained by scratching the tongue of adult male members of his father's quanranre. He is then told that he is now full of the blood of his father's quanranre⁽¹⁴⁾.

Thus the ties of 'common substance' that link quanranre are seen as being the outcome of 'post natal' as well as 'prenatal' influences (to adopt the terms coined by Watson for describing a similar body of ideas held by Northern Tairora (1983:257f)). In certain contexts Ommura distinguish between people who are 'truly of the same blood' (quanranre tanruva)

and 'adopted' members of quanranre. However any boy adopted before the umara stage of initiation is said to be 'truly of the same blood' as the members of his adoptive quanranre because he has ingested the blood of male members of that group⁽¹⁵⁾.

The male members of a quanranre generally live in adjacent houses although they do not ordinarily co-operate in everyday production. The quanranre is not a property holding group. As already indicated garden land is individually held and, like most other valuable property (e.g. betel nut and pandanus trees) normally passes from father to son. Nor do quanranre hold rights to ritual objects such as flutes or to particular songs or bodies of knowledge (cf. Berndt 1962:27; Salisbury 1962:17). However they are regarded as constituting a unit for mutual aid and for the main life-cycle payments which are represented as being made by one quanranre to another.

Ideally each adult male member of a quanranre contributes to the bridewealth given for each of the others' wives and receives a share of bridewealth payments made to his quanranre. The quanranre is similarly represented as a unit as regards certain death compensation payments and birth and initiation prestations made by a child's father's quanranre to his or her mother's quanranre of origin. While women do not participate in these transactions on the same level as men, a wife is regarded as 'helping' with ceremonial payments made in the name of her husband's quanranre through the labour she contributes to the production of pigs and other valuables. She may also contribute to these payments in her own name items such as new string bags she has manufactured herself.

People tend to see themselves as depending on their quanranre for assistance and support. Ideally one feels such strong sympathy (po) for members of one's quanranre that one will never refuse a request from them for help in fighting, food in times of shortage or a pig for use in a

healing ceremony or compensation payment. Because women do not engage in military activities or have the same control as men over the allocation of pigs they are not considered to contribute to the welfare of their natal or husbands' quanranre to the same extent as male members.

The mutual dependence of quanranre kinsmen is modified by geographical distance. Men who migrate out of villages where their quanranre reside and women who marry outside their natal villages tend to become progressively less involved in the affairs of their quanranre of origin.

CHAPTER 3MARRIAGE AND AFFINAL RELATIONSHIPS

This chapter looks at some aspects of marriage and affinal relationships in Ommura. It is necessary to be aware of these features and how they are perceived by Ommura in order to understand certain notions regarding the significance of illness and its causation.

Ommura say that all adults should marry and in Yonura every man and woman over the estimated age of thirty was or had been married, apart from one man who appeared to be severely mentally handicapped. Polygyny has not been frequent in the remembered past and during fieldwork there were only four polygynists in Yonura.

There are no positive marriage rules in Ommura in regard to preferred choice of spouse. The negative rules (i.e. prohibited choices) are expressed in terms of kinship dyad. Besides the primary relatives M, Z and D the following are prohibited spouses for a man: FZ, MZ, BD, ZD, FBD, MBD, FZD and MZD (all terms being used here in their 'denotative' or 'ordinary English' senses)⁽¹⁾. There are no marriage rules or restrictions expressed in terms of residence (cf. Glasse 1969:28). As noted earlier neither the village nor the hamlet are exogamous units. In approximately two thirds of existing marriages in Yonura both partners were at the time the union was contracted established residents of the village⁽²⁾.

Ommura represent marriage within the local group as a matter of practical expediency rather than preference or principle (cf. Herdt 1981: 40-1). Men and women whom I questioned simply pointed to the risk of being attacked, physically or by sorcery, if one travelled outside the village looking for a spouse or trying to establish a marriage or indeed any kind of relationship. Moreover affines living in different villages

are likely to be prevented by inter-group hostilities from discharging their mutual obligations.

Marriage between members of villages that have persistently fought each other is considered to be particularly risky and is in fact rare. It will be recalled that these are generally the closest villages geographically. In Yonura most inmarried wives are from Southern Tairora villages with which Yonura has not fought particularly intensively in the remembered past. Outmarried women have mainly gone to the same groups. The twenty one inmarried wives resident in Yonura were from nine different villages and not more than five were from any one of these groups.

It has sometimes been suggested in literature on the Highlands that a wide dispersal of marriages may reflect an emphasis on creating extensive exchange networks. In the early 1960s Barnes suggested that Highlands 'matrimonial alliances' tended to be 'deliberately dispersed' rather than concentrated, a situation which 'accords well with the emphasis on a multiplicity of freshly established interpersonal connections...' (1962:8). According to Meggitt the particularly wide dispersal of marriages among the Mae Enga reflects a situation in which all sub-clans aim to extend their exchange networks (which are based on affinal ties) so that 'it would therefore be foolish...to expend further brideprice in reaffirming these ties' (1976:95; also 1969:9. However see Feil 1980). In Ommura, as among Bena Bena, there is no evidence that dispersal is desired or sought in order to further exchange or political interests (Langness 1969:51; cf. Josephides 1985:61-2). This accords with the general lack of emphasis on inter-group exchange and with the fact that cross-village affinal relationships are not generally treated as a basis for enduring ties of any kind.

Substantial rates of marriage within the local group have been reported for elsewhere in the Tairora speaking area (Grossman 1984:41; Hays 1974:76; Watson 1983) as well as for other Eastern Highlands peoples (e.g. Herdt 1981:39-40; Robbins 1982:221f; Mandeville 1979a; Sorenson 1976:134; Linden-

baum 1979:43). In some cases the proportion of marriages that are endogamous to the local group appears similar to or higher than that noted for Ommura. Thus Lindenbaum notes that in the South Fore parish of Wani-tabé seventy four percent of marriages contracted by parish members between the mid 1950s and her fieldwork in the early 1960s were endogamous to the parish (1979:43)⁽³⁾. Watson's richly detailed analysis of marriage patterns among Northern Tairora indicates that in the mid 1960s around sixty four per cent of married women were locally born (1983:126)⁽⁴⁾. In this area residence after marriage is generally patrivirilocal (Watson 1983:129).

Lindenbaum considers the high rate of parish endogamy that she found among South Fore to be a relatively new phenomenon and quotes figures suggesting that it had increased markedly during the decade or so prior to her study (1979:43). She suggests that following the suppression of warfare and their increasing incorporation into the world economy South Fore became less dependent on extra-parish affinal links for obtaining cash, consumer goods and refuge (1979:43). Watson interprets the prevalence of intravillage marriage in Batainabura at the time of his study as not 'a postcontact phenomenon' but 'a tendency of long standing and one that first developed in response to local rather than exogenous factors' (1983:128).

There is some evidence to suggest that in the Yonura case, also, the current high rate of intravillage marriage does not represent a marked departure from pre-colonial patterns. I estimate that both partners were established residents of the village in about sixty seven percent of the marriages known to have been contracted by Yonura people between around 1950 and 1965, compared with about seventy one percent of those contracted after 1965⁽⁵⁾. In a significant proportion of cases however they were not both natal members. The possibility of finding a suitable spouse within

the village has clearly been enhanced by the continual turnover in each village's population as well as the relatively narrow range of Ommura marriage prohibitions.

Ommura themselves maintain that the prevalence of inter-group hostilities has 'always' made it difficult for men and women to marry outside their villages of residence. Further, the political and economic value of extra-village affinal relationships seems always to have been slight by Highlands standards. Ommura tended, for example, to depend on torti partners rather than affines for wartime refuge and goods unavailable locally.

GETTING MARRIED AND ITS IMPLICATIONS

Matches are made in various ways. Love matches are said to be the commonest, i.e. a couple form an attachment of their own accord and later get their parents' agreement to arrange a marriage. There are no institutionalised courting parties; romantic attachments are said to be formed typically after public ceremonies such as those concerned with healing and crop or pig fertility. On these occasions men dressed in military attire may perform war dances, a kind of display said to make them especially attractive to girls and women. As the men dance in their finery girls sing songs praising the attractiveness and strength of particular men whom they then pursue after the ceremony. If the object of her attentions ignores her advances a girl may go and present herself at his parents' home in the hope of persuading him to marry her. It is to be noted that both women and men typically told me that it is usually the girl who initiates a courtship although they also sometimes described youths as following girls around and attempting to seduce them by playing the jew's harp.

Other marriages are arranged by parents in the sense that a youth's father considers that it is time that his son married and that the necessary items for bridewealth are available. The father will decide on a

suitable bride, probably after consultation with his wife, son and other kin and then approach the girl's parents. Less commonly marriage may be initiated by a girl's parents.

It appears to be rare for seniors either to oppose a young couple's wish to marry or to pressure their children into accepting particular spouses. Fathers sometimes say that they would like their sons to marry hard working, industrious girls who will be sure to produce plenty of pigs. However it is generally accepted that if young people are prevented from following their own desires in these matters then their marriages will be unstable.

Marriage is not, as in some parts of the Highlands, preceded by the handing over of betrothal gifts or by formal negotiations over the amount of bridewealth (e.g. Ryan 1969:165; Strathern, M. 1972:89). The groom and his kin simply display the bridewealth on the day appointed for the wedding and it is up to the bride's kin to decide whether the amount is acceptable.

Ommura weddings take place with varying degrees of formality or ceremonial. However, as elsewhere in the Tairora region (cf. Hays 1974: 90; Hays, T. and P. 1982:207), even at their most elaborate they appear brief and simple by New Guinea Highlands standards. Commonly they are attended only by the bride and groom plus their parents and other members of their respective quanranre, including spouses and children. The groom's kin bring some or all of the bridewealth prestations. (nrahesi ieta or nrakie ieta) to the bride's home to be handed over to her kin. Often the only other thing done is to replace the bride's short skirts (if she has not been married before) with the longer reed skirts worn by married women⁽⁶⁾. In more elaborate weddings there are also parallel ceremonies called eta nranre for the bride and groom.

Getting married is perceived as marking a change or new stage in three main senses. The couple, particularly the wife, are being advanced

into a new status or life stage; they are acquiring reciprocal rights in each other; and an exchange process and relationship is being inaugurated between their respective quanranre. In terms of the ceremony the first kind of change is articulated in replacing the skirt and the first and second in the eta nranre ceremonies. The bridewealth transfer is concerned with the third.

The ground plan of marriage exchange as Ommura see it is that certain rights in the bride - notably labour and custody - are being relinquished by her own kin in favour of her husband's kin and that the latter accordingly have to reciprocate with a series of prestations, of which the transfer of bridewealth at the wedding is only the first stage (cf. Strathern, A. 1980). As already indicated marriage is not, as elsewhere in the Highlands, seen as an important means of cementing or forging alliances or exchange relationships (cf. Brown 1969:90; Meggitt 1965; Strathern, A. 1980; Strathern, A. and M. 1969). The wife's quanranre are not expected to make return prestations to the husband's kin. Also their formal exchange rights and interests tail off fairly soon, notably those regarding children of the marriage who will ritually sever their ties of substance with their mother's kin when they undergo initiation.

Affinal prestations and bridewealth are described shortly. This section ends with an outline account of wedding ceremonies.

The night before the marriage ceremony is the time for holding eta nranre ceremonies during which the prospective bride and groom separately receive instruction from their elders about the rights which husband and wife have in each other⁽⁷⁾. I attended three such ceremonies, one for a bride-to-be and two for young men and heard very similar instructions in each case which I summarise briefly. A husband should prepare garden sites for his wife by removing heavy fallow, digging drainage ditches and making fences which he must then keep in repair. She should tend these gardens, harvest and cook vegetables for her husband and any children and also tend

pigs. A wife should avoid preparing food for her husband or having sexual intercourse with him while she is menstruating or for some time after giving birth. When a wife is in the later stages of pregnancy a husband should not have intercourse with her or expect her to carry heavy loads. Both spouses should refrain from committing adultery⁽⁸⁾.

One prospective groom was told:

If our brothers...are hungry we give them food....because we are sorry (po) for them. We can't be angry if they don't give us something back. All we can say is 'It's alright because I know you'll cry for me when I die' [a reference to the strong affective bonds that are supposed to exist between members of the same quanranre]. However if a husband is hungry his wife needn't give him food unless he reciprocates (hini ama) by preparing gardens for her. If he makes gardens for her and she doesn't reciprocate then he can hit her.

This excerpt reflects the emphasis placed in certain contexts on the view that the rights of spouses operate reciprocally so that default by one partner can entitle the other to withdraw his or her services, hit the offending partner so long as no blood is drawn or, in serious cases, seek separation or divorce. It is stressed that spouses can never hope to live in amity unless both take care to fulfil their reciprocal obligations.

A wedding ceremony which I witnessed in Yonura in 1975 was a relatively elaborate one by Ommura standards. The bride Maire and the groom Ankone were from the Yonura hamlets of Mussouri and Samura respectively and neither had been married previously. In the morning Ankone's parents and FB began to lay out the bridewealth on a clearing near the residence of his quanranre. Details regarding amounts and contributors can be found in Table 3 where the bridewealth for this particular marriage provides the first example. The cash, K134 at this point, was placed on banana leaves in two separate piles, one to be collected and distributed by the bride's father, the other by her brothers⁽⁹⁾. Barkcloth and new string bags were piled haphazardly alongside a pile of shirts and lengths of cloth obtained by the groom while on contract labour in Kavieng.

An hour or so later Maire arrived accompanied by her parents, her two unmarried brothers and her FB with his wife and young children. They were followed by a number of her single female friends. The men from Maire's party sat down so that they were separated from Ankone's kin by the bridewealth display which they began to inspect. The female members milled around in the background. Ankone arrived accompanied by his MB who had apparently been giving him some last minute instructions regarding his rights and obligations as a husband. As is customary in Ommura marriage ceremonies all participants including Maire and Ankone wore everyday rather than festive attire.

Maire's father then began to shout that the bridewealth was insufficient (hia qio) given that he had worked very hard to ensure that Maire would grow up so that she could garden and tend pigs. He then began running backwards and forwards snapping his bow strings in a display of stylised aggression. Villagers who were watching the proceedings from a distance explained to me that it was common for the bride's father or other male kinsman to engage in such behaviour during wedding ceremonies because they were 'angry' (inronra hita) about losing a daughter that they had worked so hard to bring up and for whom they felt such strong affection (po). Ankone's father protested mildly at the demand for more bridewealth but added K10 to the pile of cash. Maire's father immediately calmed down and discarded his bow.

The groom and bride were instructed to stand near each other and the bride's mother and some of her friends began to dress her in new skirts (hiara) piling them on until they reached half way up her chest. Meanwhile the groom's FB handed him a small broom of the kind used by Ommura to sweep the floors of their houses, instructing him to keep waving it in front of his nose. A bystander explained to me that where a groom had not previously been married it was necessary for him at this point to keep sweeping away the 'smell' of the skirts lest it overwhelm him.

In the following episode, which was not included in the other marriage ceremonies I observed, the bride's mother hung several string bags over the back of her head. One contained a smallish portion of cooked pork for Maire to share the next day with Ankone and his parents. Others contained items representing her wifely obligations: a spade, sweet potato shoots and a bundle of firewood. Maire's father then turned to her and announced loudly:

We give you these things so that you can work hard. Your husband will make you gardens and you will work hard in these. We have worked hard to feed you and perform kamkarura [female initiation ceremony] for you. So now your husband and his fathers and brothers [atavakia] give us a pig and other things. We have worked hard to make you grow so that you can produce children, food and pigs. The children that a woman bears are for her husband. The pigs she produces are for her fathers and brothers [atavakia].

The final sentence of this speech refers in a rather exaggerated and rhetorical fashion to the prestations of pork and other items that a woman's kin expect to receive from her husband's quanranre at the birth and initiation of each of her children.

Maire's kin then began to gather up the bridewealth to be distributed when they got home to Missouri. Maire was accompanied by her friends to the house in Samura which she was to share with Ankone and where she would sleep that night.

RIGHTS TRANSFERRED AND BONDS RETAINED

The main rights transferred on marriage from the bride's natal quanranre to her husband's kin can be briefly summarised as follows:

A woman is required to join her husband in a house provided by him⁽¹⁰⁾. If, as most men do, he has male quanranre in his village of residence the newly married couple will usually live close to them. Ommura place much emphasis on the notion that marriage involves a girl who formerly worked in her parents' gardens, or would have done had she remained with them, transferring her labours to her husband⁽¹¹⁾. A woman's children

will grow up to be members of their father's quanranre. However her own kin retain an interest in them which is gradually weakened through a series of prestations due from the husband's side and through ritual blood letting represented as eliminating from the child's body blood of the mother's quanranre of origin. In general a woman's husband is entitled to claim compensation for injury done to her. However if he injures her himself - e.g. strikes her hard enough to draw blood - he owes compensation to her natal kin. A man may marry the widow of a quanranre brother without payment of further bridewealth to her natal kin although only if the widow herself is willing.

At the same time Ommura people emphasise the persistence after marriage of ties of 'affection' and 'sympathy' (po) between a woman and members of her natal kin. In particular, the sentimental bonds between siblings are said to be so strong that throughout their lives women will weep and men become 'angry' (inronra hita) over harm or misfortune to their brothers or sisters. I was told that in the days when women still amputated their fingers in mourning (a common practice in the Highlands, cf. Strathern, M. 1972:95) they were far more likely to do so following the death of their brothers than of their husbands.

In accounting for these emotional ties between a married woman and her natal kin people sometimes refer to the fact that they all have 'the same blood'. Another kind of explanation is in terms of nurture. I heard many statements of the type: 'We worked hard to feed and initiate her so now she will always feel sympathy (po) for us and give us food', or 'We will always weep for her and she for us because we gave her food and initiated her so that she grew big'. Here they are perhaps drawing on the principle, often apparent in Highlands exchanges and food prohibitions, that the products of someone's labour are in a sense 'inalienable'. The labour involved in producing the item (a woman in this case)

remains part of the producer(s) (the woman's kin) so that even when the item has been disposed of they retain certain links with it (cf. Strathern, M. 1984:165; Meigs 1984:18).

A married woman's attachment to her quanranre of origin is seen as a general sentimental commitment to their welfare. There is not the same kind of expectation that she should play a role in furthering the economic interests of her kin as in certain parts of the Highlands where ceremonial exchange is more developed (cf. Strathern, A. 1980; Strathern, M. 1972). Nevertheless an Ommura wife is supposed to take pains to ensure that her husband does not default or skimp on his contribution to the gifts of pork or affinal payments that he should present to them. She will also be expected to send gifts of vegetables mainly to her brothers but also to her parents and sisters. Ideally she should never fail to meet requests for food from members of her natal quanranre. Her male kin are supposed to manifest concern for her well being by their 'anger' (inronra hita) and 'pity' (po) if she is seriously mistreated by her husband or another and by taking whatever steps they can to rectify the situation. They may also make her occasional small gifts of garden crops or pork but there is no expectation as, say, among South Fore that a sister's food presents to her brother should be regularly balanced by return gifts (Glasse and Lindenbaum 1980:444).

BRIDEWEALTH AND OTHER PRESTATIONS

Nowadays cash and pork or occasionally a live pig are considered to be the most important items in the bridewealth prestation (nrahesi ieta or nrakie ieta) made by the groom's quanranre to that of the bride. In the case of a woman's first marriage traditional valuables (kioa) such as bark cloth, arrows and new string bags are often included plus, sometimes, store bought clothing brought back by returned contract labourers⁽¹²⁾, Where the woman has previously been married bridewealth

typically consists only of cash. For marriages contracted by Yonura residents during fieldwork amounts ranged from K144 plus a large pig, traditional valuables and store bought clothing (in the case of a woman's first marriage) to K30 only where the bride had been married before (13).

As elsewhere in the Highlands there is a consistency between the items used for bridewealth and other prestations (Strathern, A. 1980:53). However the significance of a given kind of item can vary according to the type of prestation for which it is being used. In Ommura there are no special terms for the pig(s) used in marriage transactions (cf. Strathern, M. 1972:105). Nor are individual components of the bridewealth linked in any precise way to the transfer of specific rights or to particular aspects of the affinal relationship (cf. Strathern, M. 1972:101). Nevertheless in the context of marriage transactions pigs (live or killed) are sometimes represented as having properties that make them particularly appropriate for compensating the bride's quanranre for the loss of one of its female members. Bridewealth pigs must have been raised by members of the groom's quanranre (rather than acquired by them when already large) and the groom's kinsmen sometimes announce that they and their wives have 'worked hard' to enable the pig(s) to grow just as the bride's kin have 'worked' to ensure her growth. On such occasions certain associations that Ommura make between women and pigs may come to the fore. During one marriage ceremony, for instance, the bride's father demanded that the groom's quanranre supplement the bride-wealth prestation with an additional pig because 'our daughter will dig in the ground for you. She is a pig'. (When Ommura liken women to pigs on the grounds that both dig in the earth they are not denigrating women.)

In parts of the Highlands where affines are expected to become important exchange partners inclusion of live as opposed to killed pigs in bridewealth is sometimes represented as important for ensuring that the

TABLE 3

(a)

BRIDEWEALTH FOR MARRIAGES CONTRACTED BY YONURA RESIDENTS (1975-6)

A. First marriage for both groom and bride

Contributor	Cash contribu- tions	Contributions of pork	Contributions of live pigs	Other contribu- tions
1) Groom	K70	-	-	5 lengths of cloth 3 shirts
Groom's F	K50	-	1 large live pig	4 bundles or arrows 15 barkcloths
Groom's M	-	-	-	2 new string bags
Groom's FB	K10	-	-	-
Groom's FBS	K10	-	-	-
Groom's MB	K4	-	-	-
Total cash = K144				

2) Groom's F	K100	2 small cook- ed pigs	-	-
Groom's B	-	-	-	10 bundles or arrows
Total cash = K100				

3) Groom's F	K80	1 large whole butchered pig (uncooked)	-	-
Groom's FB	K17	-	-	-
Groom's M	-	-	-	2 new string bags
Total cash = K97				

B. Second marriage for bride, first for groom

Contributor	Cash contribu- tions	Contributions of pork	Contributions of live pigs	Other contribu- tions
1) Groom	K30 (was asked by bride's kin to add more cash at a later date)	-	-	-
2) Groom	K76	1 small whole butchered pig (uncooked)	-	-
Groom's F	K3	-	-	-
Total cash = K79				

a) These represent all marriages contracted by Yonura residents during

recipients have the means to produce a good supply of pigs for return prestations (e.g. Strathern, M. 1972:113-4; Strathern, A. 1980:54. cf. Feil 1984:64). Ommura, as might be expected, do not place this kind of significance on their occasional use of live pigs in marriage transactions. In my experience the donors refrained from butchering the bridewealth pig(s) only where the bride's kin had specifically asked for a live animal. This is consistent with the fact that the only formal prestation likely to pass from the bride's kin to that of the groom at marriage or on any subsequent occasion is an optional gift of pork⁽¹⁴⁾. This is given to the bride by her parents during the marriage ceremony for her to share the next day with her husband and his parents. Ommura describe it as a means for the woman to ensure the goodwill of her new husband and parents in law rather than as a prestation made by her kin as reciprocity for the bridewealth or any part of it.

As I have already noted the transfer of bridewealth is generally described as a transaction between the groom's quanranre and that of the bride⁽¹⁵⁾. Information about twenty eight marriages contracted by Yonura residents between about 1965 and 1976 indicates that it is rare for all men of the groom's quanranre to make a contribution. Failure to contribute by quanranre kinsmen resident in the groom's village was usually attributed simply to a lack of resources. Quanranre kin of the groom who live outside his village are not generally expected to contribute and rarely do so. The bulk of the bridewealth for a man's first marriage is usually donated by his father. If the groom has recently returned from a period of contract labour he is likely to provide a substantial part of the cash himself. A mother's brother who is on particularly friendly terms with his sister's son is likely to make a small contribution to his bridewealth.

When bridewealth and affinal prestations are handed over it is common for women to be praised for their work in rearing the pigs included. They

are also sometimes thanked for 'helping' to provide the cash through their work in coffee production. However people of both sexes speak of men as being the formal contributors of these items and of their wives as 'helping' them to make their contributions. String bags and bark cloth are often contributed by women in their own names.

Bridewealth is usually distributed by the bride's father or guardian. Portions go to members of her quanranre of origin plus others who are considered to have contributed significantly to her nurture and upbringing. Failure to include in the distribution people who claim to have 'helped' to bring up the bride is a common source of ill feeling. Men, women and children are formal recipients of the pork distributed by the bride's father. The cash is formally allocated to men who may then give some of their portions to their wives. String bags commonly go to the bride's sisters and mother and arrows to her male kin.

If a husband decides to end his marriage and tells his wife to leave then he and his kin cannot normally demand return of the bridewealth. However the entire amount is likely to be reclaimed where a woman decides to return to her kin after a short period of marriage and is considered to have left her husband of her own accord. Claims for a substantial return of bridewealth are rarely made where a woman decides to leave after many years of marriage or producing a child or children who will remain with her husband's kin. The husband may however secure a token repayment. Where a wife leaves her husband to live with another man whom she intends to marry her new lover is often asked to make the husband and his kin a payment represented as compensating them for the bridewealth that they gave for her. I also learned of a number of instances in which the woman's quanranre of origin obtained 'bridewealth' for her from her new lover and then passed on this prestation to her husband's quanranre saying that they were returning the original bridewealth.

Subsequent affinal prestations

From an Ommura perspective the transfer of bridewealth is, as I noted earlier, only the first in a series of formal prestations that a woman's quanranre of origin should receive from her husband or his quanranre at life-cycle ceremonies. In addition to these formal prestations a man should send his wife's parents small gifts of pork from time to time. The recipients on these occasions do not make formal counter-prestations but certain tasks performed at initiation ceremonies by the novice's mother's brother (ninau) are often represented as a return for affinal prestations. The asymmetrical nature of the flow of goods between affines is consistent with the fact that affinal prestations are represented primarily as compensating a woman's quanranre of origin for the fact that her offspring will be identified with her husband's quanranre. They are not treated as a means of creating or cementing important exchange relationships or alliances between affinally related groups.

Formal affinal prestations should be made in the following contexts:

- 1) Kyayha or kyayha uti is the name given to the meal of smoked marsupials that a man must provide for the members of his wife's quanranre of origin following the birth of each of her children. The father, often assisted by some of his quanranre kinsmen, starts setting traps for marsupials immediately following the birth. The smoking is done by elderly men who are considered to be particularly skilled at this task and who are rewarded for their efforts with the intestines of each marsupial that they smoke. On the one occasion on which I attended a kyayha the infant's father presented eighteen marsupials to his wife's father to be distributed among members of the wife's quanranre of origin. However I was told that because hunting is such an unpredictable activity the number of marsupials given tends to vary widely from one kyayha to another. The amount of time available for trapping the animals is limited by the fact that the infant's father must fast until the kyayha has been

provided.

2) Some years before he or she is initiated the child's nasal septum is pierced, a procedure known as nri-i rara. At this time the father is expected to give the mother's brother a portion of pork (generally considerably less than a whole pig) to share with members of the mother's quanranre of origin.

3) During each initiation ceremony that a child undergoes his or her father should present the mother's brother with pork. Usually cash and traditional valuables are also included in initiation prestations. These prestations are represented as transactions between quanranre groups. However as Table 4 indicates the novice's father or guardian normally provides the pork and a relatively large proportion of the cash⁽¹⁶⁾. Ideally the mother's brother should participate actively in those stages of the initiation ceremony during which his sister's child receives instruction about sexual matters and adult responsibilities. He should also symbolically protect the novice during those episodes in which he or she is ritually beaten with stinging nettles⁽¹⁷⁾. The performance of such tasks by the mother's brother is often represented as reciprocity for the initiation prestation he has received. However, as elsewhere in the Eastern Highlands (Mandeville 1979a), mother's brothers who live in different villages from their sisters' sons may be prevented by inter-village tensions from discharging such obligations.

Table 4 gives details of the composition of and contributors to the affinal prestations made during the initiation ceremonies held in Yonura during fieldwork. The amounts listed here cannot be regarded as typical. While the number of pigs used in initiation prestations appears to have remained fairly constant over the last decade or so, the amounts of cash included in such prestations rose significantly following the

TABLE 4:

AFFINAL PRESTATIONS MADE DURING INITIATION CEREMONIES HELD IN YONURA (1975-6)

A. IEVATI (second stage of male initiation) held in Mussouri men's house for two novices)

	Contributor	Cash contribu- tions	Contribution of pork	Other contribu- tions
<u>1st Novice:</u>	Novice's F	K10	1 large cook- ed pig	One bundle of arrows
	Novice's FB	K12	-	-
	Novice's EB	K 4	-	-
	Novice's EB	K 2	-	-
	Friend of novice's F (no kinship link)	K 2	-	-
	Total cash = K.30			
<u>2nd Novice:</u>	Novice's FB (novice's father deceased)	K22	2 small cook- ed pigs	-

B. KAMKARURA: (girl's initiation ceremony) held in Samura for one novice

	Contributor	Cash contribu- tions	Contributions of pork	Other contribu- tions
	Novice's F	K30	1 small cooked pig	10 bundles of arrows
	Novice's FB	K16	-	-
	Novice's FBS	K10	-	-
	Novice's FBS	K 2	-	-
	Total cash = K58			

increase in coffee prices in the mid 1970s (Johnson 1980). However there has apparently been a consistent tendency for affinal prestations at initiation to be smaller than bridewealth for a woman's first marriage. Initiation prestations have also, it appears, tended to be more variable in size than bridewealth. This may partly reflect the fact that each boy's initiation must normally be co-ordinated with that of several others and take place before any of the boys to be initiated together is too old⁽¹⁸⁾. Under such circumstances it can be difficult for a novice's kin to ensure that the ceremony occurs at a time when they are well supplied with pigs, traditional valuables and cash (Johnson 1980).

(4) A series of affinal prestations may be seen as terminating with those made at death. A married woman should ideally be buried by members of her quanranre of origin who receive in return for this service a prestation of pork from her husband's quanranre. When a man dies his maternal kin should bury him and receive pork from his quanranre.

The affinal prestations just described are represented as compensating a married woman's quanranre of origin for the fact that her offspring become members of her husband's quanranre and also as a return for her kin's efforts in bringing her up to be a fertile adult woman. Where a child's maternal kin fail to receive the affinal prestations that they regard as their due they may, in principle, claim custody over the child on the grounds that he or she is now a 'stolen child' (mbuara nraia). They may also describe the mother as a 'stolen woman' (mbuara nrahesi), a term commonly used in relation to situations in which a woman goes to live with a man who has not given bridewealth to her kin. The meat included in these prestations (pork and smoked marsupials) is referred to by a special term, kyapairi, and is the one item considered to be an essential part of any affinal prestation made at initiation. Ommura say that because meat is 'full of blood' the kyapairi compensates the recipients for the fact that 'their' blood is washed away. The blood

referred to in such contexts is that eliminated during the ritual blood letting undergone by both boys and girls at initiation. This operation is, it will be recalled, said to remove from the novice's body blood of the mother's quanranre of origin.

Some other aspects of the significance placed by Ommura on pigs and marsupials may also be relevant here although they were not, in my experience, made explicit in relation to initiation prestations. There are several myths in which a woman and her child(ren) turn into a marsupial with its offspring on its back (Newman and Boyd 1982:271-2). In other myths marsupials are associated with children. They are described as being the offspring of certain mythical figures (uri) (cf. Herdt 1981:89) or as emerging from the bodies of pregnant women (cf. Meigs 1984:59, 154; Newman and Boyd 1982:273). Ommura, like some other Highlanders (Josephides 1985: 207) also draw parallels between women's tending of pigs and nurturing of children. Besides the associations between women and pigs that I mentioned earlier Ommura posit similarities in certain contexts between women and the ground-dwelling marsupials most commonly used for kyayha⁽¹⁹⁾. These animals are said to menstruate for example (cf. Herdt 1981:89) and their fur is likened to women's pubic hair (cf. Gillison 1980:147).

Ommura say that after a youth has passed through the final stage of male initiation he may wish to 'help' his mother's brother in return for the latter's 'help' in initiating him. The two men may develop a relationship in which they regularly assist one another, for example with gifts of food at times of shortage or support in fighting or disputes. They are not however obliged to develop such a relationship nor even expected to be on friendly terms. As we have already seen there is no formal prohibition against shooting at or killing matrilineal kin during inter-group fighting.

In keeping with the importance they attach to eliminating maternal blood at initiation Ommura do not emphasise links of substance with

maternal kin as do Highlanders who regard matrilateral ties as constituting an important basis for exchange relationships (cf. Meggitt 1965). Assistance offered by a mother's brother to an initiated sister's son or vice versa tends to be represented as reciprocity for past services rather than as reflecting ties of kinship.

THE FLOW OF 'BLOOD' BETWEEN AFFINES AND THE FLOW OF BLOOD IN THE BODY

This section focuses on aspects of Ommura attitudes to and conceptions of affinal relationships that are important for understanding their views about the nature and causes of sickness.

An important principle underlying Ommura notions about illness causation is that attack by an illness causing agent is particularly likely to result in harm if the victim has already been made vulnerable by 'fear' (atu hiro) specifically associated with the kind of circumstances in which that type of agent typically attacks. Among the 'fear' generating circumstances considered to make one susceptible to illness is failure or alleged failure to deliver adequate affinal prestations. For instance, a man is held to be vulnerable to illness from the agent known as 'mother of marsupials' if or when he is suffering from 'fear' that he may anger his affines by failing to trap sufficient marsupials for a kyayha prestation.

The significance placed on neglect of affinal obligations is also relevant to the discussion in later chapters of the metaphorical links that are apparent between Ommura notions about harm from illness causing agents and their views regarding vulnerability in the context of inter-group fighting. Beliefs about menstrual blood as a source of sickness are symbolically related to the idea that tension in affinal relationships can constitute an important threat to the solidarity of the village and hence to its military strength.

In Yonura, where about two thirds of marriages were between established village residents, I noted a tendency not to give prominence to the fact of affinal relationship between particular co-villagers. A similar situation has been described by Mandeville. In the Kamano village where she worked the effect of a marriage between co-villagers is to:

create a small pocket of affinal rights and duties between certain individuals without, however, making it readily apparent to the observer that their relationship is anything but that of co-villagers (Mandeville 1979a:110).

In Yonura men of affinally related quanranre regularly spent long hours together in the men's houses and co-operated as co-villagers in the staging of healing, fertility and initiation ceremonies and activities relating to military defence. The novice's father and mother's brother clearly interact as affines during those episodes of an initiation ceremony in which the latter receives kyapairi or 'protects' the novice from being harmed by stinging nettles. However at other stages of the same ceremony the emphasis is on the fact that these two men and their respective quanranre are co-villagers. This is particularly clear in those episodes where the novice's father and mother's brother co-operate with other village men to instruct the young people. Moreover after the father has presented the mother's brother with kyapairi he and his kin distribute pork to the other villagers in return for their help in preparing for and staging the ceremony. The use of specifically 'affinal' terms of address is relatively limited. For example a man normally uses such terms only in relation to his daughter's husband (ninramua) and the father and mother of his wife (WF = ninramiva, WM = ninatura). In my experience a man would usually address his wife's brothers by their proper names or terms denoting a co-villager relationship (e.g. nimatana) rather than using specifically 'affinal' terms (e.g. WB = nituava).

I suggest that this tendency not to emphasise affinal relationships

in 'village' contexts may partly reflect a perception of such relationships as a potential source of tension. People say that a woman's quanranre of origin often feel 'angry' (inronra hita) with her husband's quanranre although they may not show that they are feeling this way.

Such 'anger' is said to be particularly strong because the wife's kin are not merely deprived of a source of labour and reproductive power whom they 'worked hard' to bring up, they also lose some of 'their' blood when her children undergo ritual blood letting at initiation. Yonura people stress that failure by the husband's side to compensate for these losses with adequate kyapairi (the meat component of affinal prestations) can cause the 'anger' of the wife's kin to erupt in serious quarrelling or even physical attack. Tension between affines who are co-villagers is regarded as a particularly serious threat to the solidarity of the village and its military strength because of the special intensity of affinal 'anger' and because ill feeling between affinally related individuals may escalate to the point where whole quanranre are pitted against each other.

There is a strong ideological emphasis in male initiation ceremonies and everyday contexts on the importance of ensuring that appropriate affinal and bridewealth prestations are made (Johnson 1980). Those considered negligent in this respect may be chastised by co-villagers for causing ill feeling within the village. During an ievati male initiation ceremony held in Mussouri hamlet Apaia, a middle aged man, forcefully warned the novices of the harmful consequences of neglecting one's obligations to make affinal prestations. He reminded them that those who fail to receive the kyapairi that they regard as their due may well become angry and hostile. The following passage from his speech is concerned primarily with threats posed to village solidarity and military strength by failure to discharge obligations to affines who are one's co-villagers:

It isn't enough to have children. You must have pigs so that you can give kyapairi to your wife's brothers when we perform umara, ievati and kamkarura [male and female initiation ceremonies] for your children. If you can't kill these pigs for them they will be very angry and people from other villages will say 'Yonura people are busy quarrelling with one another. They won't hear us if we go and burn down their men's houses and gardens. They won't hear us because they are saying angry words to each other'. If you don't give pork to your wife's brothers your fellow villagers will say bad things about you and you will feel shame. I can tell you, if you have only children and no pigs your wife's brothers will be happy! [with marked irony].

What appears to an outsider as an almost compulsive desire to be free of affinal tensions must, I suggest, be understood in relation to the Ommura view that the very survival of a local community depends on its male members being able to function as a powerful and undivided fighting force. Reminiscences, anecdotes and my own observations suggest that quarrels over affinal rights and duties do occur within the village but that it is rare for whole quanranre to become directly involved. Moreover I learned of no instances in which tension between affinally related individuals had led to physical fighting between co-villagers. While bridewealth and affinal prestations are often represented as transactions between quanranre the pressure to avoid serious rifts within the village is such that a man who starts a dispute over such prestations tends not to be openly supported by others of his quanranre.

Typically sources of quarrelling between affines include delay or alleged delay in holding initiation or nri-i rara ceremonies for one's children (and thus in making affinal prestations) or tardiness in completing affinal prestations that one has arranged to present in instalments. Conflict also arises where affinal obligations are not clearly defined. On several occasions I heard men loudly chastising their daughters' husbands for failing to give them portions of pigs that they had recently killed. While a man is expected to provide his wife's kin with gifts of pork as well as with formal affinal prestations the appropriate frequency of size of such gifts is not specified.

Failure to deliver the affinal prestations, especially kyapairi, is said to have harmful effects on health as well as on the solidarity and military strength of the village. Specifically, such neglect can impair the flow of blood in a man's body or that of his child so that blood accumulates in the nose causing it to become painful and swollen. An analogy is apparent here between; on the one hand, bodily harm from blood stagnating in the nose rather than flowing properly round the body and, on the other, harm to a husband, quanranre or village caused by kyapairi failing to flow properly from a husband's quanranre to that of his wife. Both types of situation may be seen as involving not simply impaired or inappropriate flow of blood or its symbolic equivalents but also a substance with feminine associations being inappropriately retained in a 'masculine' zone or stagnating there. The husband's side holds on to kyapairi items which really belong with his wife's kin. The nose, as will be seen, is associated with masculine attributes in many contexts while flowing blood can take on feminine associations.

This kind of analogy was made explicit by Iraia of Mussouri hamlet during an ievati male initiation ceremony. He reminded the novices that 'If a woman goes [in marriage] from one quanranre to another then blood (nranre) must flow in the opposite direction'. He and others explained to me later that 'blood' in this context referred to kyapairi, meat which is described as being 'full of blood' and hence appropriate for compensating the recipients for loss of 'their' blood when their kinswoman's offspring undergo ritual blood letting at initiation. Iraia went on to warn the novices:

If blood [kyapairi] doesn't flow in a proper (avu avu) way from you to your wife's brothers then the blood in your bodies and in your children's bodies will also start to flow incorrectly (afi) and you will say that your noses hurt.

The other kinds of situation said to lead to a nose swollen with stagnant blood also involve in some sense an impaired flow of kyapairi

between affines⁽²⁰⁾. It is said for example that tardiness in initiating children may cause them or their fathers to develop swollen noses. During a sweet potato fertility ceremony an elderly man warned that young men who failed to have regular sexual intercourse with their wives would remain childless. Then 'bad' (uahi) blood would accumulate in their noses because kyapairi was not passing from them to their affines. Some Ommura men avoid eating pork from animals reared in their own households on the grounds that consumption of such meat would cause their noses to swell⁽²¹⁾. This restriction seems to be partly based on the view that these animals should be kept for use in affinal prestations. As will be seen contact with a woman's menstrual blood is said to cause swollen nose. These beliefs may be seen as resting partly on the notion that such contact involves blood of the wife's quanranre flowing towards the husband's quanranre and hence in the wrong direction.

Accumulation of stagnant blood in the nose tends to be associated with a generalised sense of slight unfitness or lack of vitality. Only where it results from contact with one's wife's menstrual blood does it constitute a symptom of illness.

CHAPTER 4:

PROTECTORS, NURTURERS AND STRENGTH

In Ommura certain illnesses have connotations regarding the patient's strength. Hence the diagnosis of illness in men and women bears a significant relation to notions regarding the strength of each sex. It has been a cardinal Ommura principle that men are 'stronger' than women in certain important respects and are ultimately responsible for the life, health and survival of the community - a view that has been central to notions about differences between the sexes and has reflected and reinforced existing definitions of men's and women's activities. In diagnostic decision making and in the processes of managing illness certain of the received notions of masculinity and femininity were at the time of fieldwork being modified and reasserted in the light of challenges to their validity posed by the decline of war. This chapter looks at selected aspects of gender in Ommura that are relevant to understanding these aspects of the significance of illness. It presents data on the sexual division of labour and spheres, and on associated notions of male and female contributions to survival. It also examines how men and women perceived these patterns as being affected by the enforcement of pacification.

Looked at broadly the accepted division of labour in Ommura has assigned to women primary responsibility for the daily and routine aspects of subsistence horticulture, pig husbandry, domestic work and child rearing. Men have been assigned more occasional or intermittent tasks in these spheres, along with the most active roles in the public sphere, which in the Ommura context has meant principally the organisation and conduct of warfare and of public village ceremonies such as those concerned with healing, fertility and male initiation. Views about the social worth of men and women respectively and about masculine and feminine

attributes and capabilities are closely bound up with these arrangements.

Elsewhere in the Highlands the definition of men as transactors in the sphere of ceremonial exchange seems integral to notions of masculinity, while images of femininity reflect women's role as producers of crops and pigs for subsistence and exchange. Extrapolating from Hagen ideas Marilyn Strathern has devised the categories 'transactor' and 'producer' and demonstrated them as 'a summation of female and male natures in Hagen society' (Strathern, M. 1978:183. See also Strathern, M. 1972; Josephides 1985; Sillitoe 1985). In Ommura too women are mainly responsible for producing pigs and men for exchanging them, but here the exchanges have little significance beyond the level of domestic and inter-family roles and relations. At the level of public or communal village affairs, which are handled by men collectively rather than in their individual capacities as husbands, Ommura stereotypes can be seen as reflecting an emphasis on warfare rather than transaction as the activity of men par excellence (cf. Josephides 1985:220).

Central to Ommura gender ideology is the principle that health, welfare, fertility and survival itself ultimately depend on the defence of the village community against outside enemies and mystical life-threatening forces, and that only men have sufficient strength to undertake the task. From this perspective women appear as relatively lacking in strength and dependent on men. At the same time the ideology stresses that if men are to be able to employ their powers to protect the community properly it is necessary for their wives to work industriously at crop and pig production.

There are parallels with the situation described by Herdt for another Eastern Highlands people who also lack elaborate ceremonial exchange systems and were also effectively pacified only in the 1960s. Herdt shows vividly how powerfully 'Sambia beliefs and values convey a warrior's conception of manhood' (1981:51) and goes on to relate this cultural emphasis

on military notions to his view that warfare 'dictated the need for certain kinds of men and women' (1981:303) and that 'what it demanded of men and women are keys to understanding Sambian adaptation' (1981:50). In contrast to Herdt I shall leave aside issues concerning the 'adaptiveness' of gender stereotypes that reflect military attitudes and values and the relationship of such notions to the personal identity of individuals.

While Ommura ideology represents daily labour for production as the typical work of women, with their husbands doing only occasional tasks, it does not portray women as being the main producers on their own. The ideology insists that women's daily work of crop and pig tending depends on men's prior work of collectively warding off destructive forces. This is a main ground on which women as well as men are expected to agree that a man's participation in public affairs has to take priority over his subsistence activities in case of any conflict between the two. It is also the reason why I have preferred 'nurturer' to 'producer' for designating the dominant stereotype of the female role in Ommura.

MEN'S AND WOMEN'S ACTIVITIES

Subsistence tasks

This section describes the attribution of subsistence tasks by gender in the sense of the agreed general norms or standards. It should be kept in mind that these allow for considerable variation in individual cases according to factors such as marital status or personal preference. For instance widowed or divorced men are more likely than those who are married to undertake subsistence activities typically performed by women. As generally in the Highlands individuals can vary quite significantly in their style of gardening (Boyd 1981; Grossman 1984:134). The kinds of garden land to which an individual man or woman has access will also have some bearing on the precise nature of the garden work he or she undertakes

(cf. Grossman 1984:134). For example only gardens on certain types of ground are considered to require deep drainage ditches.

Ommura refer to men's activities in the public sphere as 'men's work' while their subsistence activities are described as 'husband's work'. This reflects the fact that their work is done collectively in the former sphere but individually in the latter. As I noted earlier, in Ommura as elsewhere in the Southern Tairora area (Hays 1974), there is little co-operation in everyday production beyond the domestic unit typically consisting of husband, wife and their unmarried children. If an individual is suddenly incapacitated by illness or injury during a crucial period of planting or garden preparation an impromptu work group may be formed to assist with urgent gardening tasks. Men also occasionally work together for clearing exceptionally heavy fallow. However, in contrast to some other parts of the Eastern Highlands (e.g. Boyd 1981:133-42; Herdt 1981: 27; Salisbury 1962:52-61) neither men nor women normally undertake subsistence gardening activities in pairs or groups (although women often arrange to work in adjacent gardens for mutual protection and company).

A married man may help to prepare gardens for a divorced sister or a mother whose husband is very elderly. Little girls tend to assist their mothers with gardening but generally in a sporadic way. Their responsibilities in this regard are not seen as serious and they are rarely chastised for choosing to spend time playing instead. Once a girl reaches puberty she is actually expected to spend most of her time with her peers, and courting. Boys and youths often assist their fathers with felling trees and carrying fence palings but are not expected to become very seriously involved in gardening activities until they marry.

The initial stages of garden preparation generally involve a married couple working together or a woman working on her own. Women do not own axes and are supposed not to climb trees or move large boulders on the grounds that they lack the courage and strength (kyapukya) for such

demanding and dangerous tasks (cf. Boyd 1975:131; Josephides 1985:118)⁽¹⁾. Hence male labour is required for the initial clearing of stony sites or those with large trees or tree stumps that need removing. The imperata cylindrica and bracken fern covered sites on which Ommura like other Eastern Highlanders now make many of their gardens are usually cleared by a woman working by herself (Grossman 1984:156). She cuts the grass with a spade and bushknife and returns to burn it after it has dried some days later. Women are also generally responsible for the initial clearing of swampy low lying grassland sites on which 'yam gardens' (ova uta) and 'taro gardens' (kiera uta) are made. Such work is considered particularly laborious because it often involves removing thick growths of reed grass with dense root systems and the site may require repeated burning. Husbands and wives work together on the clearing of these sites when the task has to be completed very quickly in time for the restricted taro and yam planting season (around late September to early October).

While the initial clearing of a garden site is often done entirely by a woman the subsequent tasks of digging drainage ditches and erecting garden fences are allocated exclusively to men. Not all gardens require ditches but fencing is generally considered essential to protect the crops from marauding pigs. The length and depth of drainage ditches varies according to the type of site. The deepest I saw were about two feet in depth. Garden fences are occasionally made from bamboo but more usually from stout wooden palings lashed onto horizontal supports by means of vines which grow on trees and may therefore not be gathered by women. The trees used for making the palings are often felled and split in the forest at some distance from the site to which the wood must then be transported.

Women are largely responsible for tilling the soil in all types of subsistence garden, for the planting of root crops in the ground (as opposed to staking them), for the day to day weeding and tending of

subsistence gardens and for the harvesting and transporting of the staple food, sweet potato. The view of these tasks as 'women's work' is reflected in the way in which wives are likened to 'pigs who dig in the ground for their husbands (an association which is not, as I noted earlier, particularly insulting from an Ommura perspective). Men are not prohibited from undertaking gardening tasks typically associated with women nor, as sometimes in the Highlands, are they considered incapable of performing them well (e.g. Herdt 1981:83-4). However only widowed or divorced men are likely to engage in such activities more than very occasionally. It is said that men might become 'weak' (hia kyapukya) if they spent too much time in gardens, which are represented as 'feminine' zones (cf. Herdt 1981:74). Ommura, unlike some other Eastern Highlanders, have no concept of the 'garden man' or industrious male gardener as someone who can make an important social contribution (Godelier 1982:20; Robbins 1982:60; Watson 1983:47). Women break the soil with spades and digging sticks and then remove roots and vines, mainly with their hands. Planting root crops generally involves collecting vines from another garden and, especially in the case of sweet potato, preparing mounds in which to plant the vines, often from piles of earth made in the process of digging garden ditches. As tubers cannot be stored in this climate a woman needs to visit gardens daily to harvest sweet potatoes with which to feed her household and any pigs in her charge. She digs the tubers up with a stick and carries them back to the village in a string bag, a task in which she may be assisted by a young daughter. Sweet potato mounds are recurrently opened and covered over again.

Yams, taro, winged beans, sugar cane and bananas are symbolically and mythologically associated with men and unlike sweet potato play an important part in ceremonial meals as well as in the everyday diet. While women play a major role in preparing, tending and weeding gardens in which these

crops grow and in the planting of yams, taro and winged beans, growing 'male' crops is considered to require special techniques that only men can perform. Yams and winged beans are trained up poles which must be cut with an axe as must the stakes to which sugar cane is tied. Certain varieties of banana are thought to require wrapping before harvesting to maintain the fruit in an unblemished state and to protect it against flying foxes or fruit bats. In the past, but no longer, taro gardens were irrigated with bamboo tubes cut with axes. In principle 'male' crops should be harvested only by men. However the season for harvesting yams, taro and winged beans is so restricted (approximately May to July) that women are often required to help with the harvesting of these crops, although only under male supervision.

Pig rearing generally involves the joint labour of a married couple although not all married people own or care for pigs at any given point in time. Of a sample of forty five married couples interviewed by Johnson in Yonura in September 1975 thirty eight currently owned a pig or pigs⁽²⁾. (Johnson, S.R. 1980). At least in Yonura, never married, divorced or widowed people rarely own or tend pigs. Agistment is less common than elsewhere in the Tairora speaking area (Grossman 1984:163). Only two of the pig owning couples in Johnson's sample said that any of their animals were being cared for by others.

Men are responsible for building and repairing pig shelters and for bringing in new litters of piglets from the bush - a task said to require strength and courage because it involves braving an angry mother sow. They also search for lost pigs, often a time consuming activity occupying two or more days. Keeping garden fences in repair to protect crops from marauding pigs may be seen as an indirect male contribution to pig husbandry as may men's work in preparing the sweet potato gardens in which pig's food is grown. The day to day tasks associated with pig rearing are almost

invariably undertaken by women. While the animals often forage for themselves during the day they are fed a significant proportion of their diet so that they will remain dependent on humans and return when called in by their female caretakers. A woman feeds the pigs in her charge mainly on small sweet potatoes which she grows and harvests usually along with the food for her family. She may feed them as often as twice daily or, in the case of pigs in distant shelters, only once every second day.

In Ommura, as elsewhere in the Highlands, a woman often develops an intimate relationship with the pig(s) in her charge (e.g. Strathern, M. 1972:19; Watson 1983:49). She may suckle piglets and carry them as babies are carried in a string bag hung from the back of her head. Women pre-masticate portions of food for pigs just as they do for their own young children and are often to be seen de-lousing pigs cradled in their laps. Such intimacy is represented by Ommura men and women not simply as a reflection of the sentimental attachment that a woman is supposed to feel for the animals that she cares for but also as an essential part of successful pig husbandry. It is stressed that a pig's female caretaker can lessen the chances of it running wild if she encourages its domestication by treating it 'like her child'.

Women are primarily responsible for everyday food preparation and cooking although men are considered quite capable of harvesting and cooking and widowers and divorced men commonly perform these tasks for themselves. A married woman is expected to provide her husband and any dependent children with daily cooked food except when she is menstruating or has recently given birth. This involves, besides harvesting sweet potatoes and greens, collecting firewood, making bamboo cooking cylinders and fetching water, a task often allocated to children. As noted earlier a married woman may provide an elderly person with regular cooked food. The occasional aged individual who is largely dependent on others for sustenance generally

receives small amounts of food from a number of different people rather than depending entirely on one woman. The food a woman cooks may also be distributed by her husband to other men whose wives are temporarily unable to cook for them. Ommura women do not carry out everyday food preparation in pairs and groups as do women in some other parts of the Highlands (e.g. Salisbury 1962:58).

A sick Ommura adult is unlikely to receive much in the way of day to day care other than a regular supply of food, water and firewood. If the patient is a woman she is brought these supplies by female kin or friends. A sick man generally receives from other men food cooked by their wives.

Besides providing her children with the bulk of their daily food a mother is generally responsible for cleaning up after them, carrying them around until they can walk and then assigning them to the older children who probably supervise them for much of the day. A father should teach his young children to behave well and generally plays and walks around with them sometimes. However he spends much less time with them than does their mother, especially when they are very small. I noted earlier how Ommura, like some other Eastern Highlanders, represent the adults of the village as a group of men and women who collectively 'work hard' to bring up village children. This attitude is reflected in the fact that adult villagers are frequently to be seen giving children other than their own titbits of food and taking pains to train and discipline them (cf. Salisbury 1962:18).

House construction generally involves both male and female labour. Men fell and chop trees to obtain wood for house poles and rafters, cut bamboo for the walls, and construct the frame of the house. Women are responsible for gathering roofing thatch and vine for securing rafters. The weaving of the bamboo walls and the digging of latrine pits is undertaken by both sexes. Residential houses are usually constructed by a married couple working together or, less often, by a man on his own. The construction of a men's house involves the co-operation of a large number of male

co-villagers. This was also true of the erection of the high wooden palisades which used to surround Ommura villages. During fieldwork most men and women avoided doing the unpaid road maintenance work required of them by the Local Government Council.

Men still regularly manufacture bows, arrows, shields and whetstones for sharpening axes - 'male' implements which women are said to be too weak to use and may not own. They also make most of the body decorations that are part of male everyday and ceremonial attire. Women manufacture 'female' items such as digging sticks, bamboo cooking cylinders, baby slings and the reed skirts and bark cloth capes that most Yonura women still wear long after men have abandoned their traditional forms of clothing. They also weave the various types of string bag that are used by every Ommura woman for transporting vegetables, babies and piglets and for adornment on special occasions, and by every man for adornment and for carrying small personal possessions and arrows. In this area string bags are still made in the traditional fashion. Before the bag can be woven the thread must be made by laboriously spinning out plant fibre by rolling it on the thigh and then dyeing the thread in solutions made from various plants.

Hunting and trapping are exclusively male pursuits involving the use of bows and arrows, climbing trees and entering the forest, activities said to require a degree of strength or courage that women cannot muster. Men go individually or in pairs to shoot or lay traps for marsupials. Ommura people do not nowadays regard wild foods as an essential part of their diet and many men only hunt following the birth of their children when they must prepare a ceremonial meal of smoked marsupials. Women and children sometimes hunt in the grasslands for rats, frogs and various edible insects they eat as snacks. Except for those which grow on high trees and may be gathered only by men (e.g. wild pandanus nuts), the wild plant foods eaten by Ommura as occasional snacks and relishes are gathered by men, women and children.

Writers on the New Guinea Highlands have commonly suggested on the basis of general observation or systematic measurement that in the groups they have studied women carry the main burden of 'subsistence' or productive work. These assessments have been based on widely varying definitions of such work and/or criteria for measuring labour inputs (e.g. Modjeska 1982:73; Sexton 1984:136; Salisbury 1962:108). More generally it has been noted for many parts of the Highlands that women devote more time than men to agricultural work and/or pig production (e.g. Herdt 1981:78; Modjeska 1982:70; Lindenbaum 1979:121; Josephides 1985:118; Sillitoe 1985:506-7. cf. Feil 1984:60). Ommura themselves, as will be seen, attach significance to comparisons between men's and women's capacity for arduous physical work, comparisons which now provide a focus for questioning the validity of received notions about differences between male and female strength. They explain in this connection that although only men are fit for the supremely demanding tasks of warfare and protecting against destructive forces women's gardening has always required them to engage in physically demanding work for longer hours. I now relate this to my own observations (bearing in mind the importance of keeping 'emic' and 'etic' conceptions regarding work analytically distinct)(Schwimmer 1979; Strathern, A. 1982).

Although I did not take formal time budgets I was able to observe beyond reasonable doubt that in general Yonura women do spend more time working in gardens or garden sites than men do. Except during the yam and taro harvesting season I frequently saw women but rarely men at work in gardens as I passed. Modjeska stresses that in the Highlands men's productive work is often less visible to an outsider than that of women because it involves spatial mobility (1982:72). It is true that Ommura men can on occasion spend long hours engaged in such less 'visible' activities as searching for lost pigs or felling trees in the forest or bush for garden fences. However the fact remains that bachelors and married men are routinely much more in evidence in the village (i.e. not away in the gardens

or bush or with pigs) during the greater part of the day than women are. This represents a change from the time before pacification, when men regularly accompanied their wives to the gardens. But the object even then was to protect them rather than to share their labour.

Between about 8.00 a.m. and 9.30 a.m. on any ordinary day most of the village's married women are to be seen setting out to their gardens singly or in groups with their digging sticks and spades. Typically they return by mid afternoon to prepare the evening meal, carrying dry branches for firewood and the daily rations harvested from the gardens in string bags hung from their heads. Before retiring those who care for pigs call in their charges and feed them, a task that may require a time consuming walk. By contrast it is usual to find large groups of men in or around the village men's houses at most times of the day engaged in talk or discussion. When men do work outside the village on gardening or other activities they tend to go out an hour or so after the women, returning by about 5.00 p.m. Exceptions to these general patterns occur during the yam and taro harvesting season and to a lesser extent during the yam and taro planting season when both sexes spend significantly more time than usual on horticulture.

A number of studies suggest that in some parts of the Highlands the time spent by women and men respectively on subsistence activities was relatively balanced before the switch from stone to steel technology (e.g. Salisbury 1962:108-9; Sexton 1984). While I did not attempt a precise reconstruction of 'precontact' work patterns in Ommura it seems clear that here too the switch to steel tools, which was virtually complete by the late 1940s, had benefited men more than women in this regard. Steel axes, bush knives and spades enabled men to carry out their allotted tasks (e.g. digging ditches, felling trees) more easily and efficiently than before, whereas women, although beginning to use knives and spades for certain tasks, continued to do much of their own work with digging sticks and

directly with their hands (Salisbury 1962; Steensberg 1980).

Some other perceived changes relate to the decline of inter-village fighting and increasing involvement in the world economy. As with other Tairora speakers (Watson 1972:576) Ommura say that following the suppression of war some men now tend to clear garden land more thoroughly and keep their garden fences in better repair. It is not however claimed that they are giving significantly more time to such activities or overstepping traditional definitions of the husband's tasks. Both sexes still put forward the view that men might become 'weak' (hia kyapukya) if they spent too much time in gardens.

Unlike some other Eastern Highlanders Ommura do not hold that their gardens and pig herds became larger following the decline in warfare so that more labour was required to maintain them (Boyd 1981:92; Sorenson 1972). On the other hand travelling to gardens, primarily a woman's activity, has evidently become more time consuming as people have increasingly begun to make and use gardens in areas hitherto considered too distant from the village for adequate protection from enemy attack⁽³⁾. Likewise the transfer of pigs at the administration's request to shelters outside the village meant that feeding them, a task also allocated to women, could now involve quite a long journey. However both sexes say that since pigs ceased to be kept in residential houses women have tended to feed them less frequently.

The impact of wage labour and cash cropping on labour for subsistence has been less marked than in many other parts of the Eastern Highlands (e.g. Boyd 1981; Hayano 1979). When Ommura first became involved in the Highlands Labour Scheme some married and marriageable men were recruited for work on coastal plantations. However in Yonura most of those who have undertaken such work have been young bachelors, a category whom Ommura have traditionally expected to devote themselves to military rather than subsistence activities. Only one man with a wife resident in the village was absent from

Yonura for wage labour during the fieldwork period.

While my general observations indicate that Ommura wives devote significantly more time than their husbands to subsistence horticulture and pig raising it is also true, as Modjeska stresses, that a large part of the time Highlands men spend on garden work is devoted to the 'especially hard labour' of felling trees, fencing and ditching (1982:71-2). Moreover he points out (1982:165n) that much of the time Highlands men spend on political activities and other public affairs may be regarded as (re)productive labour - a view with which Ommura people would agree. Modjeska has also assembled data suggesting that generally in the Highlands the 'higher the level of pig production the more the division of labour tips the balance toward a heavier work-load for women' (1982:72; cf. Keezing 1982:21). This hypothesis would seem to be supported in the case of Ommura with its relatively low pig production by Highlands standards.

Coffee production

Since the early 1970s Ommura have planted as a cash crop arabica coffee plants supplied to them by agricultural extension officers. The first trees began to bear around 1974. In this area coffee production does not ordinarily involve co-operation beyond the unit of a married couple and their dependents. By 1976 no one in Yonura had yet adopted the practice found in some parts of the Highlands of employing children or adults to assist with coffee harvesting.

Ommura have so far paid minimal attention to the weeding and tending of coffee gardens and the main labour involved in coffee production is in picking the berries and pulping, fermenting and washing them, activities which take place mainly between May and August. During fieldwork the scale of coffee production in Yonura was still sufficiently small for all villagers to be able to pulp their coffee berries with the two hand-operated machines supplied to the village by the Local Government Council.

As yet the sexual division of labour in coffee production is not marked by Highlands standards. Planting coffee has not, as in some other parts of the Highlands, been defined as primarily men's activity (Hayano 1979:44; Hays 1974:93; Strathern, A. 1982:312). The first coffee seedlings were planted by men, women and children, often on land waiting to be fallowed. The task of washing the pulped and fermented beans and laying them out to dry has been mainly although not exclusively done by women. However all other aspects of coffee production are regularly undertaken by people of both sexes as well as by children. I did not attempt to measure precisely time spent on this crop. However it is my strong impression that women did not, as they apparently do in some parts of the Highlands, tend to spend markedly more time than men on coffee related work (Hayano 1979:44; Josephides 1985:117). While different couples and families varied in the way in which they divided up the labour of coffee production, husbands and wives were typically to be seen harvesting and processing their crop together.

It has been estimated for some parts of the Highlands that, particularly during periods of high coffee prices, inputs into coffee production have reduced the time allocated to subsistence activities during the coffee flush or increased seasonality in subsistence production (Grossman 1984:207-218, 235-6). During the peak of the 1976 coffee season there was a visible tendency for Yonura women and men to give coffee processing priority over their usual subsistence activities just before a coffee buying truck was expected in the village. However with coffee production in the area still on a relatively small scale cash cropping has not so far made a marked impact on Ommura people's subsistence activities⁽⁴⁾.

As already indicated cash earning activities other than coffee production have so far been undertaken only by men. In Yonura at least women have not, as elsewhere in the Highlands, been involved in wage labour (e.g.

Josephides 1985:117) or in regular vegetable marketing (e.g. Sexton 1984).

Public activities

Women and men alike maintain that it is exclusively 'men's work' to settle disputes, plan and conduct warfare, and make most of the decisions regarding the timing, organisation and staging of events involving the village as a whole.

The most elaborate public ceremonies are associated with healing, male initiation and crop and pig fertility (Johnson 1980). These, like warfare, are represented as being the collective 'work' of the village's men. In some Highlands societies transacting in the sphere of ceremonial exchange is 'the political activity of men par excellence, and one which most sharply defines maleness in contrast with femaleness, as well as being the means by which men make their names' (Josephides, 1985:220; cf. Strathern, M. 1972). In Ommura it is warfare that has traditionally occupied this kind of position. Inter-group fighting and conducting healing and fertility rites are even today the activities that are most closely linked with public prestige. In this part of the Southern Tairora region there is little in the way of orderly, peaceful competition between political groups or large scale ceremonial exchanges or pig feasts. Influential men were noted for their military skills rather than for control over wealth.

Yonura men regard the timing and organisation of public ceremonies as having important implications for defence. They stress that even today such events provide an excellent opportunity for the enemy to catch the village's men off guard and that careful planning is required to ensure that they occur at times when enemy attack is relatively unlikely.

Women are not without their own spheres of collective or 'semi-public' responsibility. These include assisting at births, the treatment of some women's reproductive disorders and certain stages of female initiation.

Not only are these all 'women only' events, they are also small in scale in comparison with the public healing ceremonies and initiation rites organised by men. They do not generally involve more than five or six women. Moreover, as elsewhere in the Southern Tairora region, men are formally responsible for decisions regarding the timing and allocation of resources for female initiation ceremonies and play an important role in instructing the female novices (Hays, T. & P. 1982; Johnson 1980).

We have seen how during battle women carried supplies for the warriors and sang to cheer them on. They were, however, rigorously excluded from military plans and had little opportunity to act as go-betweens. Their formal role during large scale public ceremonies is similar. They are expected to sing songs extolling male strength and prowess, an activity represented by both sexes as 'helping' the men to conduct the ceremony well by boosting their confidence in their masculine powers, and also as preventing women from overhearing men's 'secrets'. On public occasions women often receive formal praise for having 'helped' male participants by working hard to produce the pigs and/or vegetables required for the occasion.

I discussed earlier the way in which elsewhere in the Highlands women's formal exclusion from group affairs is validated by their definition as peripheral to a group that emphasises agnatic idioms in conceptualising its unity. In Ommura people of both sexes tend to invoke notions about women's relative lack of strength (kyapukya) to justify or explain the fact that they do not participate in village affairs on the same level as men. Much cultural weight is placed, as will be seen, on the notion that only men are capable of mustering the strength necessary for conducting warfare or public ceremonies. It is my impression that women's perceptions of the extent to which they influence village affairs is not markedly different from men's (cf. Feil 1978).

Control over the allocation of pigs is not so closely linked with

power and prestige as in Highlands societies where success in ceremonial exchange is emphasised (cf. Godelier 1986; Herdt 1982:52n). Nevertheless it is worth noting here that men's formal responsibility for many aspects of public affairs has significant implications as regards control over the disposal of the pigs reared jointly by a husband and his wife.

The couple who raise a pig are (except in the occasional case of agistment) spoken of as its 'mother' (garra nrova) and 'father' (garra ova). This usage indicates a broad type of relationship to property resembling that referred to by Salisbury in his analysis of Siane property rights as ownership of 'personalty', or personal property over which the owner has formal rights of disposition (1962:61-76)⁽⁵⁾. In Ommura, as among Siane, rights of this general kind may be contrasted to rights of 'trusteeship' over items such as land the 'absolute title to which is invested in a corporation that exists perpetually' (Salisbury 1962:66). In practice the individual's formal rights over either type of property are often restricted by the rights and desires of others (cf. Salisbury 1962:66; Sexton 1984:137).

While both spouses have acknowledged rights regarding allocation of their pigs there are many contexts in which a husband can claim superior rights⁽⁶⁾. Work in connection with an object renders possible a claim that one is its 'mother' or 'father', that is that it is one's personal property in the sense just specified (cf. Salisbury 1962:62; Modjeska 1982:70). A wife's claim to have a say in the disposal of pigs jointly reared by herself and her husband rest on her labour in tending them. Elsewhere in the Highlands women's labour in pig production can be elaborately obscured by 'mystifying...transactions' (Modjeska 1982:96). Among Kewa, for instance a pig is likely to be constantly moved from one household to another being sold, loaned or agisted. Josephides characterises such exchanges as 'smokescreens, concealing the labour that goes into the care of pigs which are in transit' (1985:208). Such transactions are not an important feature

of Ommura life. However a husband can claim that because he participates in pig fertility rites performed collectively by the village's men his contribution to the production of the pigs he rears with his wife is 'greater' than hers. Men stress that their wives' work in tending pigs is dependent on men's prior work in performing ceremonies to keep at bay harmful forces that cause the animals to die.

The fact that men are the primary actors and acknowledged decision makers in the main spheres in which pigs are used provides additional grounds for a husband to claim superior rights to his wife over the allocation of particular animals. Pigs are rarely used for domestic consumption. They are reserved mainly for use in bridewealth, healing rites, compensation payments and life-cycle ceremonies, especially male initiation rites which are the only occasions on which more than one or two pigs are likely to be consumed or exchanged (Johnson 1980)⁽⁷⁾. Women often told me that while they might object when their husbands decided to use pigs for initiation or healing ceremonies, ultimately they would 'listen' because they knew that such ceremonies were 'men's work'⁽⁸⁾. In certain contexts men other than its 'father' may play an important role in deciding how a pig should be used, as for example when those active in settling a dispute decide that a pig should be given as compensation for some offence or when men in an assochia healing ceremony confirm that the patient should undergo further treatment which requires killing a pig. Similarly while cash can be owned by people of both sexes men can claim ultimate control over its allocation on the grounds that they are ultimately responsible for making decisions regarding the initiation and marriage prestations for which Ommura use most of their cash (Johnson 1980).

Also significant in this context is the fact that killing pigs is defined as an exclusively male activity. Ommura normally use butchered rather than live pigs for ceremonial purposes. As elsewhere in the Tairora

speaking area the animals are shot with bows and arrows rather than clubbed (Watson 1983:36). A pig slaughter is often a public event in which large numbers of male and female villagers assemble to watch the spectacle and sing special pig killing songs (garra ihi).

In Ommura, unlike many other parts of the Highlands, men have shown no sign of abandoning their major public ritual activities. However the decline in warfare has had a marked impact on the nature of men's participation in public affairs. Both sexes represent the threat of enemy attack as being a very real one and men continue to manufacture weapons, discuss defence strategies and actively maintain military solidarity during sessions in the men's houses. Nevertheless the time spent on military activities has significantly decreased. One visible change is the fact that men have abandoned the practice, reported for various parts of the Tairora speaking area, of protecting wives and female relatives against enemy attack by accompanying them to the gardens and standing near them while they worked (Grossman 1984:152; Watson 1983:48).

Some of the time gained by men as a result of decline in warfare was taken up by wage labour, cash cropping and probably a relatively small increase in their time spent on subsistence garden work. Moreover, as will be seen, the recent introduction of the assochia healing ceremony seems to have involved an overall elaboration of men's public healing activities. It will be apparent that pacification has not, as in some parts of the Highlands, been followed by an efflorescence of ceremonial exchange activities (e.g. Salisbury 1962:118-9; Strathern, A. 1971).

In his study of 'production and inequality' in 'central New Guinea' Modjeska describes the social division of labour as effectively defining 'men as potentially independent and women as necessarily dependent' (1982: 62). Among the Duna and other Highlanders:

although...men harvest and cook for themselves and can perform all other tasks necessary for their existence and comfort, women are considered incapable of clearing gardens, building houses, killing pigs

and making fire. Nor can they defend themselves in warfare or enter into relations with the supernatural (Modjeska 1982:62).

Clearly in Ommura men's monopoly over the use of weapons and active participation in warfare has been a powerful constraint on female independence as has the fact that women are generally defined as incapable of making gardens without male assistance. In this region women have frequently been the victims of enemy attack and before pacification it was considered unsafe for them to garden without male protection. Ommura women clear grasslands and garden plots on their own. Moreover they are defined as lacking the strength necessary for using axes or climbing trees and hence for clearing plots covered in heavy fallow or making the fences regarded as essential for most gardens. Nor are they considered capable of digging the garden drainage ditches felt to be necessary for many kinds of site. Moreover in the context of certain healing and crop fertility rites it is emphasised that women depend on the rites for their survival but lack the strength to perform them themselves.

PROTECTORŚ AND NURTURERS

When asked about the kinds of work (kyayha) that people do, men and women tended to respond by mentioning women's activities relating to the production and preparation of food and men's military and ceremonial ones. It seems that the same term, kyayha, has been used traditionally in Ommura to refer to productive labour (gardening, pig rearing etc) and also to negotiation sessions concerning public affairs, and that this kind of usage has not (like similar usages elsewhere in the Highlands) been based on the Melanesian Pidgin notion of wok (cf. Josephides 1985:135). In Ommura tending pigs and breast feeding are defined as kyayha and so are practical gardening and pig rearing activities whether done by men or women. While there is in addition a special term (ua nakyakya) for participating in discussions and planning sessions concerning military, ceremonial and other

public affairs men stress that this is also work (kyayha) because it involves the expenditure of time and effort on an activity that is important for the survival or welfare of the community.

Underlying Ommura people's descriptions of the work done by men and women is a broad contrast between men as people who protect the village community against the forces that perpetually threaten the lives of its members and women as people who feed, tend or generally nurture pigs, crops, children and men. A middle aged man told a group of children:

You mustn't say bad words to adult men and women. Our women hurt their hands doing work (kyayha) in the gardens to grow food to make you children grow big. Our men do great work (kyayha nronra) to kill people from other villages who try to shoot us and to chase away the bad things (uahi haikye) that try to make us sick.

When I asked a young married woman whether women could perform assochia she replied:

No. Men chase away the things that make us sick. Women grow food for their husbands and children.

People of both sexes stress ways in which those activities that are exclusively performed by men involve protecting the community against external threats. Crop and pig fertility rites as well as warfare are represented as processes aimed at exerting control over or vanquishing life-threatening forces. Fertility ceremonies are seen less as procedures for positively encouraging growth than as processes of 'chasing away', 'attacking' or 'killing' the damaging substances that it is taken for granted have been put onto the growing crops by current enemies, with the aim of harming people who eat them. They also involve episodes in which, on analogy with looting and raiding in war, the men who perform them symbolically 'pull' or 'steal' crops from other villages. The healing ceremonies men perform are similarly permeated with military imagery. The afflicting agent is 'chased away' or 'shot', and so on. Conducting male initiation ceremonies and settling disputes are described as activities aimed at protecting the community from its enemies through imparting martial skills to young men and preventing the military

strength and solidarity of the village from being weakened by internal tensions. Even men's gardening tasks are represented as making a contribution to maintaining village solidarity in the face of external threats. Men stress that through building and maintaining garden fences they prevent the quarreling that can arise between male co-villagers over damage to crops by marauding pigs or the shooting of such pigs by angry garden owners.

As I have observed there is much cultural emphasis on the notion that women's work in tending crops and pigs is only one stage in the production of these resources and one which depends on prior tasks performed by men. People of both sexes agree that women's productive work would be in vain if men did not perform fertility rites to keep at bay the harmful forces that constantly threaten the food supply. In this sense women are characterised as nurturers of pigs and vegetables rather than as people who are primarily responsible for producing them.

The protecting/nurturing contrast colours descriptions of the 'work' of bringing up the next generation. Women, it will be recalled, are characterised as people who nurture their own offspring and other village children with breast milk and the vegetables that they tend. Men stress the importance of their work vanquishing life-threatening forces in enabling the young to reach maturity.

The view of men as protecting the community and of women as nurturing crops, pigs and humans is integral to dominant stereotypes of masculinity and femininity. Mythical figures who turn into plants tend to be identified as male or female according to whether they pick up the digging sticks or bows and arrows that are placed before them, and in origin myths the first men are given bows and arrows. Men are supposed to feel shame (kiaunrinro) if they walk around unarmed, as are married women who leave their houses without string bags for transporting food, babies and piglets. The instruction given at male initiation ceremonies emphasises the

importance of acquiring military skills, being courageous in the face of the enemy and maintaining the military strength of the village by avoiding conflict with male co-villagers (Johnson 1980). During female initiation the instruction concerns mainly the importance of becoming a good gardener and feeding one's husband properly. According to people of both sexes the qualities that women find most attractive in men are strength and military prowess while for a woman skill and industry at gardening is the most valued quality (cf. Watson 1973:244). As Apaia, a middle aged man put it:

We want women who work hard to plant food (kierahondi). It is of no consequence whether their bones and faces are good or bad.

GENDER STEREOTYPING AND THE QUESTION OF STRENGTH (KYAPUKYA)

Men's and women's activities are seen as requiring different attributes and capabilities and are not evaluated equally. Of particular significance for understanding the management of illness is the way in which definitions of men's and women's work reflect and reinforce the image of men as the stronger sex and as ultimately responsible for the life, health and survival of the village community.

Both sexes maintain that men are better endowed than women with kya-pukya, which I gloss as 'strength'. In mythology and everyday life items regarded as especially kyapukya are associated with masculinity (e.g. rocks, stone and steel axes, mountains and hardwood trees). Men's personal names are commonly based on terms for 'strong' items (e.g. Orive, from ori = stone) whereas women are often named after 'soft' edible items (e.g. Aparamau = ripe sweet potato of the apara variety). As elsewhere in the Highlands one finds the notion that contact with women or feminine things can weaken men since women lack strength (cf. Strathern, M. 1972:164). I referred earlier to the belief that men can be weakened by spending time in 'feminine' zones such as gardens. While Ommura culture stresses that

men's activities generally require greater strength than women's, the view of men as the stronger sex is integrally bound up with their image as protectors of the community especially against military enemies.

From a male perspective kyapukya is the most admirable of personal qualities. Women talk less than men about how the sexes differ in terms of social worth. However they often concur with assertions that men in general are superior to them because they are more kyapukya. It is my impression, though, that for women statements about their lack of strength do not carry such strong connotations of feminine inferiority as they do for men, and that women place more value than men do on qualities such as perseverance and industry that are not particularly associated with one sex (Mayer, in press). While I focus here on the use of the kyapukya idiom in differentiating men from women it is also important in ranking individuals of the same gender, especially men (Ortner and Whitehead 1981:16-17).

When asked what kind of people manifested great kyapukya both sexes typically answered 'all men do' or 'men who are strong at fighting'. Military activities are seen as requiring a particularly marked degree of kyapukya insofar as they involve risk to life and the exercise of physical, mystical and psychological powers (to use distinctions that, as will be seen, do not have precise Ommura equivalents). Besides physical strength, endurance, stamina and skill with weapons a good warrior has the ability to perform powerful war magic and the vigilance and cunning necessary for outwitting the enemy. He also has courage. To describe someone as having considerable kyapukya is to imply that they are brave and fearless⁽⁹⁾, that they will fight to the last without showing 'fear' (atu hiro) in the face of the enemy or flinching at the sight of blood spilt in battle. A man regarded as showing physical prowess or stamina but also as generally fearful or cowardly would not be said to manifest great

kyapukya. Moreover there is an underlying notion that someone's physical prowess can actually be increased by boosting his courage or confidence. We have seen how raising warriors' morale is said to improve their performance on the battle field and how women's songs praising male prowess are supposed to 'help' men to succeed in physically arduous public activities.

Great kyapukya also manifests itself in the ability to control life-threatening forces through healing and crop fertility rites. While these activities involve controlling mystical or extrasensory forces or influencing humans through mystical means men stress that they are also physically demanding. This reflects the fact that assessments of the physical arduousness of any activity have an important bearing on how it is evaluated. Thus women are regaled with tales of how men could 'break all their teeth and burn their mouths' chewing the tree bark used in assochia healing ceremonies, and of the dangers faced by men on trips to the forest to obtain plant substances necessary for fertility and therapeutic rites.

Certain activities are described as requiring a significant degree of kyapukya simply because they are so physically arduous, a notion often expressed by referring to the way in which they lead to aches and pains or to the body or forehead becoming covered in sweat. While men point to the special arduousness of tasks such as felling trees that involve concentrated physical effort, gardening for long periods is also described by both sexes as being physically demanding and requiring a marked degree of kyapukya. The capabilities associated with culturally prestigious 'men's activities' appear as less sharply distinguished from those associated with women's productive work than among some Highlands groups that emphasise ceremonial exchange, a type of activity requiring oratorical talents and persuasiveness rather than the physical

prowess necessary for military success (cf. Strathern, A. 1982:308-9; Strathern, M. 1972:135-6).

Women may be said to manifest kyapukya when they carry heavy loads of vegetables or work for long hours clearing or tending gardens. However it is strongly emphasised that no woman could ever muster the high degree of kyapukya necessary for engaging in military activities or conducting healing and crop fertility rites. As men pass middle age their magical and healing as well as fighting powers are considered to decline. Yet people of both sexes maintain that because they have passed through male initiation even the oldest men have more kyapukya than any woman. During a male initiation ceremony the novices were told that the pig's tusks they must henceforth wear as nose ornaments indicating their adult status were to show the enemy that they were kyapukya, not like women who flee when they see blood spilt in battle.

In certain contexts Ommura distinguish between the use of kyapukya for socially productive ends and for antisocial ones. I often heard stories, for instance, about exceptionally kyapukya men who lived before pacification and employed their considerable powers against their co-villagers as well as enemies. Knowing that their extraordinary strength would deter attempts at punishment or retaliation they regularly (so it is said) committed adultery with neighbours' wives and killed co-villagers who happened to annoy them. While they are spoken of as 'bad' (uahi) (cf. Watson 1973:267) such 'badness' seems not to detract from the intense admiration with which they are regarded. One is reminded of Matoto the legendary Northern Tairora leader described by Watson as the ideal embodiment of the 'Tairora masculine ethic'. Such a man:

transcends many of the usual restrictions of life since, if he is strong, this is one of the principal ways to demonstrate it. Others do not control a strong man or manage his affairs by holding him to standard prudence or propriety (Watson 1973:267-8).

Kyapukya, then, may be regarded with a certain admiration whether it is considered to be exercised for socially productive or antisocial ends. One does not find the kind of emphasis on distinguishing prestige from strength or power as, say, in Hagen where women who threaten men with menstrual pollution or little men who threaten big ones with poison may be characterised as exercising strength but in a manner typical of 'rubbish' or unimportant people (Strathern, M. 1978:191-4).

Along with strength Ommura men stress the high degree of co-operation necessary for successfully protecting the community. It will be recalled that warfare and healing and fertility rites are represented as involving all or most of the village's men even though only some may participate directly. Women and men maintain that only men are capable of combining and co-operating on this scale, a notion often expressed through assertions that the village's men 'sing well together' while women are incapable of singing harmoniously even in groups of only two or three.

Men emphasise, particularly on public occasions, that survival depends on the village's men collectively exercising their masculine powers to protect the community. Women question the extent to which men's work really involves more strength than theirs. Ultimately, however, they seem to accept that their work would be in vain and their survival unlikely if men did not devote themselves to keeping the enemy at bay and conducting healing and crop fertility rites. An elderly woman told some girls assembled for an initiation ceremony:

If men weren't always ready to fight the enemy their wives and children would all be dead and all the food and pigs would be stolen [in enemy raids]. What would wives have to eat? If husbands didn't perform amamata and ovamata [sweet potato and yam fertility rites] where would we get food from? All the vegetables would die from...the bad things (uahi haikye) put on them by the enemy. If men didn't perform vuha and uaha [healing ceremonies] who would remove the sickness from their wives?

Similarly when women intervene or talk noisily during disputes or public ceremonies women as well as men are likely to chastise them for

interfering with the 'great work' that men are doing to control life-threatening forces or to ensure that the village is not weakened in the face of its enemies.

Men sometimes deny any reciprocal dependence on women's work. When my neighbour's wife failed to deliver his meal he reminded her that he could provide his own food whereas she would perish if he did not work hard to conduct sweet potato fertility rites and assochia healing ceremonies. In other contexts men and women emphasise that for men to be able to exercise their characteristic powers against the forces that threaten survival it is essential that their wives devote themselves to tending gardens, work that is weakening to men as well as time consuming. In myths whole villages perish because they are short not only of men to protect them but of women or wives to grow food for sustenance and to tend the pigs needed for life saving healing rituals. During a vuha healing ceremony Tato, a middle aged man, warned the women present:

If you women carry on like this and don't look after pigs properly so that you only have children what will we do if we are sick? Will you kill your children and give them to us to perform vuha with?

CHALLENGES TO THE IMAGE OF MEN AS STRONG PROTECTORS OF THE COMMUNITY

While generally speaking Ommura men and women have agreed in representing men as the stronger sex and as doing work that is both more arduous than women's and necessary for survival, these notions seem always to have been more consistently affirmed in some contexts than in others. Now the suppression of war has exacerbated existing doubts regarding this definition of masculinity.

Women's alleged powers to harm their husbands' health with menstrual blood (chapter 6) would seem to indicate a traditional perception that in certain contexts women can, in a sense, be more kyapukya than men. In Yonura a man who mentions publicly that his wife has harmed his health in

this way may be told by other men as well as women to 'shut up or the women will say that men have no kyapukya'. Men insult or tease each other with statements like: 'You are so weak that your wife will always make you ill'.

The effects of pacification on the definition of men's work have provided a new focus for questioning but I was told that even before the decline in war women used sometimes to complain that their husbands' military activities involved 'just standing around' in gardens looking out for the enemy and watching their wives do the strenuous garden work.

Yonura men revealed a sense that pacification has deprived them of the main arena in which they used to demonstrate their physical courage, strength and protective powers. Before an assochia ceremony, Apaia, a middle aged man, observed to his companions:

Women see that we just sit in the men's house. So they say that we are just trying to deceive them (kumani) when we say that we work hard to kill the bad things (uahi haikye) that try to kill our people. Now that women don't see us making the numuna feathers on our shields quiver they say that we are like women [i.e. lacking in kyapukya. Numuna feathers are used to decorate shields for battle] ...Now that we don't take our wives arrows that we have pulled out of the enemies' bellies they say that we just sit in the men's house for no reason (ati) while they hurt their hands planting food... Some men hear their wives say these rubbish things and think that they are talking truly. If men listen when women say that they are like flying foxes' wings [i.e. bony and frail]. How can they kill the strong things that try to kill our people?

As Apaia's speech indicates questioning of masculine strength is regarded as a threat not only to collective male prestige but also to men's confidence and hence to their powers to protect the community.

Men's concern appears the deeper in that even their acknowledged monopoly of the kyapukya necessary to conduct warfare and healing and crop fertility rites is perceived as resting on a somewhat precarious basis. The ability to perform such tasks, like most attributes and capabilities usually described as categorically masculine, is sometimes represented as neither innate nor the product of lengthy training but acquired through

the process of being initiated and regularly attending male initiation ceremonies. In principle then it could be transmitted to women. One reason given for the prohibition against women hearing or seeing certain stages of male initiation is that, as one woman put it, if it were lifted 'Women would learn men's secrets (uakyera) and start to do men's work, and then husbands and wives would fight and kill each other'. A theme regularly stressed in male initiation ceremonies is that women might, inadvertently or intentionally, acquire the capacity to perform men's work and so become completely uncontrollable and dangerous to men.

I never heard anyone clearly suggest that the forcible way in which the administration had imposed pacification had raised further questions regarding Yonura men's strength and power to protect. It may be noted that Ommura men have an established pattern of rationalising defeat by an enemy without sacrificing the image of themselves as strong protectors. They tend to emphasise how powerful the opposing forces were, and how strong they must be themselves to have stood up to them in the way that they have. They also dehumanise the concept of an attacking force so that, as in the case of illness from powerful wera forces, capitulation to the powerful force 'administration' does not seriously indicate lack of strength. At the same time, such attitudes may, as I suggested earlier, be interpreted as containing an element of bravado.

Yonura women had their own perceptions of the changed demands being made on men's strength relatively to women's. A common remark was that while men's skin used always to be 'broken' from war wounds now they 'just sit and talk about fighting', so that only women have 'broken' skin from heavy and laborious garden work. While not contesting that men still need strength for activities like felling trees and conducting healing ceremonies, women would emphasise to me that these tasks are only sporadic whereas wives work in their gardens 'all day' so that their foreheads are

'always covered in sweat'. Wives also grumble that their own skin is constantly 'covered in dirt' from gardening and lack of time to wash while, since pacification, their husbands' skin has been 'smooth because they no longer rub tumu (black war paint) on it but just sit around washing their legs with soap'. Men are sometimes accused of spending time previously occupied with military activities 'just sitting in the village doing nothing and finishing up the food that your wives work hard all day to plant'. An aggrieved young wife told her husband: 'You say your hand is like iron but what do you do with it other than rub soap on your legs while my hands and head hurt from digging in the ground all day and carrying heavy bags of food.'

We have seen how Yonura people still feel under threat of military attack and how men emphasise the need to maintain a powerful village fighting force. Chapter 10 considers how assochia healing ceremonies have been made use of for reaffirming notions about men's superior strength and their major contribution to survival, in the face of current questioning from both sexes in the wake of pacification. The decline in the importance of men's military activities is seen in such contexts as counterbalanced by an increase in the importance of their public healing activities. It is stressed that threats to health from sorcery have increased so that men are having to put more effort than previously into preventing illness, and to employ more powerful therapeutic techniques.

The decline in warfare seems to have enhanced men's anxieties not only about their collective prestige and standing vis à vis women but also about husbands' control of wives individually. While appreciating the industry of particular women people of both sexes evoke stereotypes of women as inherently lazy (oitai) and men have traditionally represented themselves as having to strive to ensure that their wives do not neglect their work in food and pig production. As elsewhere in the Highlands the threat of female non co-operation is a recurrent theme in myth and ritual

Hays, T. & P. 1982; Josephides 1985:137-8; Lindenbaum 1976). In one version of the 'wild yam woman' (kioparanrahesi) myth told at male and female initiation ceremonies two brothers create a woman out of a wild yam (kio-pará) using arrows and stone razors. They both marry her and she plants, tends and cooks vegetables for them while they hunt and keep the enemy at bay. However one day she turns back into a wild yam and returns to the bush from whence she originated leaving her husbands to starve because they cannot simultaneously fight the enemy and produce food.

A man who considers his wife to be neglecting her productive work is likely to see her as jeopardising his health as well as depriving him of sustenance. Men express fears about becoming physically weakened should they be forced by their wives' laziness to do more garden work themselves. They stress that if wives neglect pigs there will be none to kill for vuha healing ceremonies in the event of illness. An Ommura man's prestige is not so closely bound up with his wife's labour in pig (and hence sweet potato) production among Highlands groups who emphasise success in ceremonial exchange (cf. Godelier 1986). However at certain stages of his life he needs pigs to adequately discharge social obligations. Ommura stress that a man who fails to deliver adequate pork prestations to his wife's kin risks angering them and causing tension that may threaten the military solidarity of the village.

Watson has emphasised the extent to which pig husbandry among Northern Tairora constitutes a 'high risk business' (1983:58). Similarly in Yonura, where it is uncommon for a couple to own more than one large pig at a time, loss of an animal can be very awkward. A man whose pig dies, runs away or is shot for spoiling gardens is likely to attribute the disaster to his wife's negligence in failing to feed the animal properly and thus causing it to die of starvation or seek food elsewhere.

In speeches on public occasions men represent female 'laziness' as a threat to the welfare of the community as a whole, as well as to individual

husbands, since if the men were forced to spend more time gardening they would have insufficient strength or time to adequately control the forces that cause sickness and death. Women sometimes voice similar attitudes. During a female initiation ceremony Punrai, a middle aged woman, warned the novice and her associates that women had become so lazy that unless they mended their ways the whole village would soon suffer and men would have to prepare food rather than protect their wives.

The following observation from Natao of Sonura hamlet was triggered by news of the death through illness of a pig tended by his brother's wife:

When men get married they give pigs to their wives' brothers but when they ask their wives 'Where are the pigs we asked you to look after?' these women are shamed because they haven't looked after the animals properly. They say that because they don't see the enemy coming here any more they needn't listen when we [husbands] say 'Feed our pigs every day'....Men break their teeth chewing assochia bark so that they can chase away the things that make women sick. But because women no longer see us killing many men from other villages they say men are nothing (ati). They say that because we just sit in the men's houses and don't come out with our bows drawn they don't need to listen when we tell them to look after pigs and plant food that grows large. Then when these pigs die and we tell women they are lazy...they get angry.

Men regularly express fears that wives are losing respect for their husbands and beginning to question their dependence on them with the result that they increasingly refuse to 'listen' when told to work hard. Such worries link up with a sense that wives are now 'angrier' (inronra hita) than before if they think their husbands are neglecting their marital obligations in regard to production, such as preparing gardens or maintaining fences. Wives grumble that their work is excessively laborious because their husbands are insufficiently conscientious about removing boulders and tree stumps from garden sites. Such accusations are voiced when a man criticizes his wife for not producing enough vegetables or when a marauding pig has increased a woman's work load by breaking through a garden fence and destroying her produce.

Traditionally women were supposed to accept that it was sometimes necessary for their husbands to neglect their share of labour in order to defend the village community. Some still do, as in this remark made to me by Antuao, a young wife:

Sometimes we are 'angry' (*inronra hita*) if our husbands don't help us by clearing gardens and sit in the men's house instead. But it is wrong (*unrasi*) for us to be 'angry' every time they behave in this way because they are strong and are working hard to keep the enemy away.

However men and women say that such acceptance has become rarer and that it is becoming increasingly common for wives to refuse to cook for husbands whom they accuse of neglecting their marital obligations.

THE TWO PARADIGMS OF MALE/FEMALE DISTINCTIONS

As chapter 10 shows it was not uncommon in Yonura for a sickness to be attributed to quite different causes by the same people and at much the same stage in its development. As I became more familiar with Ommura culture, it began to emerge that much of this apparent inconsistency was in fact the outcome of systematic adherence to conventions in terms of which particular diagnoses or modes of explaining illness are not regarded as appropriate to certain types of situation. These conventions are one manifestation of a broader convention which requires different images of men and women to be articulated or projected in different kinds of context. The remainder of this chapter considers these tacit rules and the different motives that men and women have for upholding them.

Both sexes seem generally to take for granted that men have to protect the community and that its survival depends ultimately on their employing their characteristic powers to control the harmful forces that threaten the health, well-being and lives of its members. However, this axiom and the images of masculinity and femininity it entails are far more consistently articulated in some kinds of context than in others.

In most domestic and everyday contexts, where men are acting individually or in their capacity as husbands, their powers and their contribution to survival are projected as being only marginally greater than women's and their claims to privileges vis à vis their wives consequently appear as precarious and perpetually open to challenge. By contrast the conventions that govern public gatherings of village people stress the notion that men collectively have virtually complete power over life-threatening forces, while women in general are portrayed as much weaker and as making a relatively unimportant contribution to survival. Thus it is considered improper on public occasions to refer to defeats suffered in war, to military successes of enemy villages or to illnesses that wives can give husbands through contact with their menstrual blood, whereas such topics are commonly raised in informal conversation or at male initiation ceremonies where no women are allowed.

It is quite striking to observe the switch of emphasis that occurs on public occasions when the village's men are seen to be collectively employing their kyapukya for the benefit of the community: large scale healing and fertility rites, public episodes of male initiation and emergency gatherings formed in response to warnings that sorcerers are in the vicinity. Here the emphasis is on the collective strength of men in general and differences between individual men are not stressed. The initiated men stand or sit together with women, girls and uninitiated males in a semicircle around them, an arrangement that reinforces the perception that the men are officiating while the women and youth are spectators and helpers. As the accounts of healing ceremonies will show a woman who attempts to take an active part in the proceedings is liable to be told by women as well as men to 'shut up and let the men do their work'.

Whatever the ostensible purpose of the gathering, men tend to use these public occasions as a forum for normative and ideological pronouncements. In particular they take the opportunity to hold forth rhetorically

on how strong and invincible, how much like tall, hard arepa trees the men of the village are, giving graphic, blow-by-blow accounts of outstanding victories they have achieved in war and describing in vivid terms the extraordinary potency of sorcery substances and illness causing agents they have managed to 'kill'. They stress repeatedly how much stronger men are than women. Often they perform mimes in which women 'squeal like pigs' and run away at the sight of the approaching enemy while men 'stand with very strong legs', terrify the attacker with their war cries and 'shoot very straight right into the eyes of the enemy'. Thus the whole occasion underscores the idea that no woman could ever muster the kind of strength men exercise when they conduct warfare and healing and crop fertility ceremonies.

During public gatherings of village people the occasional reference to military defeat, to the existence of sorcery too powerful for Yonura men to overcome or to women's powers to harm their husbands with menstrual blood constitutes a serious breach of etiquette and is likely to be passed over in disapproving silence. On the few public occasions in my experience when a man did claim that his wife had made him ill he was angrily silenced by people of both sexes and told that he had brought 'shame' (kiaunrinro) on his fellow men by mentioning such a subject 'when all the men and women are here'.

The proceedings are generally interspersed with statements by men to the effect that women would be 'dead' if it were not for men's healing activities, and that wives' garden work would be in vain if their husbands did not employ their characteristic powers to protect the crops from destructive forces. During healing ceremonies and public gatherings formed to discuss suspected sorcery attacks it is often claimed that sorcery is directed mainly at the men of the community because, as one man put it, 'the enemy knows that without men's work our women, children and pigs would just die'.

The decline in the frequency of warfare tends to be situationally denied. During public gatherings men sometimes talk as if the danger of war attack were as great as ever and men were still actively and continuously engaged in military defence. They make impassioned speeches about military threats currently posed by neighbouring villages and boast about the hard and perilous work they do to protect the community against such dangers. In this type of context they do not voice their fears about pacification having exacerbated women's laziness.

In the village forum it is the men who take the more active role in creating and maintaining the image of themselves as strong protectors of the community. They make the speeches and perform the mimes which represent men as being extremely kyapukya and collectively responsible for survival. They also take most of the initiative in ensuring that any reference to facts perceived as inconsistent with this definition of masculinity is suppressed. In other contexts women often challenge assertions of male strength and superiority and taunt men with jokes about their weakness but here they echo men's boasts with cries of 'You speak truly' (utama utira). They also follow men's lead in shouting down any references to male weakness whether concerning women's powers to harm men's health through contact with menstrual blood or the presence of illness causing forces that are too powerful for the village's men to control.

Men explicitly treat such public occasions as an arena in which they must strive to impress on women in a particularly forceful and flamboyant way the image of themselves as strong people on whom survival depends. Before and during healing and crop fertility ceremonies it is customary for men to remind each other how crucial it is that they should not behave 'like women' (i.e. in a manner indicating weakness) but should demonstrate to women how kyapukya men are and what arduous work they do to protect the life and well-being of the villagers. Men see these dramatic assertions

of male strength as a means of reinforcing not only their male prestige but also their confidence in their own powers and hence their ability to protect the community against life-threatening forces. Also they regard women's sense of dependence on strong male protection as a crucial corrective to wives' tendency to neglect their work, a tendency seen to have implications for the public good as well as for the interests of individual husbands. During an ievati male initiation ceremony the novices and their peers were advised that if they wished to ensure that their future wives were not lazy they would have to learn to show the women how strong men were by performing uaha and assochia healing ceremonies.

Ommura notions about differences between male and female strength may be seen as an important element in a set of arrangements that allocates to men collectively a monopoly over the most culturally prestigious activities including key roles in public affairs, and at the same time gives them individually certain privileges in domestic and marital contexts, notably the right to benefit from the productive labour of their wives.

Why then - apart from convention and habit (Lewis 1986) - do women collude on public occasions in maintaining the image of men as considerably stronger than themselves and as doing more important work? Not only does this view of male/female distinctions appear as demeaning to women, but it is clearly situational. Women indicate by what they say and do in other contexts that they are not unequivocally happy with it.

I mentioned earlier my impression that for women statements about their lack of strength do not carry such strong connotations of feminine inferiority as they do for men. Moreover, I would suggest that a significant factor here is the way in which Yonura people still see their own welfare and survival as chronically threatened by enemies beyond the village. This orientation - quite striking in its persistence and strength (cf. Herdt 1981:50, 303-4) - gives the women a genuine interest

in sustaining and reinforcing the masculine powers which they see as their own collective protection against life-threatening forces. I have referred on a number of occasions to the Ommura view that one can enhance someone's strength and courage by boosting their confidence in their powers. When women give public assent to exaggerated assertions of male strength, as in the songs they sing on public occasions, they are reinforcing their own as well as men's confidence in the reality of the collective male power to protect. A basic belief in the reality of this power as such is not inconsistent with more private doubts or grumbles at the privileges men claim in other situations on account of it. On the contrary the care taken to suppress such grumbles on the public occasions when the power is supposedly being mobilised for vital defence may be seen as a tribute to the strength of the belief in the power itself.

PART 2: VIEWS OF THE NATURE AND CAUSES OF ILLNESS

CHAPTER 5:

ILLNESS AS A GENERAL STATE

While they have no single term corresponding to 'illness', Ommura certainly recognise illness or sickness in the sense that certain 'complaints involving physical or psychological changes...are categorised... as indications of deviation from health or from what is expected in terms of well being' (Loudon 1976:37).

These complaints fall into four general classes: ati nriqa, nriqa viro, the 'psychological' disorder vunrato afi and certain women's reproductive disorders. They are all considered to be uahi haikye or 'undesirable occurrences', a very general evaluative term applicable to events ranging from crop failure or loss of or damage to property to certain breaches of etiquette. Beyond this, these categories are distinct from one another⁽¹⁾ as well as from other types of uahi haikye and there is no overlap in the procedures for managing them.

The nature and significance of these disorders must be understood against the background of certain aspects of Ommura attitudes towards the physically unfit or incapacitated and of their conceptions of the relations between 'bodily', 'psychological', 'spiritual' and 'social' aspects of the person (to use a set of distinctions not directly paralleled in Ommura thought).

BODY, PSYCHE, SPIRIT AND SOCIETY

First it is necessary to appreciate the way in which, from an Ommura perspective, certain visible features of the nature and state of a person's body are tied up with aspects of their social persona, social status, personal attributes and capabilities and the current state of their social relationships.

The notion of bodily qio, bodily soundness or perfection, combines positive health, attractiveness and physical strength or energy (kyapukya). A qio body for either sex is characterised by 'good skin (or flesh)' (mamanta) and 'good blood'. 'Good skin' is 'fat' or 'full of grease' (vahamera) so that it appears firm, bulging with muscles, smooth and sleek. The skin of the unfit or elderly is 'ashlike' (handavenravo), dry, flaky and greyish, or hondiutuvema, literally 'like cooked hondi greens', slimy and lacking in firmness. Some cosmetic and healing procedures involve the ingestion or application of pork fat or pandanus oil 'to make the skin fat'. 'Good blood' flows freely so that it remains fresh (arakye), and the person emanates an aura of vitality and dynamism.

Some people's bodies are naturally more qio than those of others, and illness and old age diminish a person's bodily qio. The extent to which a man approximates this ideal state has a bearing on his prestige and influence. It would not make sense in Ommura to praise someone's 'strength of spirit' despite the frailty of his or her body. In keeping with women's generally subsidiary role in public affairs, a woman's degree of physical health/attractiveness/energy is a less important aspect of her social persona than in the case of a man.

A considerable degree of bodily qio is seen as enabling one to influence people as well as to work and fight excellently. It is also said to 'pull' resources, a notion which, given the principles underlying the giving of gifts and assistance in Ommura, is not as mystical as it sounds. As one old man remarked bitterly during a food distribution from which he was excluded: 'People with good skin get everything. What they plant grows large and people think, "I'll give them something. Later, they'll help me or give me something". If someone has bad skin or eyes [he was blind in one eye] they say "Nothing for that decayed man!"'

While a variety of factors affect a man's prestige and influence in these spheres, a respectable degree of bodily qio is a sine qua non for

playing an effective role in public affairs. To be positively lacking in this quality, whether through illness, old age or chronic physical disability is seen as limiting a man's capacity for fruitful participation even in ritual matters.

From an Ommura perspective certain bodily states are closely linked to particular kinds of social circumstances. We have seen how an 'incorrect' flow of blood in the body is associated with an 'incorrect' flow of 'blood' between affines, and on several occasions I heard men being warned that it was obvious from the swollen state of their noses that they were defaulting on their obligation to their wives' kin. It may be noted that once I had become attuned to paying the same kind of minute attention as did Yonura people to nose shape, I myself began to notice distinct variations in the extent to which particular people's noses appeared swollen on different occasions⁽²⁾.

More generally, much as English speakers tend to impute certain personality characteristics to people considered to have 'small, piggy eyes', 'an upright bearing' or 'weak chins', so the fact that a man had a particularly narrow and aquiline nose, or a particularly wide one, was sometimes cited as an indication that he was the sort of person who was generally capable or incapable of adequately discharging his obligations to his affines.

Ommura also distinguish various named states that involve 'bodily', 'psychological' and 'social' elements in inseparable combination. An example is kiaunrinro which I have glossed as 'shame' and which appears similar to what Hageners call 'shame on the skin'.

Strathern notes that the explanations given to him for this state:

tended to stress the notion that 'shame' has to do with the individual's reaction to his community relationships... . It has both a psychological and social reference... . When persons feel 'shame' in Hagen they say that their skin breaks out in a sweat....the skin, their outer self, is the immediate point of contact with the physical world outside them and can conveniently symbolise the point of contact between themselves and the social forces that surround them (Strathern, A. 1977:101).

Like 'shame on the skin' kiaunrinro has a 'psychological' element but cannot be understood simply as a psychological state. A person only experiences this kind of 'shame' or 'embarrassment' in the presence of others who are conscious of him or her having performed the shameful action. It also has a bodily manifestation: the forehead of someone who is in a state of kiaunrinro is said to be covered in beads of perspiration.

The body as a system

There is less cultural elaboration regarding the functioning of the body as a system than regarding the relations between 'bodily' and 'psychological' states and social circumstances.

I obtained over thirty terms relating to bodily processes, characteristics and states. They are employed for example in assessing physical attractiveness, and describing personal appearance, the visible features of fighting injuries, or bodily movements in fighting or dancing. However, the structure and functioning of the body as a system has not been a subject for detailed enquiry in Ommura, and ethnophysiological notions, whether in the form of explicit theory or the unarticulated logic underlying prophylaxis or therapy are generally markedly less complex than those described for many African cultures (e.g. Janzen 1978, chapter 10; Bisilliat 1976). Ommura notions of illness causation stress 'psycho-social' aspects.

The most elaborated ideas concerning the functioning of the body as a system are those relating to the flow of blood. Blood is 'good' and flowing 'properly' when it moves freely and thus remains 'new' or 'fresh' (arakye), like as one woman put it, water in a fast flowing stream. The expression 'his blood is good' is used in much the same general sense as the English phrase 'he radiates health and vitality'. If a person's blood flows too slowly or stagnates so that it is flowing 'incorrectly' and becomes bad (uahi), stale or decayed (tapitaira) he or she becomes listless and lacking in vitality. With advancing age blood tends to flow

less freely and its condition worsens. 'Bad blood' in younger people is generally associated with ill health. Localised ailments are sometimes attributed to 'bad blood' having accumulated in the affected area, and 'bad blood' is cited in a general way as a feature of most cases of illness (nriqa viro)⁽³⁾.

Several prophylactic, therapeutic and cosmetic procedures are aimed at maintaining or restoring a 'fresh' condition of the blood. Many people regularly beat themselves with nettles (taroa) to induce a sense of well being, enhance their attractiveness or relieve discomfort resulting from minor ailments. The tingling sensation this beating produces is taken as an indication that it stimulates blood flow. Consumption of undercooked meat, the red juice of betel nut and beer are regarded by some as a means of encouraging the production of 'new blood' in the body. There are also various blood-letting procedures for eliminating 'stale' blood. Both men and women may bleed their noses to enhance a sense of well being or protect against illness, and a cure for localised swellings or sores is to 'shoot' them with a miniature bow and arrow so that the 'stale blood' can escape⁽⁴⁾.

Other than that it should be flowing freely there is little specification of what constitutes a 'correct' flow of blood. I did not find a systematic set of ideas concerning proper relations between blood or blood flow and other bodily components and functions such as are described by Bisilliat for Songhay (1976:566 f). Specific relations of this kind are postulated only in the case of ailments attributed to incorrect flow of 'blood' between affines. As we have seen, these disorders involve 'bad', stagnant blood accumulating in the nose.

A very general unarticulated opposition between antipathetic 'masculine' and 'feminine' aspects of the body is also apparent (cf. Meigs 1984:128). For example the Ommura belief that it is dangerous for a man to eat food that has been in contact with the lower part of any body

including his own reflects the notion that the upper part of the body (kiatara) is 'made' by the father and the part from the waist downwards (kiutarani) by the mother. As in other parts of the New Guinea Highlands there are pervasive associations between masculinity and the upward dimension and between femininity and the downward dimension. I mentioned earlier that the stagnation of blood in the nose characteristic of disorders associated with impaired flow of meat prestations (kyapairi) between affines may be seen as involving a bodily substance with feminine associations becoming inappropriately lodged in 'masculine' body part. As elsewhere in the Highlands flowing blood has feminine associations in certain contexts (e.g. Glick 1967:49-50; Meigs 1984:61) and the nose is associated with masculine attributes (e.g. Herdt 1981:226,237). Men say, for instance, that only women will eat the blood lost by pigs after slaughter 'because blood is a woman's thing'. The full acquisition of adult male status and masculine strength is marked at the end of the final stage of male initiation (ievati) by decorating the novices' noses with upturned pig's tusks (Johnson 1980:137, 161f). Conception is considered to result from the mother's blood combining with the father's semen ⁽⁵⁾ and people are said to inherit the shapes of their noses from their fathers, never their mothers.

As fairly complex ideas about the physiology of conception have been reported for elsewhere in the New Guinea Highlands (e.g. Strathern, A. 1972, 9f; Meigs 1976: 394f), I should note that despite detailed questioning I was never told anything more specific about this process than that pregnancy resulted from the mother's blood combining with the father's semen as the result of several acts of intercourse, and that the upper part of the child's body and its nose and bones were 'made' by the father and its blood and the lower part of its body by the mother. It is possible that more complex explanations exist as part of the body of knowledge about childbirth which is the monopoly of women who have had children and was not available to me ⁽⁶⁾.

'Visible' and 'invisible' aspects of the person

I have stressed the way in which certain 'psychological' states have visible bodily manifestations. It is also fundamental to Ommura conceptions of the person that a large part of each individual's motives, intentions, feelings, emotions, sensations and experiences remain 'inside the body', 'hidden from' others or not communicable to them⁽⁷⁾. This assumption underlies much social interaction and communication. The distinction is important for understanding that while there is a high degree of conceptual elaboration regarding its 'psychological' and mystical aetiology, the subjective bodily and 'psychological' experiences of illness are not treated as subjects for precise verbal communication.

My habit of asking questions such as 'Why did he do that?' was generally regarded as rather pointless. Such questions are not treated as matters for overt speculation or analytic discourse, and a typical retort was: 'Why ask me? I can't see inside his ear!' It is taken for granted that people tend to keep their true (tanruva) thoughts, motives and intentions 'hidden inside the ear' (cf. Strathern, M. 1979:250. Intellectual processes, memory and knowledge are associated with this organ, and the same verb (iero) is used to mean 'to hear' (a sound) and 'to know' or 'to understand'⁽⁸⁾.

A person's emotions may be partially expressed and communicated through bodily stance, facial expression and song. There is a special genre of song for expressing 'inner' states of this kind. The particular melody used indicates to others in a general way the nature of the feelings being expressed - whether the singer is po ('sad', 'sorry', grieving over a loss), inronra hita ('angry'), in physical pain, intensely attracted to a member of the opposite sex, or hungry. A specific named type of melody is conventionally treated as an indication of each of these general categories of feeling. Singing such songs often constitutes an expressive medium rather than a vehicle for communication to others. They are frequently sung

out of the earshot of other people, and never to an audience. Moreover, their verbal allusions tend to be private or personal rather than highly conventional and intersubjective as in songs for public occasions.

In large part, however, emotions or feelings are considered to remain 'in the belly (bvikyokya)' so that they are 'invisible' to others. Most named feelings or emotions are associated in a non specific way with this part of the body. In the same way, a person's bodily sensations are felt to be largely 'invisible' and not a subject for precise verbal communication.

Marauha

It is said that at death and during possession, severe 'fear', dreams and illness (nriga viro) the marauha leaves the mamanta (flesh or skin).

In that it does not, like the Huli dinini or the Kyaka (imwambu), persist after death, marauha cannot be understood as soul (Glasse 1965: 30; Bulmer 1965:138). As one elderly woman put it: 'We don't know what happens to the marauha when the forehead is already dead. We just cry and cry for it until our eyes hurt.'

If marauha is to be translated as 'spirit' or 'vital principle' then it should be noted that it is a less specific and elaborated notion than the 'vital principle' or 'human spirit' concepts described for many other parts of New Guinea. My questions about what the marauha looked like or where it was situated almost invariably met with responses such as 'We don't know. We haven't seen it'. It is never represented as permeating the body or as having a specific bodily location like the Gnau wuna'at which 'names the part of the body where are localised vitality, thought and emotion....for them localisation is a clear attribute of consciousness...' (Lewis 1975:211), or the Huli dinini, the 'vital principle or vital essence of human personality' which in the waking state 'spreads from its position behind the eyes so that part of it diffuses to the ears,

nose and mouth...' (Glasse 1965:30).

Taking into account the various contexts in which it is used, I would describe marauha as a significantly vague concept for pointing to what are regarded as processes the nature of which is beyond comprehension in terms of ordinary language and experience.

It is commonly used, for example, in the description of magical processes. Spells sung during sweet potato fertility rites to 'pull' sweet potatoes from other villages are said to operate on the marauha of these potatoes. Where illness is attributed to contact with a plant that has 'supernatural powers, it is said that the marauha of the plant has captured the sick person's marauha rather than simply 'the plant harmed him', as would be the case if a plant without supernatural powers had, say, fallen on his head.

Similarly, the human states in relation to which the notion of marauha is invoked (dreaming, possession, death, severe 'fear', non-trivial illness) are those which are regarded as in some sense extraordinary or beyond ordinary comprehension. The marauha/mamanta contrast is not relevant to conceptualising the person in normal, everyday circumstances. It would not make sense in Ommura to say that people 'have' marauha as they might be said (by ethnographers at least) to 'have' souls or vital centres.

It may be noted that I did not find a well defined conception of 'soul' or 'vital centre'. Marauha is their closest approximation to either of these kinds of concept. A few Yonura people told me that they had heard from evangelists that after death a person's laihor, Ommura for 'breath', went to heaven (Melanesian Pidgin for heaven). However, this attempt to render the Christian notion of soul in Ommura terms has had very little impact on Ommura thought.

ATI NRIQA

Ati nriqa may be translated as bodily pain or discomfort that is 'nothing' or 'of no consequence'. Ailments of this kind are distinguished from minor injuries resulting from accidents or fighting by the fact that they 'come by themselves'.

Except in the case of children, no one other than the afflicted person has the authority to decide whether he or she is simply suffering from ati nriqa or more seriously ill. To treat a disorder as ati nriqa is to indicate that one regards it as requiring little or no treatment and no explanation, and where the patient is an adult, as 'small' (pata), that is, not significantly debilitating. Children may be judged to be suffering from ati nriqa even where it is recognised that they are quite debilitated. I encountered only one case of illness in a child, that was not classified in this way.

In contrast to nriqa viro where the patient feels generally unwell, ati nriqa is always represented as being localised. One says 'he or she has pain or discomfort in the leg/belly etc.' (Iva kiu-u/bvikyokya nriqa viharo) as opposed to 'he or she is ill' (Iva nriqa viro). There is an underlying distinction here, similar to that which Gnau draw between illness of the self and illness of only a part of the body, and which 'has far reaching consequences for their behaviour when ill' (Lewis 1975:131).

While ati nriqa categories are distinguished according to their bodily manifestations, specification of symptoms is usually limited to noting that there is pain or discomfort (nriqa) in a given part of the body. In keeping with the fact that bodily sensations are not generally regarded as a matter for precise verbal communication to others, more specific accounts of the nature of the discomfort were not forthcoming. People suffering from ati nriqa did not make extensive use of the large Ommura vocabulary for bodily parts and processes to describe how they were ill.

When asked to name all the types of ati nriqa they could think of most informants mentioned only the following: nominra, a cold or soreness and/or mucus in the nose, ears or throat; rara kamuna, diarrhoea unaccompanied by general debility, and thirdly, pain or discomfort in various parts of the body. (Iva nromina vahiro = 'He or she has a cold'; Iva rara kununa utiro = 'He or she has diarrhoea'; Iva ieta nriqa viharo = 'He or she has a pain in the head'; Iva mo-a bvikyokya/kiu-u viharo = 'He or she has pain or discomfort in the back/belly/leg or foot/shoulder etc.').

The following more specific terms for eye and skin disorders were mentioned spontaneously by only a few men and women, but all other adults questioned were familiar with them. They were rarely used in describing cases of ati nriqa. Conjunctivitis was generally described simply as 'pain in the eye' and infected sores as 'pain in the leg/arm', and so on: vu nranrenra huviro, literally, 'eye is red' = inflammation of the eyes, conjunctivitis; vuara hiva = a condition in which mucus comes out of the eye; vuhi ipa viha or vukira kuhira = any condition in which the eyes are so swollen that they close, also blindness which is classified as a permanent disability rather than as an illness; muta = 'a small sore place on the skin'; rumbuara = 'the same as muta but the sore place is bigger'; vekakor = 'a big hole in the skin, bigger than rumbuara. The last three terms were applied to ulcers and infected sores, as well as to cuts and grazes, which are not classified as ati nriqa because they do not 'come by themselves'.

If one wishes to know what kind of nriqa viro a person is suffering from, one asks 'What are its causes?' (Mmia okiera nanrave?). Whenever I asked this question about a particular case of ati nriqa the response was that 'it had come by itself' or had 'no causes' (Hiama mmia okiera vahiva), that is, that my question was an irrelevant one. From the measures people take to avoid specific kinds of ati nriqa it is clear that

insofar as causes are posited for these disorders, they are seen as being physically caused rather than 'psychosocially' and mystically caused like nriga viro. For example, children are told not to sit on wet ground in case they catch cold (nominra) and to avoid certain foods which will give them stomach ache (bvikyokya nriga).

Yonura people sometimes visited the mission aid post to have skin ailments disinfected or bandaged or to obtain cough mixture for colds (nominra). What indigenous treatments there are for ati nriga are aimed at symptoms rather than causes and are self administered unless the patient is a child. In keeping with the fact that ati nriga is generally regarded as something which 'will go by itself' they are far less elaborate than those for nriga viro.

Most informants knew only of the following indigenous treatments for ati nriga:

- (i) Beating the afflicted area with stinging nettles (taroa) to reduce the pain or discomfort and stimulate the flow of blood so that any stale (tapitaira) blood that has accumulated there will disperse. This is not specifically a treatment for ati nriga. It is routinely performed by quite healthy people simply to induce a sense of well-being and maintain the blood in a 'fresh' condition.
- (ii) Placing moist banana leaves on the forehead to reduce feverishness or make one feel 'cool'.
- (iii) Tying cordyline leaves tightly round swollen joints to relieve swelling or pain, or around the head to alleviate a headache. Sometimes the leaves are warmed first over a fire.
- (iv) Chewing ginger (handa) to relieve a sore throat, nasal congestion or stomach pains.
- (v) 'Shooting' a localised swelling or pus filled sore with a miniature bamboo bow and arrow (nrunda huru) to eliminate 'stale blood'.

In addition, several men had personal remedies, listed in Appendix 1, which they claimed to have learned from Waffa people, and to use on themselves and their children. Older informants recalled that a man who died shortly before the establishment of the patrol post had known of a number of remedies for ati nriqa which were now no longer in use. Other villagers had often approached him for treatment with the special medicinal plants that he cultivated but had never learned how to perform these cures themselves.

NRIQA VIRO

Iva nriqa viro = 'He or she is ill',

The decision that one is ill in the sense of nriqa viro involves the following personal judgements:

Firstly, that one is general ill 'in oneself' as opposed to suffering from an ailment affecting only a part of the body, and thus too unfit and lacking in strength (kyapukya) to be able to carry on with one's normal work routine. This sense of feeling generally ill was sometimes referred to as aturama ndiro. According to one young man:

The person feels pain or discomfort in his body and cannot sleep well but he doesn't know just where the discomfort is. He feels it all over.

Someone in this condition usually suffers from 'fear' as well as bodily discomfort, although 'fear' unaccompanied by bodily discomfort does not indicate nriqa viro (Iva atu hiro = 'He or she is 'afraid').

A generalised sense of pain or discomfort that is attributed to a disorder regarded as chronic or congenital or to the process of ageing is usually treated as part of the person's normal state rather than as an indication of nriqa viro. Nriqa viro has distinct temporal boundaries. It is a condition with a fairly sudden onset and is not permanent.

The decision that a complaint constitutes nriqa viro also involves

a judgement about its causes. This type of disorder is always the outcome of attack from one of those illness causing agents described in the following two chapters.

In contrast to ati nriqa, nriqa viro is always considered to require treatment. At the least, steps must be taken to 'see' the afflicting agent. It is also the only type of illness that always involves some withdrawal from everyday activities and social interaction.

Nriqa viro cannot be understood simply as a condition of the body or of the person conceived in isolation from his or her social environment. It has (to use distinctions which are 'etic' rather than 'emic') bodily, psychological, social and ideological aspects.

Nriqa viro as a 'bodily' and 'psychological' state

There is far less cultural elaboration concerning purely 'bodily' and 'psychological' aspects of nriqa viro than there is concerning the causes to which it is attributed and its significance regarding the patient's circumstances, attributes and capabilities and more generally, the validity of the image of men as strong protectors of the community.

Diagnostic categories are distinguished according to cause or aetiology rather than symptoms or severity. Those asked to describe all illnesses they could think of invariably produced lists of the various circumstances or agents thought to cause nriqa viro. Similarly, if one asks what kind of sickness (nriqa viro) the patient is suffering from (Mmia nriqa nanrave?) one is simply given the name of the agent to which the disorder is attributed. Judgements of severity are partly based on the extent to which the patient feels incapacitated. However, type of cause and severity are rarely represented as being related. Nor, with the exception of contact with one's wife's menstrual blood (see chapter 6) do particular causes imply specific symptoms. In this the Ommura situation resembles that described by Lewis for Gnaou where 'If you wish to know what kind of illness the patient has you may be

told the name of one of the various agents causing illness, but this tells you virtually nothing about the clinical form or pathology of the illness' (Lewis 1975:136).

Besides its special significance for the patient, the fact that he or she is suffering or in pain is clearly important to kin and friends who may wail round the sick bed 'because we are sorry (po) for him'. However, the specific nature of the bodily suffering involved is not a matter for articulation in precise verbal terms or communication to others. It belongs to the realm of 'invisible' aspects of the person.

People afflicted with nriqa viro communicate through their behaviour that they are suffering, but say little, even to healing experts, about the nature of the discomfort. When questioned about what had led them to decide that they were ill, patients and ex patients always mentioned bodily symptoms. However, they described them in such a general way that I rarely learned more than that they had been 'hot', 'cold', aching (nriqa) with 'bad blood' or short of breath (Iva ranara hiva = 'He or she has difficulty in breathing, is suffering from shortness of breath'). These four symptoms are regarded as typical of nriqa viro irrespective of its causes. To say that someone is suffering from them is often little more than a conventional idiom for indicating that he or she is afflicted with this type of illness. Sickness from contact with menstrual blood is considered to involve 'pain in the nose' in addition to the typical nriqa viro symptoms.

Similarly, the response to direct questioning about whether the illness involved pain or discomfort in particular parts of the body was usually simply along the lines of 'Yes, I ache (hurt, feel uncomfortable) all over'.

From healing experts and patients' kin I could rarely learn anything more specific regarding the bodily symptoms and signs of the sickness than that the patient was suffering from one or more of the four typical

nriqa viro symptoms. When I persisted in pressing an assochia expert for more precise information, he retorted: 'How can we see the pain of the illness? That is something that remains inside the sick person's belly'.

That the specific nature of bodily symptoms is not a subject for precise verbal communication reflects the fact that the judgement of whether he or she is ill is made by the patient alone. This is also consistent with the fact that precise discrimination of bodily symptoms is not explicitly treated as significant in current methods of diagnosis or therapy. It is, of course, possible that in making judgements about the presence and nature of illness, Yonura people may follow unarticulated rules in terms of which bodily symptoms are more precisely discriminated than they are on a verbal level.

Decisions about the number of healing ceremonies required for specific instances of nriqa viro are partly based on the extent to which the patient judges himself or herself to be incapacitated. However, the primary overt aim of diagnostic procedures is to overcome the specific agent that caused the sickness. While healing ceremonies involve procedures for strengthening the patient, these are performed routinely for all cases of nriqa viro and healing experts do not overtly examine the patient's body.

Nor were precise accounts of the 'psychological' or 'emotional' symptoms of nriqa viro forthcoming. Patients and ex patients said simply that they were or had been feeling 'afraid' (atu hiro) and were hence unable to 'sleep properly'. Most types of nriqa viro are, as will be seen, regarded as the outcome of 'fear' associated with specific kinds of situations. However, 'fear' suffered during the illness is not generally represented as reflecting the distinctive nature of the experience that gave rise to it. In addition, several people told me that they had suffered from a deep sense of shame (kiaunrinro) as a result of their lack

of bodily fitness (qio) while ill, and that this shame had been a source of great misery or sadness (po) over and above that caused by the bodily suffering.

Nriqa viro as a reflection of the patient's circumstances and personal qualities

The cultural significance of nriqa viro in any specific instance derives very much from the nature of the agent or circumstances to which it is attributed.

Five main types of illness causing agent are currently recognised: sorcerers; large yams; one's wife's menstrual blood or food touched by her; wera spirits; and akiau phenomena, which are associated with the mythical figures known as uri. The nature of each agent and the conditions under which it attacks are elaborately specified in such a way that most types of nriqa viro have specific connotations regarding the patient's activities and social circumstances and, by virtue of this, his or her attributes and capabilities. Thus, to attribute an illness to a wera is to imply that the patient has visited one of the towns or coastal areas frequented by these spirits, and that he or she must therefore be rather courageous and may have access to prestigious 'foreign' skills and knowledge. The diagnosis of illness from menstrual blood may imply that the patient's wife harbours 'anger' towards him and that he may have mismanaged his relations with her.

While the process of illness causation is generally represented in terms of a mystical idiom, 'psychosocial' factors are also seen as playing an important causal role. The specific circumstances under which certain agents attack are, as the next two chapters show, regarded as sources of 'fear', and falling ill indicates that one has been suffering from severe 'fear' (atu hiro) arising out of one of these sets of circumstances. Attack from a nriqa viro causing agent will not generally

bring illness unless the victim's resistance is already lowered by 'fear'. Thus the fact that a man is suffering from illness from the akiau agent 'mother of marsupials' indicates that he has been trapping marsupials for the ceremonial meal of smoked marsupials that a husband must prepare for his wife's kin when she gives birth and feeling 'afraid' that he will anger his affines by failing to provide them with sufficient meat.

Evaluative and ideological connotations of nriqa viro

Illness in Ommura is never, as in certain other cultures, a source of enhanced status (Turner 1967:10). In keeping with the generally negative evaluation placed on significant absence of bodily health or fitness it is often represented in the abstract as a rather degrading state. While patients themselves sometimes claimed to feel 'shamed' by their incapacity, I never heard others refer critically to the bodily condition of a sick person.

It will become apparent in the chapters which follow how strongly perceptions of and attitudes towards nriqa viro are shaped by a warfare paradigm. The process of illness causation is often represented in terms of a military idiom: the agent attacks its victim with a bow and arrow and captures his or her marauha. Similarly, therapy often involves symbolic military counterattack against the afflicting agent or conducting a peace making ceremony with it. In keeping with this, illness does not generally reflect on the sufferer's moral condition. It can, however, indicate that one is lacking in kyapukya and the capacity for conducting one's life in an avu avu fashion - qualities which are considered essential for survival in a society under threat of war, and which rank highly in terms of the way in which Ommura evaluate people.

It is a fundamental premise of the Ommura 'world view' that each individual goes through life surrounded by a host of dangerous and

threatening forces, ever liable to cause harm: enemies from other villages who may attack or ensorcel one, people in one's immediate environment who may harm one's health through pollution (see chapter 6), winds that may destroy one's home or food supply, and supernatural forces that lurk in the village and its environs.

Men and women who conduct their lives in an avu avu manner are essentially people who are sufficiently astute to be able to steer unscathed through this maze of dangerous forces, to behave in such a way as to avert harm from them. They save food for use in times of shortage, rather than squandering it to satisfy short term needs and are always on the alert for enemy attack and skilful at surviving it (cf. Herdt 1981: 204). Similarly, they conduct themselves in such a way as to minimise the risk of falling ill, taking constant care to ensure that sorcerers cannot obtain their food leavings or bodily emissions. A man who is capable of running his life in an avu avu fashion conducts his relations with his wife in such a way as to ensure that she will not seek to harm him with her menstrual blood.

One is reminded of the way in which much contemporary popular and social scientific theorising about psychosocial causes of illness links susceptibility to illness with 'inadequate' social or psychological 'adjustment' (see, for example, Totman 1979, chapters 5 and 6).

Not only is the patient's physical strength affected by the sickness, but the fact that one has succumbed to attack from an illness causing agent may be perceived as an indication that one is not sufficiently kyapukya to have resisted it. We have seen how being kyapukya involves having the power to control non human as well as human life-threatening forces. By virtue of this nriqa viro is perceived in concrete instances as reflecting on the validity of the image of men as strong protectors of the community as well as on the patient's worth as an individual. These particular ideological and sociopolitical connotations of sickness can

have an important bearing on diagnostic decision making.

As will be seen, nriqa viro categories vary in the extent to which they imply weakness. The only diagnoses that are perceived as compatible with the image of men as the stronger and more important sex are those which assign men's illnesses to categories which do not imply significant lack of kyapukya, or women's illnesses to categories that do. An important aim of the assochia diagnostic and healing ceremony is to minimise the extent to which diagnosis is perceived as casting doubt on the validity of this notion of masculinity and associated definitions of femininity.

Thus, the significance of nriqa viro is such that dealing with it in specific instances involves managing its ideological and sociopolitical implications as well as attempting to alleviate the patient's bodily and 'psychological' condition.

Behaviour in illness

Someone who has decided that he or she is ill communicates this decision to others through withdrawal from ordinary activities and social interaction. The extent of such withdrawal varies according to how severe (nronra, literally 'big') the patient judges the sickness to be, a decision based on the extent to which he or she feels incapacitated as well as on an intuitive judgement as to whether the disorder is potentially life threatening. In less severe cases one may maintain a relatively normal lifestyle, merely becoming less assiduous over work and personal appearance, participating less actively than usual in social and public events and taking extra care to avoid contact with potential sorcerers or dangerous supernatural forces. At the other extreme, serious illness leads to complete withdrawal from normal work and social interaction. People in this condition cease to wash and dress. Characteristically, they lie huddled in their sleeping huts, avoiding all eye contact and speaking to and spoken to by no one. I sometimes heard sick people singing softly to themselves using melodies that conventionally

indicate sorrow or misery (po).

The huddled stance and conspicuously withdrawn behaviour of severely ill people was generally attributed to the fact that they were 'afraid' (atu hiro) of the afflicting agent, and trying to hide from it. The idiom employed was identical to that used in referring to hiding from the enemy during war. This kind of withdrawn behaviour is also characteristically adopted by people who have been publicly and severely 'shamed' (kiaunrinro). Several people made it clear to me that their 'shamed' stance while ill had not been merely conventional.

If a man is severely ill, male kin or members of his men's house group bring him food, water and firewood once a day. Under normal circumstances, it is often a man's wife who carries his meals to him. During illness, however, he is considered to be in too vulnerable a state to run the risk of consuming food or water that might have been 'polluted' by her. If the patient is a woman she is generally provided with food, water and firewood by female kin or friends. Sick children are generally cared for by mothers, fathers or siblings.

In severe illness, there is a conspicuous absence of ordinary attention to bodily well being. People who judge themselves to be in this condition sometimes subsist on food and water that would normally be considered unfit for human consumption because it is inadequately cooked or has been lying on the ground. They may take some powdered hema bark to 'strengthen' them. Other than this, there is no attempt at symptom relief except while the patient is actually undergoing a curing ceremony⁽⁹⁾. Sick people do not observe special diets.

Friends and relatives are not expected to minister to the sufferer's physical comfort or day to day needs beyond the provision of food, water, and firewood. They do not, for example, clear away any dirt or excrement surrounding them or chase away molesting pigs, dogs or flies. I never heard a sick person explicitly request such assistance.

This attitude contrasts markedly with the habitual concern people display for their friends' or relatives' physical well being under ordinary circumstances, massaging aching limbs, bandaging their cuts or delousing their hair. It reflects a feeling that, as one man put it, 'What is lying here is not our brother himself, but only his mamanta (skin, flesh). His marauha has been captured.'

At the same time, considerable energy may be devoted to arranging diagnostic and curing ceremonies, and on several occasions people responded to serious illness in their close friends or kin with displays of emotion quite striking in their intensity to an outsider. Besides wailing (ndatero) round the sick bed they engaged in ritualised displays of violent symbolic aggression against the afflicting agent, men shooting arrows into the air and women brandishing sticks and axes. This kind of response is explicitly likened to revenge attack on a group responsible for the death of or harm to a close friend or kinsman in war, and its intensity must be understood in relation to the 'anger' said to be aroused by war attack or the thought of war attack. The uaha healing ceremony is explicitly seen as an occasion for participants to vent their 'anger' as well as attempting to restore the patient to health.

WOMEN'S REPRODUCTIVE DISORDERS

Certain conditions which affect women and are considered to be associated with menstruation, childbirth or infertility are also treated as 'deviations from health or from what is expected in terms of well being'. They are quite distinct from nriga viro and ati nriga⁽¹⁰⁾.

These ailments are diagnosed and treated in the menstrual houses (kapa) by initiated women rather than publicly by men as in the case of nriga viro. This is in keeping with the fact that much knowledge about matters relating to childbirth and menstruation is the 'secret' (uakyera)

of initiated women⁽¹¹⁾. It is also consistent with the fact that women's menstrual capacities, like other facts perceived as inconsistent with the image of men as strong protectors of the community, may not appropriately be referred to during healing ceremonies and on other public occasions.

I was asked not to repeat most of what I was told about the nature of these disorders and the treatments for them and will simply note here that they are not always regarded as requiring explanation and treatment and do not involve dramatic role playing like nriga viro. In mild cases there is no publicly visible modification of ordinary behaviour. A patient who feels too incapacitated to carry on with her normal work routine retires to a menstrual house. However, there is not the same conspicuous withdrawal from communication with others or abandoning of ordinary attention to physical well being as with nriga viro.

VUNRATO AFI: CONFUSED PERCEPTIONS

A fourth type of 'deviation from health or from what is expected in terms of well being' is vunrato afi, or 'confused perceptions and thoughts', literally 'confused eyes/ears'. It will be recalled that intellectual processes are associated with the ear. I did not encounter any cases of this disorder and only learned of it through references in general conversation, reminiscences and stories. Unlike the other three types of disorder, it was not recognised by all informants.

This is a temporarily bounded condition quite distinct from long term insanity (werendara), and from possession. The person feels confused and (afraid', incapable of thinking clearly and may have disturbed dreams, hear voices or see visions. It is considered to be a distressing experience, but does not involve physical pain or discomfort.

I was told that one can tell that someone is suffering from this disorder 'by the look in their eyes'. Other signs of this condition visible

to others are impairment of the normal capacity to speak clearly and of bodily co-ordination. The extent to which behaviour is modified depends on the severity of the condition.

CHAPTER 6:

ILLNESS 'DUE TO A WOMAN'..

A number of nriqa viro disorders that affect men only are described as being due to or having been caused 'by a woman' (nrahesi). They are represented as having their immediate causes in the following kinds of situation:

- i) A husband ingesting food that has been in contact with the person of his wife
- ii) A husband coming into contact with his wife's menstrual blood
- iii) A father ingesting food or drink that has been in contact with any of his children who are still young enough to be sleeping with their mother.

Most of the men and women whom I asked to describe the kinds of illnesses occurring in Ommura mentioned these three types of situation as among the commonest sources of nriqa viro in men. During fieldwork, out of seventeen personal diagnoses (chapter 9) for men in Yonura three were of illness from contact with menstrual blood of the patient's wife, and one was of illness from ingesting food handled by the patient's wife. There were no personal diagnoses of illness due to food handled by the patient's young child, but this type did figure in assochia ceremonies. For reasons to be discussed later it was the only one of the three types of illness 'due to a woman' ever diagnosed there.

In what follows I look at Ommura notions about the circumstances that trigger illness 'due to a woman' with a view to casting light on their underlying logic and throwing into relief aspects that have a bearing on diagnostic decision making. The beliefs about illness 'due to a woman' cannot be understood solely in the context of sexual pollution notions.

Most importantly, women other than a man's own wife are not seen as capable of giving him the illness whether via blood or food. Contact with other women's blood or food pollutes him also but cannot make him ill. Thus it is clear that beliefs about this kind of illness involve some particular ideas about the nature of the husband-wife relationship. Viewed in this context they are also seen to involve ideas about the power of 'anger' (inronra hita) and the role of 'fear' (atu hiro) in the aetiology of sickness. On these lines it can be suggested that the Ommura concept of illness 'due to a woman' is metaphorically linked with kinds of situation where a man is allegedly failing in his affinal obligations and so seems to be threatening potential damage to the solidarity of the village.

HARM FROM CONTACT WITH MENSTRUAL BLOOD AND FOOD TOUCHED BY A WOMAN

Ommura are like other Highlanders in representing contact with sexual substances or between men and women as being harmful or polluting under certain conditions.

Both men and women put most of the emphasis on female-to-male pollution, and both agree that its specific source is contact with the woman's menstrual blood or eating food which has been touched by her. Such food is held to be permeated with her 'smell' (munda)⁽¹⁾. The pollution caused by young children handling their fathers' food is also referred to the idea that in sleeping with their mother they may have picked up traces of her menstrual blood and/or her 'smell'. Contact with parturitional fluids is considered to be potentially polluting to men. However people of both sexes say that such pollution is unlikely to occur because men always know if a woman has recently given birth.

While there is far less emphasis on notions of pollution from men or male bodily substances, semen out of place is represented as being harmful

to both women and men (cf. Strathern, M. 1972:166-8; Faithorn 1975). I was told, for example, that if a married women has an adulterous affair her lover's semen may cause her to develop 'bad skin' and her husband may be harmed by drops of it remaining on her body.

My concern here is not to analyse Ommura pollution notions as such but specifically to note aspects that are relevant for understanding views about illness. However it may be remarked that, as elsewhere in the Highlands, beliefs about sexual pollution can be viewed in the context of a wider set of pollution notions or conceptions of 'fundamental disorder, things out of context and hence threatening to society' (Faithorn 1975:140; cf. Buchbinder and Rappaport 1976; Herdt and Poole 1982; Keesing 1982:7; Meigs 1978; 1974). There are also pervasive symbolic links between sorcery and pollution notions (cf. Lindenbaum 1979).

The effects that Ommura associate with female-to-male pollution other than between spouses are that the man may develop a general sense of not being very well and perhaps a 'bad' condition of the skin. The latter could be so slight that he might hardly be aware of it. This is quite unlike nriga viro proper which typically involves distinct symptoms of 'shortness of breath' and general aching. Illness from one's wife's menstrual blood is the only type of nriga viro that is associated with more localised bodily symptoms. It is represented as involving pain and swelling in the nose caused by 'bad', stagnant blood accumulating there. One of the men supposed to have contracted this disorder is quoted in a later chapter complaining of his painful, swollen nose as well as general aching (example iii, chapter 9).

Elsewhere in the Southern Tairora area and in many other parts of the Highlands it appears that a man takes precautions to avoid polluting contact in relation to a wide range of women (e.g. (Hays, T. & P. 1982; Meigs 1984; Newman and Boyd 1982:280; Herdt 1981:162-3). In Ommura such

avoidance rules are virtually confined to the marital relationship. In this context they are considered a matter of serious importance, commensurate with the severity of the illness. The principle ones may be summarised as follows:

Spouses should always have separate utensils. A wife should only handle the food that she cooks for her husband on the end of a stick⁽²⁾. If a woman is asked to carry a gift of food to her husband she should not take it until someone else has wrapped it up or placed it on a plate. Some men and women maintained (while others disagreed) that it would even harm a man to eat food cooked over a fire on which his wife had blown or embers on which she had cooked her own food. During her periods a wife sleeps in a menstrual house and should avoid cooking for her husband or any physical contact with his person, food, clothing or eating utensils. After a period she should not resume ordinary interaction with her husband until she has bathed to wash away all traces of menstrual blood. Most people agreed in principle that young children should be prevented from handling their father's food or utensils in case they had traces of their mother's menstrual blood or 'smell' on their bodies. There was however considerable variation in the extent to which parents claimed to observe such rules.

It will be noticed that a substantial proportion of these precautions are such as to place the main responsibility for observing them on the wife, without the husband being able to check whether she is doing so properly. Both men and women maintained that except when greatly 'angered' most wives do generally take care to observe them. Breaches were said to be caused either inadvertently, by carelessness on either side, or deliberately by an 'angry' wife who wants to do her husband harm, as will be discussed in a later section.

There is far less concern about men avoiding such contact with

women other than their wives⁽³⁾. For instance, when a man visits his sister for a meal it is quite usual for her to hand him food directly rather than on the end of a stick. Gifts of cooked or uncooked food from one household to another are often delivered by the wife of the donor household, but although it is expected that the men of the recipient household will consume a share of it there is no stipulation that the food should therefore be wrapped, or that the woman who delivers it should avoid directly handling it as she would be obliged to were she carrying it to her husband. By contrast, to send a man an unwrapped food gift via his own wife is tantamount to indicating that one hopes to make him ill. A husband who thinks that his food or eating utensils may have been touched by his wife will often give these items to another man, rather than throwing them away, it being understood that they are not likely to be dangerous except to himself.

On the same lines, and again in contrast to other parts of the Southern Tairora region and the Highlands generally, menstruating women are not expected to sit apart on public occasions. Nor are they clearly prohibited from entering gardens or public places (e.g. Hays, T. & P. 1982:205; Strathern, M. 1972:167). Some men and women maintained that a woman should avoid entering a new garden during her period, as a centipede (tah-eru) might 'smell the blood and make her sick' (chapter 7). However most people whom I questioned about this precaution said that they regarded it as unnecessary. Many men claimed that, with the exception of their own wives, they did not generally consider whether a woman might be menstruating before taking food from her. Some said that if they noticed that a woman had a 'bad smell' (uahi munda) they would know that she was menstruating and refrain from eating any food she offered them, but more out of disgust than concern for their health.

CONCEPTIONS OF THE MARITAL RELATIONSHIP AS A SOURCE OF
'ANGER' AND 'FEAR'

When asked about the fact that men's sexual pollution fears seemed to be focussed primarily on their wives both sexes generally replied in terms of 'anger' (inronra hita) and 'fear' (atu hiro) - the 'anger' that wives are supposed typically to harbour against their husbands and the 'fear' said often to be experienced by men in connection with their marital relationships. An Ommura saying sometimes cited in relation to illness 'due to a woman' has it that 'wives are angry and husbands are afraid'.

In looking at this particular stereotype here I am singling out one element in the complex and sometimes contradictory body of Ommura views and attitudes concerning the marital relationship, since it is one that comes to the fore in statements about illness. 'Anger' and 'fear' are used throughout not as descriptions of psychological states of individuals but to refer to Ommura cultural categories.

The 'fear'-'anger' theme was most explicit in regard to pollution by food. Asking why men were not particularly concerned about eating food touched by women other than their wives I would be told 'Because only their wives are angry (inronra hita) with them all the time' or 'Because they are not afraid that these other women are angry with them'. The logic here - that the risks a man runs in eating food touched by a woman are enhanced if the woman is 'angry' with him - reflects a more general principle that I also encountered in other contexts: namely that a person who feels 'anger' towards someone may harm that person's health (although not sufficiently to cause illness) by intentionally or inadvertently brushing against or breathing over his or her food or voicing 'anger' over it (cf. Meigs 1984:22). Conversely, the episodes in healing ceremonies in which all present eat from the same utensils are explicitly seen as a means of transmitting 'good feelings' from each participant to the

patient.

No one suggested to me that a wife's menstrual blood might be particularly harmful to her husband because of her 'anger'. However in other contexts contact with the blood of someone regarded as being 'angry' with or hostile to one is seen as being extremely dangerous. Ommura believe that if a man comes into contact during battle with the blood of a member of the enemy side he will become weak and die unless powerful magic is performed to cleanse him of the blood. In the following chapter I suggest that akiau illness causing agents may appear harmful partly because the circumstances in which they attack are perceived as involving contact with 'blood' of hostile outsiders.

I made many enquiries about the sources of the 'anger' wives are said to harbour against their spouses, some referring to wives in general and others to particular women. Typical answers from both sexes cited the resentment a wife feels when she thinks her husband is not meeting his share of obligations regarding gardening work: for example, failing to clear garden land or to maintain fences properly and thus making her work excessively burdensome by forcing her to work in stony gardens with tree stumps or to constantly repair damage done by marauding pigs.

Grievances over the allocation of pigs were commonly mentioned by men and women as another factor contributing to wives' 'anger'. As elsewhere in the Highlands ambiguity regarding spouses' respective rights to pigs they have jointly reared is a source of marital tension (Salisbury 1962; Sexton 1984:140-1). In my experience a wife will rarely openly contest her husband's decision to kill a pig for public ceremonial purposes. However there are various kinds of situation in which women regularly challenge their husbands' claims to be disposing of pigs in a way that is ultimately for the benefit of the community. A women will often complain bitterly and even accuse her husband of 'stealing' (mbuara) from

her if a pig she has reared is selected by him to kill for a compensation payment or on the grounds that it has been spoiling gardens.

A woman who feels that her husband is defaulting on his obligations towards her may show her resentment through outbursts of temper, sulking, refusing to cook for him or striking him. She may even threaten to pollute him or to run away. However men warn each other that even when a wife does not protest openly there is no guarantee that she is not secretly furious. She may be keeping her indignation to herself - 'in the belly' (bvikyokya) - for fear of being 'shamed' (kiaunrinro) since she knows that he is doing the right (uta) thing in giving public commitments priority over garden work or in killing a pig that could cause intravillage tension by repeatedly damaging crops. However she nevertheless feels resentful of her heavy work burden and her husband's failure to lessen it by devoting more time to garden work, or of the fact that pigs she has nurtured and become attached to have been taken from her. Men also suggest that wives are often 'angry' because they would like to eat the pigs they raise and are less committed than men to using them for socially important ceremonial purposes. Wives whom I questioned often recounted instances when they had felt aggrieved with their spouses but refrained from openly expressing the 'anger' because they knew that it would be wrong and might lead to them being criticized or shamed.

I noted that it falls on a wife to take many of the precautions for protecting her spouse against illness 'due to a woman', without the husband being able to check on her. It is reasonable then that men are regarded as fearing their wives' 'anger' when it is kept private as much as or more than when it is expressed. It is mentioned as a typical source of husbands' 'fear' that the wife's bottled-up 'anger' may accumulate to the point where she will deliberately fail to observe the precautions regarding blood or food. Husbands are also said to suffer from 'fear' that their wives will

neglect their work out of 'anger' or perhaps just laziness. We have seen how men see themselves as depending on their wives' labour not only for sustenance but also for obtaining pigs for healing ceremonies and for discharging social obligations, especially to affines who may become aggressive if they fail to receive affinal prestations of pork.

The term translated here as 'fear' is atu hiro. (Iva atu hiro = 'He or she is afraid or fearful'). It was explained to me as a feeling a person experiences at a threatening or dangerous moment such as being attacked by the enemy, and also as referring to more persistent states in which the person 'lives in fear' that some disaster will occur. Someone who is 'afraid' or 'fearful' experiences 'thudding in the belly' (bvikyo-kyavanto divaru nrivaru) and a sense of 'wanting to run away', although one may be immobilized by the fact that one's legs have become 'soft'. Sometimes a person does not know why he or she feels like this, because the 'fear' remains 'inside his belly' (bvikyokya)⁽⁴⁾. Long term 'fear' is said typically to involve difficulty in sleeping as well, and the person may adopt a huddled stance.

Nota, a young married woman, described to me the 'fear' that she had experienced when she thought she heard some Asara men approaching a garden site she was clearing:

I could hear a noise like shields brushing against the grass and also thudding in my belly. Divaru nrivaru, divaru nrivaru, divaru nrivaru, divaru nrivaru, louder and louder like stones rolling down a mountain. Divaru nrivaru, divaru nrivaru. I thought 'These men will kill me, I must run away'. But my legs were like cooked hondi greens [i.e. weak, lacking in firmness]. My legs were heavy. I could not move.

During a conversation with me about wera, Kurea, a young married man, gave the following description of the long term 'fear' he had experienced after discovering that a woman with whom he had had sexual intercourse in Kainantu ate no food and must therefore be a wera woman:

In the night I could hear this thudding. Divaru nrivaru, divaru nrivaru. I thought 'This is the noise of the wera coming to shoot me,

so I picked up my bow. But the thudding was in my belly. This noise was loud and I could not sleep. I thought 'Where will I run to?' Every night I heard this thudding and thought this.

In keeping with the value placed on military prowess and kyapukya (which involves courage or bravery) 'fear' is not regarded as being an admirable state. However, in certain contexts at least, it is acknowledged by both sexes that most people experience it from time to time.

It seems to be taken for granted that only a few exceptionally strong men can avoid 'fear' associated with their marital relationships. From intensive discussions and analysis of the explanation of actual illness it became apparent that such 'fear' is generally seen as playing a significant role in the causation of illness 'due to a woman'. 'Fear' connected with his marital relationship causes a man's marauha to begin to leave so that he is in a particularly vulnerable state and liable to fall ill if he is polluted by his wife. As subsequent chapters suggest in more detail it is an important underlying principle of Ommura notions of illness causation that for someone to fall ill it is generally necessary that he or she is both exposed to an illness causing agent and in a vulnerable state due to 'fear' associated with that agent or the circumstances in which it typically attacks.

Very powerful warriors of the pre-pacification era are said to have paid little heed to the rules against eating food touched by one's wife or contact with her menstrual fluids (cf. Watson 1973; 249-50). One young married man explained to me that they were so exceptionally strong (kyapukya) that they never suffered from 'fear' (atu hiro) associated with their wives and were thus virtually immune from illness from polluting contact with them.

CONTACT WITH A WIFE'S MENSTRUAL BLOOD AND 'INCORRECT' FLOW
OF 'BLOOD' BETWEEN AFFINES

So far I have been considering mainly how Ommura people represent the marital relationship itself as a source of 'fear' for husbands and of 'anger' for wives. This section will refer to affinal relations in the wider sense. It will be recalled that only a minority of marriages are inter-village with the wife being a representative of a community that is potentially hostile to that of her husband (cf. Meggitt 1964; Mandeville 1979b). More typically affinally linked families reside in the same village. Yonura people place great emphasis on the dangers to village solidarity of tension developing between affines. Such is the pressure to avoid serious rifts within the village that disagreements over affinal prestations tend to be between individuals. It could be argued that the beliefs about illness 'due to a woman' which I have described serve inter alia as a means of displacing underlying tension among male co-villagers onto male-female relationships, consistently with Yonura men's preoccupation about minimising divisions within their own ranks.

I suggest that for understanding the particular danger attributed to contact with a wife's menstrual blood it is also relevant that such contact seems to be symbolically associated with situations in which kya-pairi prestations are not flowing correctly between affines. Such situations are, it will be recalled, threatening to the solidarity and military strength of the village. As will emerge more clearly in the following chapter, metaphorical links are quite often apparent between those circumstances that are considered to lead to bodily harm in the form of nriqa viro and those which are regarded as typical sources of bodily harm from military attack.

We have seen how a nose swollen with stagnant blood (a symptom specifically associated with illness from menstrual blood) is a symptom

characteristic of a whole class of lesser ailments (as opposed to actual illness or nriqa viro) that are associated with situations seen as involving impaired or inappropriate flow of kyapairi or 'blood' prestations between affines. In the following excerpt from a speech made during an ievati male initiation ceremony Omai appears to be connecting bodily harm from contact with one's wife's blood (or that of her quanranre) and damage to village solidarity caused by a group or individual retaining its own pigs so that kyapairi or 'blood' is not flowing as it should between affines.

If your wife doesn't cook your food you can hit her with your hand. But if you hit her so that she bleeds then bad (uahi) blood will stick in your nose like putrid, stagnant (tapitaira) water in a pool. This will also happen if you let her cook food for you while she is in the menstrual house.... You must never draw blood from your wife or go near her while she is menstruating. You must only send blood [i.e. kyapairi] out to her quanranre. If you keep your pigs all for yourself then your wife's brothers will not be happy.

It is sometimes suggested that a man might also develop a swollen nose from contact with the menstrual blood of wives of other members of his quanranre. However, as already indicated, men do not generally take pains to avoid such contact and it is not treated as being sufficient to cause actual illness. Vovanto, a young married man, suggested to me that this was because 'only a man's wife is very angry with him and will make him very afraid (atu hiro)'. A wife's industry, especially in producing pigs, concerns her husband's quanranre kin insofar as they rely on him for aid or contributions to ceremonial prestations. However, in practice, as we have seen, the husband generally shoulders the main burden of affinal prestations to his wife's kin and bears the brunt of tension associated with such prestations.

ILLNESS 'DUE TO A WOMAN' AND STRENGTH

I have observed how wives' alleged capacity to harm their husbands' health is treated, in certain contexts, as an indication that women can,

in a sense, be more kyapukya than men and as casting doubt on the image of men as strong protectors of the community. Men sometimes taunt each other with statements like: 'You say your hand is like iron but if your wife touches your food you will fall ill'. However the diagnosis of illness from contact with his wife does not carry the connotation that the patient is significantly less kyapukya than other men. Both sexes stressed that few men could avoid 'fear' connected with their marital relationships.

The one kind of illness 'due to a woman' not treated as threatening to the image of men as the stronger sex is that from food or drink touched by one's young child. Perhaps this reflects the fact that the wife is not the immediate source of the polluting contact that triggers this disorder. Nor is it regarded as something that wives cause intentionally.

Elsewhere in the Highlands there seems to be an emphasis on distinguishing women's 'bad' or 'antisocial' powers to harm men through pollution from 'good' or socially productive power or strength. I referred earlier to the way in which in Hagen women who threaten men with menstrual pollution may be characterised as exercising strength but in a way that is characteristic of 'rubbish' or unimportant people. Threats posed to notions of male superiority by women's harmful powers are thus explained away.

Power is separated from prestige in this context. Thus even if women are seen as threatening and thus powerful they cannot compete with and claim the legitimate prestige that is due to men (Strathern, M. 1978:194).

Ommura men and women seem to me to place relatively little emphasis on distinctions of this kind. We saw how in this cultural setting strength (kyapukya) carries a certain cachet whether it is seen to be used for socially productive or antisocial ends. Hence stressing the antisocial nature of women's powers would not seem to be a particularly appropriate means of explaining away the threats posed by such powers to images of male superiority.

At initiation and during the eta nranre ceremony before marriage girls

are told that it is 'bad' (uahi) to pollute one's husband, and that any woman who does so deserves to be shamed (kiaunrinro). However men and women with whom I discussed illness 'due to a woman' often said that when a man developed this disorder this was probably an indication that both spouses had behaved in a 'bad', inappropriate or inept (afi) way. The wife ought to have been more careful about observing the rules that prevent such illness from occurring or less ready to deliberately use her harmful powers. However the husband should not have brought the illness on himself, thus undermining his strength for protecting the community, by failing to take adequate precautions against the kinds of contact that cause it, or by allowing his wife to become so resentful. I overheard an argument between my neighbour and two of his brothers in which he claimed that his wife deserved to be beaten for having made him ill, while they argued that the sickness was the result of his own inept way of managing his relations with his wife. One brother suggested that the patient himself should be punished for having enraged his wife so greatly that she might stop working hard.

CHAPTER 7:

ILLNESS FROM AKIAU PHENOMENA, WERA, SORCERY AND LARGE YAMS

Illness from contact with menstrual blood is the only type of nriqa viro that is distinguished by its symptoms. The illnesses described in this chapter are represented by Ommura simply as involving the typical nriqa viro symptoms noted in chapter 5 and are differentiated from one another by their causes.

To give an idea of their relative salience I shall note the frequency with which each was diagnosed in the assochia ceremony and by patients themselves through the process of personal 'seeing'. Most illnesses were submitted to both these diagnostic procedures and the complex relationship between them is analysed in part 3 of the thesis.

ILLNESS FROM AKIAU PHENOMENA

A number of plants, creatures and other natural phenomena are classified as akiau. Most have in common that they are perceived as resembling certain things which are quintessentially domesticated or man made but, unlike these, have 'come by themselves' without human intervention. In myths, they are often represented as having been 'put there' by or as belonging to the uri some of whom are still considered to be present although generally invisible to humans. Thus akiau ova (or kiopara) and akiau handa are wild versions of cultivated yam (ova) and cultivated ginger (handa), and cultivated cordyline (kiara) and areca (ihu) have as their akiau counterparts akiau kiara and akiau ihu which grow wild in the bush and on river banks respectively (cf. Strathern, M. 1980:192).

Akiau phenomena are considered to possess a special potency. With the exception of wild pigs (akiau qarra) which are regarded as highly

dangerous because they can gore humans to death, akiau counterparts of foodstuffs are considered unsafe for human consumption. Akiau substances are also used in war and anti sorcery magic. However only a small proportion of these phenomena are said to have the power to cause actual illness: 'Mother of marsupials', puata swamps, centipedes and the maranda and akiau ebora plants.

In contrast to wera spirits which come from remote foreign places, and sorcerers who are from other villages, akiau phenomena are said by Yonura people to exist only in their immediate environment. In keeping with a pervasive association between exoticism and potency, they are regarded as the least powerful (kyapukya) of illness causing agents, and sickness from contact with them is sometimes explicitly represented as an indication that the patient must be relatively lacking in kyapukya to have succumbed to attack from such a weak force. Thus one may insult a man by claiming that he has so little kyapukya that 'even something akiau can make him sick'. During public healing ceremonies assertions of male superiority were, on several occasions, backed up with statements to the effect that men were so kyapukya that, unlike women, they would never fall ill from contact with akiau phenomena (see chapter 10). Illness from 'mother of marsupials' is an exception. Although the patient has succumbed to attack from a relatively weak force, the negative implications of this regarding his kyapukya are largely cancelled out by the fact that the diagnosis indicates that he must be a skilled hunter. Two of the men who received this diagnosis appeared distinctly flattered by it.

'Mother of Marsupials'

One of the seventeen personal diagnoses and three of the twenty assochia diagnoses for men were of nriqa viro from 'mother of marsupials'. In keeping with the fact that women do not hunt, this was invariably represented as a disorder affecting only men.

The various marsupial species which inhabit Ommura territory are all regarded as akiau and together constitute a distinct animal category, asau. Myths and stories represent marsupials as being the pigs of uri as well as their children. It is said that if a man kills a number of them at one time 'mother of marsupials' will get angry and she or her kin will attempt to capture his marauha so that he falls ill.

In abstract statements about illness causation and explanations given for actual cases of illness, 'mother of marsupials' was always represented as typically attacking men hunting for or trapping marsupials for kyayha, the ceremonial meal of smoked marsupial meat with which a man must provide his wife's kin following the birth of each of her children. This is the only type of occasion on which individual men are likely to kill a number of these animals in a relatively short period of time.

The man who diagnosed himself as ill from 'mother of marsupials' told me that he had been harangued by his wife's brother while preparing kyayha following the birth of his second child several months previously. The akiau agent had been able to capture his marauha because it had 'already begun to go away' as the result of 'fear' that his wife's kin would regard his prestation as inadequate. His affines were already 'angry' that he had not yet delivered a pig promised to them as part of the initial marriage payment. He added that the illness might have been less severe (nronra, literally 'big') had he not, at the time of his attack, been suffering from back pain caused by carrying heavy fence posts.

The process of developing this disorder is generally described simply in terms of the patient's marauha being attacked and captured. However, men and women with whom I talked in detail said that people did not generally fall ill from 'mother of marsupials' or any other illness causing agent unless they were already 'afraid' (atu hiro) at the time of the attack. One informant suggested that most men tended to feel 'afraid'

while preparing for kyayha that they would not succeed in trapping an adequate number of marsupials or that their wives' kin would complain that the amount of meat they received was insufficient. I have referred on a number of occasions to the way in which Yonura people stress that failure to include adequate amounts of meat (kyapairi) in affinal prestations may lead to serious tension within the village thus weakening it in the face of its enemies. A man who is considered to have threatened village solidarity in this way may be severely chastised by his co-villagers.

Akiau Ebora and Maranda

The cultivated or 'true' ebora tree is planted by men in grassland for its leaves which are necessary for cooking pork. Akiau ebora resembles it in appearance in that it also has round, spiky fruit and leaves of a distinctive fan shape. However, unlike the cultivated variety its leaves and branches ooze a sticky red liquid 'like blood' when it is cut. An origin myth tells how, in an attempt to escape from their wives, a group of uri men transformed themselves into a particular clump of akiau ebora that grows between Yonura and Asara. It is taken for granted that cutting the leaves or branches of akiau ebora may lead to illness.

The leaves and fruit of the two ebora varieties differ slightly in colour. However, I was told that people collecting ebora leaves around twilight are often unable to tell the difference between them and tear down what they think are cultivated ebora leaves only to find that they are oozing red liquid. Similarly, women gathering firewood sometimes accidentally pull down akiau ebora branches which are so dry that they are not identifiable as belonging to this akiau variety.

One young man said that illness from this tree generally involved ear ache 'because its leaves are (shaped like) ears'. All other informants denied this and claimed that the symptoms of illness from this source were no different from those of most other kinds of nriqa viro (shortness of breath, feeling hot etc.). There were no personal diagnoses of illness

from akiau ebora, and the only patient who received this diagnoses in an assochia ceremony was Pareh a young married woman whose case is outlined in chapter 10 and who accepted the diagnosis. The only symptoms she reported in response to my questions were shortness of breath and aching all over her body. Men who 'saw' the cause of her disorder denied any knowledge of its specific bodily manifestations.

While on public occasions illnesses from akiau forces are (with the exception of nriqa viro from 'mother of marsupials') represented as women's disorders', in general conversation with myself about illness causation, men and women alike invariably claimed that maranda was as likely to cause sickness in men as in women. Moreover, while it is mainly women who gather firewood, people of both sexes collect ebora leaves for cooking pork.

Maranda is the akiau counterpart of ropa, a vine which grows in the forest and is used for securing rafters. While existing ropa plants are said to have grown from shoots planted by Ommura people, maranda 'was put there by the uri' and it is considered that cutting it exposes one to the risk of falling ill. The two plants are apparently indistinguishable in outward appearance, so that one is easily mistaken for the other. However, maranda, unlike ropa, oozes a sticky, red 'blood like' substance when cut.

In keeping with the fact that gathering ropa for roof construction and repairs is a women's activity, illness resulting from cutting a maranda plant was always represented as only affecting women. There were three personal and five assochia diagnoses for women of sickness from this source.

Informants' general statements about 'fear' making people vulnerable to illness from nriqa viro agents raise the question of what role is ascribed to 'fear' in the causation of sickness from akiau ebora and maranda.

I did not obtain detailed accounts from those who attributed their sickness to either of the two plants of their reasons for having selected these particular diagnoses. Nor was it directly suggested to me that 'fear' played an important role in the causation of nriqa viro from maranda or

akiau eborā specifically. However, Ommura emphasise the dangers that are to be encountered in the forest (where ropa and maranda grow). They describe it as a place where human enemies lurk rather than, as do other Tairora speakers, as the home of dangerous spirits (Watson 1983:16). People of both sexes maintain that only men are sufficiently kyapukya to be able to enter the forest without becoming very fearful. Women claim to be so 'afraid' of the forest that they avoid going there unless they have to gather ropa. Many had stories about how they had rushed back to the village in a panic with their 'bellies thudding' on hearing footsteps or strange noises while gathering the vine.

Centipede

In general accounts of the various illnesses attack from a centipede (taheru) was often mentioned as one of the commonest causes of nriqa viro. I never heard this type of disorder specifically described as something that afflicts only women. However eight of the seventeen assochia diagnoses for women but none of those for men were of illness from this source. Of the fourteen women and seventeen men who underwent personal 'seeing' two of the women and two of the men attributed their disorder to a centipede. On each occasion on which illness from centipede was diagnosed the attack was said to have occurred shortly after the patient had commenced clearing a garden site.

In the abstract attack from a centipede is always represented as occurring under the same kinds of circumstances. The victim is clearing garden land alone on a site that is remote from the village. A stone is dislodged covering a centipede and the creature becomes angry and seeks revenge. The imagery used in describing a centipede's attack is highly standardised. As one young man put it:

If a person...digs under a stone where a centipede lives the centipede will get angry because that man or woman has come inside its house and its garden. It will call other centipedes and they will pick up their bows and arrows and shoot this person's marauha.

He explained that the stone was the centipede's house and that centipedes made ditches (onda) in the ground 'like the ditches that we make in our gardens'.

Similarly in one assochia ceremony the diagnosis was announced as follows:

This centipede was angry because [the woman]...had come inside his house and garden and cut it [the centipede] with a spade. So it picked up its shield and took her by the neck and locked her up in its house [mimes centipede pushing patient under a heavy stone]. That is why she is short of breath and her marauha has gone away.

While the centipede is classified as akiau it does not appear at first to constitute a wild or spirit counterpart of a domesticated species or human artefact. It is also one of the few types of akiau agent for which there is no origin myth. However the ditches which victims of attack by centipede are represented as destroying are clearly, in a sense, in gardens made by these creatures rather than by humans, and the centipede whose house, garden or body is damaged is a non human version of a gardener. The fact that centipedes are said to make their homes in stones is significant as regards the subsequent discussion of why they should be considered to have the potential to cause illness. It suggests that it is, in a sense, the body of an uri or his house or garden that the centipede's victim has damaged or trespassed on. These mythical figures are described as living in stones, and a conventional ending for myths about them is 'and then this uri went back inside the stone'.

In pre-pacification times lone gardeners of both sexes were popular targets for enemy attack and working in distant gardens was regarded as being extremely dangerous. Even today someone who works alone on a site far from the village is considered to be particularly vulnerable to armed or sorcery attack and hence to 'fear'. It is interesting in this context that both the men who diagnosed themselves with illness from centipede had only recently taken up residence in Yonura. A new migrant is said to fear harm from members of his new village of residence as well as from its

enemies. I was told for example that such men avoid going on hunting trips with their co-villagers in case these men turn on them in the forest. (see chapter 9, example iv).

I mentioned earlier how it is occasionally suggested that a menstruating woman should avoid entering new gardens because 'a centipede might smell the blood and make her sick'. Such statements were apparently intended as sanctions and possibly as assertions that their capacity to menstruate constituted a source not of strength but of weakness for women, rather than as statements about illness causation. Attack by a centipede on a menstruating woman was never mentioned in general descriptions of potential sources of sickness. Nor could any informant recall a case of actual illness having been attributed to such attack.

One young man suggested that people suffering from illness caused by a centipede sometimes had 'worms in their faeces' and that babies could develop 'worms in their faeces' although not actually fall ill if their fathers damaged centipedes while digging marsupial traps. No one else could recall having encountered this belief.

Puata

Puata are individually named swampy clearings in bush land. If someone disturbs the ground on these sites 'red water comes out of it'. They are often described as 'ground which has been cleared but no man cleared it' and may hence be seen as the gardens of the uri Quaranetekyoava who created all puata in the Ommura area. I was often told that because these swamps were akiau anyone who had sexual intercourse in a puata or took plants from there ran a serious risk of falling ill. According to one man, men who were attracted to married women sometimes tried to induce them to have intercourse in a puata 'because they say "If I can't marry her I'll make her sick so that she dies and no one else can have her"'. In general statements about illness causation puata was sometimes represented as being a common cause of nriqa viro. However during fieldwork there

were no diagnoses of illness from this source.

Clearly the view that illnesses from akiau agents are primarily women's disorders fits well with the notion of men as the stronger sex and may be seen as situationally denying facts perceived as potentially inconsistent with this image of masculinity. The implication is that only women are likely to be so lacking in strength that they succumb to illness from attack by such weak forces. Representing akiau phenomena as dangerous to women but not to men also reflects and reinforces the principle that the important mystical activities which involve the use of akiau substances (war and anti sorcery magic) are the monopoly of men. That particular powerful substances and techniques are part of male 'secret' (uakiera) knowledge is typically underlined by assertions that exposure to them is harmful to women or uninitiated youths. For example women are warned that they will die if they see the flutes played at male initiation, and boys are told that they will turn to stone if they enter the caves where men store magical substances. Moreover maranda, akiau ebora and centipede are all said to attack people engaged in types of activity that involve entering the forest, moving boulders or harvesting fruit from and hence possibly climbing trees. The notion that illnesses from these agents are typically women's disorders thus affirms the definition of women as too weak to gather the forest plants required for public healing and crop fertility ceremonies or to prepare gardens on their own (which would require climbing trees to be felled for fence posts and perhaps moving boulders). While gathering akiau ebora and maranda are defined as tasks performed by women or by both sexes they are exceptional in the sense that no other activities commonly undertaken by women involve harvesting tree fruit or entering the forest.

ILLNESS FROM WERA

Three women and four men diagnosed themselves with illness from wera, and eight men but no woman received this diagnosis in assochia ceremonies.

While akiau phenomena are located in the immediate Ommura environment and resemble things which are quintessentially ordinary (pigs, gardens etc wera are associated with people, places or events perceived as singularly weird or exotic and outside the sphere of ordinary experience. Following Lienhardt (1961:170) they may be understood as 'images' corresponding to experiences of particular people, places or events of this kind, or as collective representations which metaphorically reflect such experiences.

Wera are not at all precisely defined. While they are sometimes associated with specific places they are never individually named, and people invariably claimed not to know what they looked like. According to one man:

Sometimes you hear a wera whistle [kove, a sound specifically associated with spirits]. But you cannot hear where this whistling is coming from. First you hear it from this side, then from that side, then from up there. They move round like the wind, flying and whistling. But when you draw your bow to shoot them you can only see the wind blowing.

All that is certain about wera is that in keeping with their extreme strangeness and exoticism they are very powerful forces indeed.

Fresh types of wera are created and old ones forgotten as Ommura people are exposed to new experiences and that which was strange to them becomes familiar. The severe earth tremors which have occurred twice in the remembered past are attributed to wera, and possessed people who behave or speak in a particularly bizarre fashion are said to be communicating with these forces. Altered perceptual states induced by alcohol may also be attributed to them. I was told that aeroplanes, guns and Europeans had been regarded as wera until people became familiar with them, and that the territory beyond the Marosina mountain and occupied by Northern Tairor speakers was known as weramata, 'wera's ground', until Yonura people first

visited it in the 1960s. Yonura villagers regard the neighbouring Highlands villages they visit as far too ordinary to be inhabited by wera. However, some consider Highlands towns, even the nearby Kainantu, to be inhabited by such beings. Coastal areas of Papua New Guinea (nambisi) are said to be rife with especially powerful wera, even by those who have worked in these parts.

Beliefs about wera vary somewhat according to initiatory status. Thus, women and children are supposed to regard the sounds of the flutes which men play secretly during male initiation as the voices of wera. Similarly, children are taught that wera have made substances which initiated men prepare according to secret (uakiera) techniques and store in particular caves (hondamu).

While wera are generally potent and dangerous the only ones currently regarded as having the power to cause illness are those associated with coastal areas (nambisi wera) and with towns in general. In abstract statements about illness causation and in the explanation of actual illness these wera are always represented as attacking under specific kinds of circumstances: after the victim has had sexual relations with a wera woman (wera nrahesi), that is, a woman born or brought up in a coastal or urban area, or after he or she has eaten food, smoked tobacco or chewed betel nut grown there. Accepting tobacco or betel nut from a visitor to Ommura from a coastal area is also considered by some to lead to illness from wera, and a few older women and men felt that speaking Melanesian Pidgin caused wera to come from coastal and urban areas and make one sick.

Because wera are so powerful, illness from them does not have the same negative connotations regarding the patient's kyapukya as does illness from an akiau force. In response to my general questions about illness causation both men and women claimed that wera caused illness in people of both sexes. However during assochia ceremonies and on other public occasions I heard statements to the effect that whereas women's illnesses were caused by

contact with akiau phenomena only wera and sorcerers could make men sick. It was explained to me that these comments were about the relative strength (kyapukya) of men and women. Women were so lacking in strength that they succumbed to attack from even the weakest of illness causing forces while men were so kyapukya that it took very strong forces indeed to reduce them to illness. Representing sickness from wera as a 'men's disorder' also implies that only men are sufficiently brave and kyapukya to be able to survive the dangers and hardship of visiting the places where wera are found, and that they alone have access to powerful knowledge and techniques associated with these places.

Most Yonura people speak of visiting towns or coastal areas as being exciting but highly dangerous because of the risk it involves of running out of food or money or being attacked, robbed, ensorcelled, gaoled, stranded or generally harmed by wera. When recounting their experiences in such places men and women commonly mentioned how 'frightened' they had felt, and how they had experienced a constant 'thudding in the belly' (bvikyokyavanto divaru nrivaru). Several informants mentioned spontaneously that Yonura people developed illness from wera when visiting towns or the coast because as soon as they left their home villages they became so 'afraid' that the marauha began to leave them and could easily be captured by these agents. Similarly, I was told that several years ago three Yonura men working in Kavieng had fallen ill after having sexual intercourse with prostitutes there because a local wera had noticed that 'fear' about being poisoned had caused the marauha to leave them, and seized the opportunity to attack. Memu a young married woman gave as one of her main reasons for having attributed her illness to wera, the fact that she recalled having felt 'afraid' on a recent trip to Kainantu (see chapter 9, example v).

ILLNESS FROM SORCERY

Of the forms of sorcery described in chapter 1 only those classified as irama are represented as sources of sickness. Tuhi tends to be invoked after the event to account for sudden death not preceded by an obvious illness. There were no deaths during fieldwork. However in both of the earlier cases described to me in which death attributed to sorcery followed an illness the sorcerer was said to have caused the death by attacking when the victim was already weakened by sickness. The onset of the disorder was not retrospectively attributed to sorcery.

As already indicated the incidence of irama is said to have increased. I was told that it was only after the banning of warfare that irama, or indeed any form of sorcery had become a common cause of illness. When talking about illness causation in general terms people often spoke as if most sicknesses could be attributed to sorcery perpetrated by enemy villages.

Sorcery was in fact the commonest diagnosis. Four women and six men attributed their illnesses to this source and one woman and six men were diagnosed in assochia with illness from irama.

We have seen how inter-village fighting is represented as being typically sparked off by offences involving harm to or appropriation of the four 'basic resources': men, women, vegetables and pigs. Sorcery attacks are attributed to the same kinds of grievances. It is taken for granted that a village which suspects another of an offence against its 'basic resources' is likely to resort to sorcery if it does not launch a military attack.

On several occasions I heard statements to the effect that just as fearless men would never succumb to the enemy in war, so irama would not make people ill unless they were already so 'afraid' at the time of the attack that their marauha had begun to go away. At the same time, the

general tenor of conversation during sorcery scares suggests that it is taken for granted that most people feel 'afraid' at these times. Similarly, I heard men and women publicly mention that they had been feeling 'afraid' since sighting sorcerers prowling around near their homes or gardens.

It is sometimes claimed that sorcerers try to harm the most valued members of the enemy village, and assertions of male superiority are often backed up by claims that it is usually men rather than women who are ensorcelled because they contribute much more to ensuring the survival of the community. Where a woman is diagnosed with illness from sorcery it is generally claimed that the sorcerer mistook her food leavings or bodily emissions for those of a man.

Representing sorcery illness as a 'men's' disorder is consistent with the principle that men are the more kyapukya sex and hence able to resist succumbing to attack from all but the stronger illness causing forces. Irama is more powerful (kyapukya) than akiau phenomena but somewhat less so than wera. This is in keeping with the assumption that it comes from other villages in the area and is thus midway in terms of exoticism between wera which are associated with very remote places and akiau phenomena which are located in the immediate Yonura environment.

ILLNESS FROM LARGE YAMS

An ovanronra is a yam, of any variety, that is very much larger than average. There were two assochia diagnoses for women of illness from eating such yams and two cases in which women determined through personal 'seeing' that their sicknesses had been caused by ovanronra. No men's illnesses were attributed to this source.

Ovanronra was never spontaneously mentioned in the context of general descriptions of the various types of illness. When I enquired about it all informants said that it was taboo or prohibited (aoira) to eat large

yams grown in one's own garden. However, only a few claimed that breach of this taboo could actually lead to illness. Views on this did not vary systematically according to age or sex.

Ovanronra are not, like akiau phenomena, wera and sorcery substances considered to be inherently powerful or to have magical properties. Apart from their size, the only extraordinary thing about these yams, in Ommura terms, is that a personal idiom is used in referring to them. The explanation given to me for the rule against eating one's own large yams was that because they were so big they felt 'shamed' (kiaunrinro) when they were 'uncovered' (i.e. dug up). Hence those who grew them should give them away to other people who had not seen them in an 'exposed' state and would not therefore make them feel 'shamed'.

These yams are closely associated with marriageable young women. We have seen how in the kioparanrahesi myth the first woman is made out of a large yam by her future husbands. Similarly, one of the women who diagnosed herself with illness from ovanronra claimed to have 'seen' the cause of her disorder in a dream in which an attractive young woman sat on an extra large yam and warned that anyone who ate the yam would soon die. In order to make yams grow quickly men sometimes attempt to entice them out of the ground with the same jew's harp melodies and love songs with which they attempt to entice young women. In several myths, explicit analogies are drawn between training rambling and undisciplined yam leaves to grow up stakes and disciplining young women through marriage.

A woman who attributed her illness to ovanronra implied that it was only because she was so lacking in kyapukya that such a weak force had reduced her to sickness (see chapter 9, example 11). That these yams are regarded as relatively weak illness causing forces is consistent with the fact that, like akiau phenomena, they are less exotic than wera and sorcerers in the sense that they grow in the immediate Yonura environment.

WAR ENEMIES AND ILLNESS CAUSING AGENTS AS SOURCES OF BODILY HARM

Why should the agents or circumstances described in this chapter be considered capable of causing sickness?

The general circumstances under which 'mother of marsupials', maranda, centipede and sorcerers attack are regarded as typical sources of 'fear' so severe that it causes the marauha to go away leaving the person vulnerable to illness. However someone suffering from 'fear' is not considered likely to fall ill unless he or she is also attacked by a nriqa viro causing agent.

Nor can the fact that they are akiau or wera in itself account for the fact that coastal and urban wera and those particular akiau agents just described are perceived as potential sources of sickness. While akiau phenomena and wera are all considered to be intrinsically potent most of them are not seen as having the power to cause illness.

In the discussion of illness 'due to a woman' we saw how eating food touched by someone who is 'angry' with one, or coming into contact with their blood, is perceived as being particularly harmful under certain conditions. Many of the circumstances leading to illness from akiau agents or wera involve, in a sense, contact with the 'blood' of members of hostile groups or eating food that they have touched. Yonura people's relationships with the uri who produce and own akiau phenomena are clearly analogous in certain respects to the relations between Yonura and neighbouring villages-groups which it has traditionally regarded as actual or potential enemies. Uri are outsiders who live near Yonura, grow akiau counterparts of many of the plants that its inhabitants cultivate and, like them, breed pigs (marsupials) and make gardens in which they dig drainage ditches. Thus cutting maranda or akiau ebora which exude red 'blood like' substances brings one, in a sense, into contact with blood

of a member of a hostile group. Some akiau ebora are actually said to be uri men transformed into trees.

Urban and coastal wera cause illness specifically in those who eat 'their' food or have contact with 'their' women. Relations with these spirits also resemble relations with humans from other groups. Wera are very much outsiders in relation to the world of everyday Ommura life, and while they are not elaborately personified, Yonura people do transact with them in ways which parallel their transactions with other human groups. For instance, one should not eat local food in a town or on the coast, before burning a portion of it as reciprocity (hini ama) for the wera on whose 'ground' (mata) it was produced.

More generally, these notions of illness causation must, I suggest, be understood in relation to Ommura conceptions about the causes of war. The circumstances in which they represent these illness causing agents as attacking mirror with one possible exception those circumstances represented as typically triggering military attack.

In the case of irama sorcery this is particularly clear. It is seen as a response to exactly the same grievances as those to which inter-village fighting is attributed, that is grievances concerning harm to or 'theft' (mbuara) of men, women, pigs or vegetable crops. Similarly, given the association between centipede and uri, both of which make their homes in stones, working on a site where a centipede has dug ditches and entering or taking plants from a puata both involve, in a sense, trespassing on the gardens of uri and damaging or appropriating their crops. Trapping marsupials involves harming and stealing pigs belonging to uri, and cutting akiau ebora and maranda causes physical harm to members of uri groups. There are also parallels between eating local food and having sexual relations with women in coastal and urban areas which wera inhabit and 'stealing' food and women from other groups. In many contexts in Ommura life cash payments do not constitute adequate reciprocity for

cooked food, and while Ommura men say they generally pay the coastal and urban women with whom they have sexual relations the latter's kin do not receive payment. Ovanronra is the one kind of agent that does not clearly fit this pattern although there are perhaps parallels between eating or 'uncovering' and hence 'shaming' such a yam and assaulting or 'stealing' a woman.

Conversely, those akiau phenomena that do not cause illness are uri counterparts of cultivated plants which are not eaten rather than the four 'basic resources' over which neighbouring villages fight (men, women, pigs, food). The only exceptions of which I am aware are wild boars which are represented in a myth as uri men transformed into animals. That they are not considered to have the potential to cause illness may be related to the fact that they are feared for their powers to cause bodily harm more directly, by goring people with their tusks. Similarly, the coastal and urban wera which cause illness are the only ones of these spirits that 'own' food and women that Ommura people can appropriate. Nor are there any wera equivalents of men or pigs.

Yonura people recognise one other class of 'spirit' besides uri and wera. Significantly, tovesi are both the only 'spirits' that are never associated with sickness and the only ones with which Yonura people never enter into relationships that parallel their relationships with other groups of humans.

Ommura notions about bodily harm in the form of sickness are thus quite systematically interrelated with their conceptions of the typical causes of bodily harm resulting from war or inter-group fighting. The circumstances thought to cause illness 'due to a woman' are metaphorically linked to situations in which affinal obligations are not being adequately discharged - situations perceived as potentially weakening the village in the face of its enemies by causing internal discension. The illness causing circumstances described in this chapter appear as analogous in

certain respects to those types of situation represented by Yonura peoples as triggering inter-group fighting. They can thus evoke a sense of impending bodily harm.

CHAPTER 8:

THE PROCESS OF ILLNESS CAUSATION AND THE SEMANTIC STRUCTURE OF ILLNESS CATEGORIES

Before going on to examine the processes of explaining, diagnosing and treating illness, it is useful to summarise the characteristic semantic structure of nriqa viro categories and Ommura views of the process of illness causation.

THE PROCESS OF ILLNESS CAUSATION

Most nriqa viro causing agents have magical properties or mystical powers, and the circumstances under which they attack are perceived as analogous to those situations regarded as typical sources of bodily harm from military attack. In addition, 'fear' (atu hiro) is often represented as playing an important role in illness causation. For someone to fall ill, it is usually necessary that he or she is exposed to an illness causing agent or set of circumstances and is also suffering from 'fear' associated with it, 'fear' so severe that the marauha 'begins to leave' and can easily be captured.

In general accounts of illness causation, and in diagnosis and therapy, the processes through which the agent causes the disorder are often represented in terms of the idiom of war attack. It is said, for instance, to 'capture' the patient's marauha. Just as attack from enemy villages is not something for which the victims are morally responsible, so harm from most nriqa viro causing agents is not the outcome of serious moral misdemeanours (unrasi conduct). The activities which expose people to attack from these agents are often simply part of their ordinary work - gardening or gathering firewood or vines for securing rafters. The taboo against eating one's own extra large yams is regarded as a very minor one, and there is no rule

against trapping marsupials or visiting towns and eating food there or having sexual relations with local prostitutes. Moreover attack from most illness causing agents is, like war attack, unpredictable or unavoidable. It is not generally possible to tell whether the stone one is about to shift covers a centipede or whether dry wood is akiau ebora. Nor can one avoid eating while on visits to towns.

Only in the case of those disorders classed as illness 'due to a woman is the patient likely to receive some blame for having brought the illness on himself. He may be criticised for neglect of the rules seen as protecting against this type of illness or for having enraged his wife so much that she harms his health. Such criticisms may have a moral aspect insofar as they carry the implication that wilfully neglecting one's own health is an abnegation of the responsibility to maintain one's strength in order to protect the community. However the man is blamed for foolhardiness as much as for moral transgression.

To this extent Ommura models of illness causation are what has been termed as 'exopathic' in the comparative study of medical ideas. That is, disease is 'viewed as an external object of some kind by which the body is invaded', rather than as 'endogenous', as 'a matter of internal disorder or derangement, of being out of step with the environment' (Loudon 1976:36-37; cf. Pill and Stott 1982; Herzlich and Pierret 1986; Salzberger 1976). At the same time, a person's state of health at the time of the exposure to an illness causing agent is sometimes represented as affecting his or her vulnerability to sickness. Thus men, whose explanations for their illnesses are outlined in the following chapter, suggested that they might not have fallen ill had they not been suffering from minor ailments (ati nriqa), when the agent attacked. Resistance to illness, at least from the less powerful agents, also depends on one's degree of kyapukya and, more generally, one's capacity to conduct one's life in sufficiently astute (avu avu) a fashion to be able to avert attack from harmful forces.

It seems that powerful people's resistance to illness is considered to derive not only from their physical strength or control over magical forces but also from the fact that they do not easily become 'fearful'. We have seen that exceptionally kyapukya men are said not to suffer from 'fear' concerning their wives. Conversely, falling ill can imply that one is lacking in courage. Given the value placed on bravery in protecting the community perhaps there are moral overtones here.

Avoiding illness is not, as for people of certain other cultures, a matter of fitting in with an established moral order or maintaining an ideal state of harmony between people or between humans and supernaturals. For a Zulu 'good health means the harmonious working and coordination of his universe' (Ngubane 1977:27). Similarly, for the Maya of Zinacantan 'The individual himself, his worldly contemporaries and the gods are locked in a triple web of relationships: and a frequent expression of disarticulation in this set of relationships is illness....' (Fabrega and Silver 1973: 8; cf. Harwood 1970; Turner 1968). In Ommura, by contrast, avoiding sickness is more a matter of conducting one's life astutely and strategically so as to avert attack from the various harmful and unpredictable forces in one's environment and of having sufficient power to subdue or influence those forces. A common theme in nightmares generally interpreted as a sign that the dreamer is threatened with illness, is that massive hostile plants are rapidly growing in on one's house, threatening to crush it. Only through mustering sufficient kyapukya to hack them to pieces, or sufficient cunning to wend one's way out of the jungle, can one escape being choked to death.

The general circumstances under which most illness causing agents attack are regarded as typical sources of 'fear'. In most cases this is not simply 'fear' arising from the knowledge that the agents or circumstances are in themselves potentially harmful. A man trapping large numbers of

marsupials is considered likely to become 'fearful' not only because he knows that 'mother of marsupials' might attack but also because he is preparing to present his wife's kin with a ceremonial meal of smoked marsupials (kyayha) and fears that his affines may accuse him of failing to provide sufficient meat. Similarly, the 'fear' that makes a man vulnerable to illness 'due to a woman' arises not simply from the knowledge that his wife has the power to make him ill but, more generally, from the fact that he feels that she might withdraw her labour.

Many of the situations that Yonura people represent as constituting typical sources of 'fear' are not seen as being linked to sickness. For instance, hunting wild boars or living under threat of arrest by the police are generally considered to generate 'fear' (atu hiro) but it is never suggested that exposure to these kinds of circumstances might lead to illness. Why should only 'fear' associated with those circumstances or agents described in the last two chapters be regarded as making people vulnerable to nriqa viro? It may be significant that in many cases the 'fear' to which sickness is attributed arises out of situations seen as involving particular risk of being attacked or ensorcelled by hostile outsiders. However, the answer to this question would have to be based on more comprehensive data than could be obtained in the present study, regarding the kinds of circumstances that Yonura people regard as typical sources of 'fear'.

In describing how they had undergone personal 'seeing' (see chapter 9) people often attributed the 'fear' component of their disorders to the fact that the 'fear' which had made them vulnerable to nriqa viro had persisted after the marauha was captured. It had remained 'inside the belly' (bvikyokya) so that they had been unable to recall its specific source and experienced it only in a generalised form.

Beyond this there was little elaboration regarding pathogenesis. In diagnosis and therapy and in general statements about illness causation the

process through which someone becomes ill was usually represented in terms of the agent's marauha capturing the marauha of the patient - an idiom which is used for pointing to and gaining a sense of control over processes felt to be beyond comprehension in terms of ordinary language and experience. The nearest I found to explanations for individual symptoms were statements that particular patients were 'short of breath' because the afflicting agent was holding them tightly or references to the notion that there is a link between incorrect flow of 'blood' between affines and the swelling of the nose which affects those suffering from illness 'due to a woman'. This is in keeping with the relatively low degree of emphasis on precise discrimination of bodily symptoms of nriqa viro.

In her recent synthesis of literature on this culture area Paula Brown writes that

In the [New Guinea] highlands few ailments are believed to be of 'natural' causes, that is, uninfluenced by sorcerers, ancestor ghosts or spirits (1978:62).

As Evans-Pritchard stressed, it is necessary to distinguish between that which is supernatural from the anthropologist's perspective and what is supernatural to the people whose beliefs he or she is reporting (Evans-Pritchard 1965:109-110). Ommura themselves clearly do not regard most ailments as being caused entirely or even predominantly by supernatural forces. Nor, given the current scientific emphasis on psychosocial and psychosomatic factors in illness causation, can their explanations for illness be characterised as wholly mystical from an external perspective.

Ati nriqa (minor ailments) are clearly understood as being physically caused insofar as causes for them are postulated. Moreover, to describe an illness as the outcome of attack by a sorcerer, wera spirit or akiau force is often to attribute it in part to 'psychological stress' induced by exposure to a particular set of circumstances regarded as typically sources of 'fear'. In this sense there are interesting parallels between the causes

of nriqa viro taken as a body and some of those lists of 'stressful life events' devised by psychologists and sociologists for studying psychosocial factors in the aetiology of disease, and based on the premise that the likelihood of becoming ill may be increased by the experience of such events (e.g. Holmes and Rahe 1967; Brown and Harris 1978).

The absence of any precise specification of the process through which 'fear' leads to nriqa viro is also paralleled in contemporary scientific and popular thought concerning psychosocial aspects of illness causation. As Totman notes in an overview of the psychological and sociological literature on this subject:

The idea that a person's mental condition affects his chances of becoming ill ... has been alluded to at virtually every point in history. During the past thirty years, many attempts have been made to explain the nature of the interaction scientifically ... not one of these attempts has really succeeded ... It is important not to be misled by the now popular term 'psychological stress'. To say a person succumbs to illness because of 'stress' is, of course, not an explanation in any sense. It is simply a rephrasing of the problem. The fact that the term 'stress' has crept into the vernacular reflects the failure of attempts at explanation not their success (1979:17).

It would be interesting to investigate whether some of the sorcerers and spirits invoked by the other New Guinea Highlands people in explaining illness might similarly be metaphorically linked to social situations regarded as in some sense 'stressful'.

THE SEMANTIC STRUCTURE OF ILLNESS CATEGORIES

Nriqa viro generally involves 'fear' and absence of bodily health or well-being, the immediate cause of which is attack from a particular illness causing agent. Most agents are represented as attacking under very specific circumstances so that naming the illness constitutes a statement about the patient's circumstances or recent activities and sometimes by virtue of this, his or her attributes or capabilities. Thus the diagnosis of sickness from 'mother of marsupials' implies that the sufferer has been hunting, that his

wife has recently given birth and that he is a skilled hunter. The diagnosis of illness from wera implies that the patient has visited a town or coastal area and that he or she is thus quite brave and kyapukya and may have access to prestigious knowledge associated with such places.

Most illness categories have specific connotations regarding the patient's degree of kyapukya. The relative potency of the various illness causing forces varies according to the extent to which they are regarded as exotic and remote from everyday experience, and sickness from the more powerful agents (wera, sorcery) does not imply that the patient is lacking in kyapukya to the same extent as does illness from any of the less potent forces. The logic behind this is that people with little strength are incapable of resisting the influence of even the weakest of illness causing agents while it takes a very strong force to reduce to sickness someone with considerable kyapukya (cf. Watson 1983:309).

On public occasions when an exaggerated image of male strength and superiority comes to the fore, illnesses caused by the weaker forces tend to be represented as 'women's' sicknesses and those from the more powerful forces as 'men's' disorders (cf. Last 1976; 1979). Outside this kind of context most types of nriqa viro are not represented as being sex specific. Hence illness categories, as they are evoked in particular contexts, either affirm the image of men as strong protectors of the community or reflect a general uncertainty regarding the validity of this definition of masculinity.

The connotations of nriqa viro categories regarding the relative kya-pukya of women and men are often made explicit. In addition, these illnesses have networks of more diffuse ideological associations that are not generally spelled out. I have noted on a number of occasions how illness 'due to a woman' may evoke a set of principles concerning the importance of maintaining good relations between affines who are co-villagers. Given the systematic way in which Ommura notions about illness are interrelated with

their conceptions of the typical causes of war, most nriqa viro categories may also be seen as reflecting a complex of values and attributes concerning the threats posed by neighbouring villages, the unpredictability of relations with these groups and the importance of strength and courage for resisting attack from them.

To attribute a sickness to a particular agent is also, in most cases, to attribute it to 'fear' associated with the general circumstances under which that agent attacks. Thus the diagnosis of 'illness from wera' implies that the patient fell ill in part because he or she became 'fearful' about being in a town or coastal area. A man who diagnoses himself with illness 'due to a woman' may be articulating the experience of 'fear' arising out of his relationship with his wife. Perhaps in this sense, most nriqa niro categories can be seen as collective representations which condense or metaphorically represent distinctive 'stressful' experiences arising out of the specific conditions of Ommura social life (cf. Good 1977).

Nriqa viro categories thus have bodily, affective, evaluative, ideological and sociopolitical dimensions of significance. By virtue of the way in which they draw together ideological with emotionally charged physiological referents they would seem to constitute suitable vehicles for particularly potent ideological statements. (Turner 1967:107; Young 1976; Bordieu 1977:218). In what follows it will be seen how the relative emphasis on different aspects of these multifaceted categories varies according to context and how they are used for a variety of communicative purposes.

PART 3: THE MANAGEMENT OF ILLNESS

INTRODUCTION TO PART 3.

Before going on to analyse the procedures for treating nriqa viro it is useful to outline their respective aims, the sequence in which they are performed and the main changes that have occurred in the management of sickness following the introduction of the assochia ceremony about two years before my arrival in the field. In Ommura, as elsewhere, therapeutic practices are constantly developing and changing.

During fieldwork, four procedures for treating nriqa viro were in use: personal 'seeing' which is performed by the patient himself or herself, and assochia, vuha and uaha which are public ceremonies performed collectively by the village's men. None of these treatments is used for any other type of disorder.

We have seen how Yonura people regard biomedicine as potentially effective against nriqa viro as well as minor ailments. Yet they avoid using the mission aid post when suffering from nriqa viro for fear of being ensorcelled there by enemies from Koronumbura or Asara. This type of disorder is considered to lower resistance to harm from sorcery.

The four therapeutic procedures cannot usefully be divided into diagnosis and therapy, as identifying the cause of the disorder is regarded as being intrinsically therapeutic. Treatment for nriqa viro has four main therapeutic aims: (i) weakening the afflicting agent's harmful influence over the patient through symbolically attacking or making peace with it, or by discovering its identity and thus depriving it of the invisibility from which it derives much of its power; (ii) strengthening the patient's body with 'strong' substances; (iii) washing away the sickness, and (iv) enabling the marauha to return to the body by alleviating the 'fear' that caused it to leave.

Managing nriqa viro also involves affirming the validity of the image

of men as strong protectors of the community and associated definitions of femininity.

Prior to the introduction of assochia, personal 'seeing' and/or some self administered hema bark were considered sufficient treatment for milder cases of nriqa viro. Where the sickness was judged to be more serious uaha and/or vuha were performed, usually after personal 'seeing'.

Now, most patients still take hema bark and undergo personal 'seeing' as the first stage of treatment. However, personal 'seeing' is nearly always followed by assochia. Yonura people say that they originally adopted assochia as a means of neutralising the irama sorcery that was increasingly threatening their health but soon began to use it for treating nriqa viro. Sicknesses are said to have become so much 'stronger' (more kyapukya) following pacification that only assochia is sufficiently powerful to control them.

It seems clear that, since at least the early 1950s, Ommura have, like other Guinea Highlanders, been hit by a number of epidemics of yaws, influenza and gonorrhoea, diseases which were probably introduced or exacerbated by European 'contact'. A government inspection in the early 1970s found no active case of yaws. However, information about health in the area prior to the establishment of the patrol post and mission is scanty and I am not able to say whether influenza, gonorrhoea or other diseases (biomedically defined) have in fact increased following pacification.

This is the first time in remembered history that most cases of nriqa viro have been treated in public healing ceremonies rather than simply by the patient. Assochia is also more elaborate than any other healing ceremony in use now or in the remembered past and seems to involve more spectacular displays of male kyapukya. The introduction of this ceremony marked an overall elaboration of men's collective healing activities and an extension of their control over the treatment of illness in women.

Where the disorder is judged to be serious assochia is followed by vuha. Uaha is considered to have been largely displaced by assochia and was only performed twice during my stay, on both occasions immediately after assochia.

During fieldwork one man underwent two assochia ceremonies for a single episode of nriqa viro, and there were two cases of sickness in women in which the patient underwent two vuha ceremonies. Otherwise the various treatments for nriqa viro were not performed more than once for a single episode of sickness. This reflects the fact that someone who remains ill for an extended period comes to be regarded as a chronically disabled person who does not require treatment rather than as a nriqa viro sufferer.

Personal 'seeing' involves the patient attempting to induce an experience known as 'seeing one's sickness' or 'seeing the cause of one's sickness'. This therapeutic procedure is often represented as a means of alleviating the disorder through exposing and thereby weakening the agent that has captured the marauha. On another level it is perceived as a process of identifying, articulating and overcoming the specific 'fear' felt to have caused the sickness.

It is considered that the patient is unlikely to make a satisfactory recovery unless he or she 'sees' the cause of the disorder. Previously personal 'seeing' was the only means of inducing this experience. Now, while personal 'seeing' is still generally regarded as important, it is thought necessary for its effects to be augmented by assochia. Assochia may also enable patients who have not attempted or succeeded at personal 'seeing' to 'see' the causes of their disorders.

Assochia performances are usually attended by most people in the village. In this ceremony men chew a tree bark in order to enable them to 'see' the afflicting agent and then communicate their visions to the

other participants. In most cases the aim is both to provide the patient with a second opportunity to '~~see~~ the sickness' and to enable all participants to 'see' the cause of the disorder so that they can collectively overcome it. It seems to be generally taken for granted that because sicknesses are now so 'strong' it is no longer sufficient for them to be 'seen' only by the patient.

Until the introduction of assochia it was rare for anyone other than the patient to claim authority to decide on the causes of nriqa viro in adults. Elderly people recalled two men, both dead before the establishment of the patrol post, who had been credited with special powers for helping people interpret dreams concerning the causes of their sicknesses. However they were apparently only consulted on the rare occasions on which the patient was unable to interpret the dream himself or herself. Moreover, they sometimes refused their services on the grounds that only the sufferer could discover the 'true' (tanruva) cause of the disorder.

Assochia thus involves an extension of men's control over the diagnosis as well as the treatment of nriqa viro. Moreover, some men claim that attending assochia can cure infertility in women. Traditionally the treatment of infertility and other disorders defined as gynaecological has been an exclusively female activity.

In addition assochia involves attempting to strengthen the patient, alleviate his or her 'fear' and 'wash away' the sickness. It is also seen as a means of protecting the community against illness from irama sorcery. Each ceremony involves neutralising sorcery substances prepared by the enemy to harm participants. Moreover the village's men explicitly treat assochia performances as an arena for dramatically affirming the image of themselves as strong vanquishers of life-threatening forces.

It is often said that 'only the sick person can see what is inside his or her belly', that is, identify the source of the 'fear' causing the

sickness. Hence, if assochia and any subsequent yuha are to be maximally effective in alleviating the disorder the agent focussed on in these ceremonies must be the same as that identified through any prior personal diagnosis. The men who identify or name the afflicting agent in assochia therefore try to affirm the personal diagnosis wherever they feel that this is possible. However, when, as quite regularly happens, the patient's own diagnosis is perceived as inconsistent with the image of men as strong protectors of the community, they 'substitute' for it one that affirms this image. Chapter 10 shows how, when questioned after the event, these men indicated that in 'changing' the personal diagnosis in this way they were consciously according ideological or sociopolitical goals priority over purely therapeutic ones. They felt that the treatment would have been more effective in alleviating the patient's condition had the personal diagnosis been affirmed in assochia.

There are thus differences in the logic according to which diagnoses are selected in assochia and personal 'seeing' respectively. In naming the sickness in personal 'seeing' the patient is attributing it to 'fear' associated with a particular agent and perhaps articulating the experience of that 'fear'. In assochia, by contrast, the primary emphasis is often on using illness terms as vehicles for ideological statements.

In uaha the men of the village, dressed in full war regalia, 'attack' and 'frighten away' the afflicting agent and attempt to 'wash away' the sickness. The participants then combine to make the patient feel better by removing the 'bad smell of the sickness'. In addition, uaha is explicitly seen as providing an opportunity for kin to vent their 'anger' at the patient's condition. It also constitutes a setting in which the men of the community engage in displays of their kyapukya, while women act as spectators and helpers.

The 'attacks' on the afflicting agent in assochia or uaha can make it

'angry' with its victim so that it seeks an opportunity for revenge. Hence, following either of these ceremonies, the patient may remain so 'fearful' that the marauha cannot return to the body despite the fact that the agent has been forced to loosen its hold. The sickness thus persists, and a major aim of vuha is to enable the marauha to return after assochia or uaha by alleviating the patient's 'fear'. The participants then 'hold' the marauha so that it cannot be recaptured. Vuha also involves 'making peace with' the afflicting agent and attempting to strengthen the patient's body and 'wash away the sickness'.

CHAPTER 9:

PERSONAL 'SEEING'.

Someone who decides that they are nriqa viro often immediately attempts to 'see the sickness' or 'see the cause of the sickness' through a process called 'seeing the illness by oneself', and which I shall refer to for brevity's sake as personal 'seeing'. In fourteen of the eighteen cases of nriqa viro that occurred in women during fieldwork and seventeen of the nineteen cases that occurred in men the patient claimed to have determined the cause of his or her disorder through this process.

'Seeing' the cause of one's sickness involves undergoing an experience in which one perceives 'in the same way as in a dream (ruvata)' an image of the agent holding the marauha. The image is so vivid and clear (depihi) that patients experience a sense of absolute certainty that they are 'seeing' the real or true (tanruva) cause of the disorder and its probable outcome. This experience is always described as a visual one. Thus the verb used is that for seeing (taquena), never one of those derived from iero 'to hear' or nrato (ear) which are used to refer to intellectual processes such as learning initiation lore or making a judgement after weighing up the evidence put forward in a dispute.

'Seeing' the cause of one's sickness is regarded as being intrinsically therapeutic and may provide a guide for further treatment. As I have already indicated, it is a fundamental therapeutic principle that nriqa viro in adults is not likely to be successfully cured unless the patient has undergone this experience. Nriqa viro sufferers who do not 'see' the causes of their disorders through personal 'seeing' may still do so through assochia.

Personal 'seeing' is carried out in private by the patient alone. Hence my account of the process is based mainly on interviews and

reported case material. To begin with I outline the aims and underlying principles of personal 'seeing' as described to me in the abstract in interviews. I then present a selection of case material obtained mainly by questioning a number of people about their reasons for having attributed their sicknesses to particular causes as the outcome of personal 'seeing'. In addition, I observed several instances in which people who were uncertain how correctly they had 'seen' the causes of their illnesses discussed the matter with others, making explicit their reasons for considering or rejecting certain diagnoses. This material also throws light on the way in which personal 'seeing' is understood as a means of bringing to the surface and alleviating the 'fear' felt to be causing the disorder. The final section is concerned with the different ways in which men and women 'saw' the causes of their illnesses.

ABSTRACT ACCOUNTS OF PERSONAL 'SEEING'

I asked eight women and thirteen men (including two assochia experts and a vuha expert) to tell me how and why people attempted to 'see' their own illnesses and what effect this experience had on the disorder. Two of the men (non-experts) and three of the women claimed never to have undergone personal 'seeing' and to know little about it. The other responses varied in degree of detail but were quite consistent.

In order to 'see the illness' through personal 'seeing' it is necessary for the patient to have carefully weighed up all likely explanations for it. This is essentially an intellectual process described in terms of verbs for 'thinking' and 'knowing'. Only when it has been more or less completed can the visual experience occur. 'Seeing one's illness' thus involves reasoning as a prelude to revelation. It was stressed that a person's capacity for successfully 'seeing the illness' depended on the extent of his or her intelligence and ability to think and reason clearly and efficiently (dapihi iero).

Attempts to 'see the cause of the disorder' in this way are not always successful. The patient may still be uncertain of its causes after many days of deliberation. Clarification may then be sought in discussing the matter with others before resuming the attempt. Even this does not necessarily lead to success however. Failure to 'see' the illness may be taken as an indication that the afflicting agent is extraordinarily powerful rather than that the sufferer is lacking in intelligence.

Frequently the sick person is aided in the attempt to determine the cause of the illness by a dream (ruvata) which provides a clue though not a distinct indication. Having such a dream does not in itself constitute 'seeing the illness'. Its significance has to be interpreted. There are some standardised dreams which are treated as definite indications of specific causes or outcomes. For example, dreaming that one has been shot with an arrow of the haveryika type constitutes reliable evidence that one has fallen victim to irama sorcery and that one's health is likely to deteriorate further⁽¹⁾. A dream in which one falls from a high tree or loose stones roll down a mountain indicates that one is about to die.

A patient who succeeds in 'seeing the cause of the illness' is thereby loosening its hold over the marauha. 'We can see it gets frightened and starts to run away'. In keeping with a pervasive association in Ommura culture between secrecy or invisibility and potency, depriving the agent of its invisibility deprives it of its power over the patient⁽²⁾.

Ommura distinguish two ways in which therapy for nriqa viro can alleviate the disorder. It can 'finish the sickness', that is restore physical fitness sufficiently for the patient to be able to resume a normal work routine. Secondly, it can enable the patient to 'sleep properly again', that is, significantly alleviate the 'fear' and general physical discomfort associated with the disorder. We have seen that nriqa viro involves 'fear' (atu hiro) as well as absence of physical fitness.

Where both kinds of recovery have taken place the sickness has been completely cured. However, it is generally accepted that treatment often leads to significant improvement in one of these respects but not in the other.

The experience of 'seeing what is holding one's marauha' is said to reduce the 'fear' component of the sickness. As one woman put it:

While something is holding the marauha the sick person is afraid (atu hiro) so that he cannot sleep properly. If he sees what is holding his marauha then it [the afflicting agent] becomes afraid and starts to loosen its hold so that he [the patient] is able to sleep.

In some cases it may also lead to improvement in the patient's bodily condition through a process that is never spelled out in abstract accounts of personal 'seeing' but is implicit in the explanations for specific cases. Personal 'seeing' is also considered to have been successful where it has enabled the patient to come to terms with the prospect of impending death or chronic illness.

Personal 'seeing' is generally regarded as important for setting the patient on the road to recovery. However it is usually considered necessary to augment its effects with assochia in which the disorder is seen by all the participants. It is only in the case of sickness judged to be terminal that personal 'seeing' may be regarded as sufficient in itself. If it does not enable the patient to come to terms with his or her fate and reduce the 'fear' then vuha rather than assochia is indicated.

Men and women described an especially effective way of 'seeing the illness' which involves the patient not only exposing the identity of the agent but also 'seeing' himself force it to retreat by uttering terrifying war cries, or 'killing' it with an arrow. It was generally agreed that while there was no difference between the sexes in the ability to 'see the illness' in the ordinary way only men had the degree of kyapukya necessary for this special kind of 'seeing'.

ACCOUNTS OF SPECIFIC INSTANCES OF PERSONAL 'SEEING'

In keeping with the fact that the patient alone is responsible for diagnosis through personal 'seeing' people who were undergoing or had undergone this process did not ordinarily make explicit their reasons for favouring or rejecting particular explanations for their disorders. There were exceptions when, after lengthy deliberation, a patient remained uncertain of the causes of the illness and sought to clarify the matter through discussion with others. It was also exceptional for the patient's views on how personal 'seeing' had affected the disorder to be spontaneously made explicit. Responses to direct questioning about such matters varied in their detail. Some of those who had recently undergone personal 'seeing' responded simply by naming the agent to which they attributed the disorder. Others answered more fully and their responses are described below. They reveal aspects of the underlying logic of personal 'seeing' that were not explicit in the abstract accounts.

1) Lohu, a married man in his thirties.

Lohu, my next door neighbour, took to returning from the fields early and taking a much less active part than usual in village affairs. He said that his limbs ached so much and he was so short of breath that he was no longer able to carry out his work properly.

Lohu claimed that all his attempts to 'see the illness' had been unsuccessful. He told me that while he had been on bad terms with his wife for some time he could not, despite lengthy reflection on the matter, recall having felt 'afraid' (atu hiro) as a result of her 'anger'. He knew, after all, that he was more kyapukya than her brothers so that they would not dare to accuse him openly of having mistreated their sister. On these grounds he had rejected the possibility that he was suffering from illness 'due to a woman'. He had also carefully considered whether he might have been ensorcelled when he encountered Koronumbura people on a

recent visit to the patrol post. However, he had decided that this was unlikely as he had taken care to swallow all his betel nut rather than spitting it out so that sorcerers could get hold of it.

ii) Aia, an elderly married woman.

This example is unusual in the degree of detail in which the patient spontaneously described her reasons for attributing her illness to a particular cause.

One morning, Aia told a group of people in the village clearing where she sat huddled in a blanket, that following a dream the previous night she had 'seen' that her illness was the result of having eaten an extra large yam and that she would soon die. In the dream a huge yam had appeared on which an attractive young woman sat and shouted 'Anybody who eats this yam hasn't got long to live!' Following the dream, Aia began to recall how she and her husband had recently dug up a yam which was so large and heavy that they could not carry it to anyone else. After some deliberation they had decided to eat it themselves although they knew that they risked illness by doing so.

She now recalled to her audience that she had felt 'afraid' at the time they ate the yam. She said that the 'fear' had remained in her belly and led to the illness. We have seen how 'fear' is said to be 'in the belly' where someone feels 'fearful' without knowing why.

Aia volunteered that her husband was more kyapukya than she, so that eating the yam had not made him ill. She herself was only an old woman with no kyapukya and would need a vuha ceremony to enable her to live a little longer and say goodbye to all her kin. She felt that 'seeing' the yam holding her marauha had reduced the 'fear' caused by eating the ovanronra. However vuha would be necessary in order to enable her to 'sleep properly again'.

111) Lohu

Some months after Lohu judged himself to have recovered from the illness mentioned in example 1) he adopted nriqa viro behaviour again. When I spoke to him, he had not felt able to do garden work for three days, and sat hunched in front of his hut making arrows in a desultory way.

When I asked Lohu 'What is the cause of your sickness?' ('Mmia nriqa okiera nanrave'?) he answered that he had 'seen' the marauha of his wife's menstrual blood capturing his marauha and holding it tightly so that it could not escape. He explained that although he knew that his wife was always 'angry' with him because she felt he ought to do more garden work he did not normally 'fear' her anger. He had, however, become very 'afraid' following a recent quarrel (which I had overheard) in which he hit her on the forehead so that she bled. The 'fear' had remained in his belly so that he had fallen ill with pain in the nose and aching limbs, when in revenge, she had secretly harmed him with her menstrual blood. Lohu thought that he might not have fallen ill so easily had not his marauha 'already begun to go away a little bit' from 'fear' some weeks before he hit her. That earlier 'fear' followed an incident in which he had infuriated her by telling a man not to bother to give her compensation for accidentally throwing some excrement near her. Moreover, at the time when she must have 'polluted' him, he had been suffering from a strained back from carrying very heavy timbers, and this, he felt, had also increased his vulnerability to illness from contact with menstrual blood.

Lohu said that now that he had 'seen' what was holding his marauha he felt much less 'afraid' and was able to 'sleep properly again'. He had asked his brother to exchange a pig with him so that vuha could be performed to ensure that the 'fear' did not recur, and to alleviate his nose pain and aching limbs and shortness of breath which were still so severe that he was unable to work normally.

Despite extensive questioning, I was unable to determine whether Lohu had used 'pain in the nose' as a clue towards his diagnosis or whether he had only become aware of this symptom following his suspicion of illness from menstrual blood.

iv). Umau, a married man in his late thirties. He had only recently taken up residence in Sonura hamlet after having lived in a number of Southern Tairora villages.

Having heard that Umau was sick I visited his home and found him huddled in a blanket on the porch of his hut. In response to questioning he told me that he had been suffering from a cold (nominra) for some weeks which he had treated as a minor ailment (ati nriqa). A few days ago he had begun to feel too unwell to continue with the garden fence he was engaged in constructing and realised that he was nriqa viro. He said he felt short of breath and hot and that his 'blood was bad'.

Soon after falling ill Umau had 'seen' a centipede capturing his marauha and holding it captive under a stone. He said he thought he had angered the creature by accidentally destroying its 'home' with a spade while clearing land for the first garden he had made on Yonura territory. While preparing this site his marauha had begun to leave due to his 'fear' that Yonura men who passed by would get 'angry' or even try to attack him saying: 'This is our ground. You are making gardens here but how have you helped us?'

Umau volunteered that he had succumbed to illness from centipede (a weak illness causing force) because he was a 'rubbish man' (vehi vaisi) - a term used by Ommura to describe men considered to be weak, cowardly and lacking in military prowess. His generally meek and submissive demeanour suggests that he saw himself in this light.

He also thought that the centipede might not have made him ill had he not been weakened by a cold at the time of the attack.

v) Memu, a married childless woman in her late twenties with a very forceful manner.

I asked Memu, who had recently adopted nriga viro behaviour, what had made her ill. She said that she had seen a wera capturing her marauha and thought that she would need a vuha ceremony because the illness was 'big' and she had not been well enough to garden properly for some days.

Memu told me that while she had recently gathered vines for fastening rafters, she knew that she was not one of those women who were so weak (hia kyapukya) that they fell ill whenever they cut maranda (which typically attacks women gathering these vines in the forest). She said that she had been unable to recollect any sense of 'fear' while in the forest but had later recalled feeling very 'frightened' when some weeks ago she had gone with her husband to Kainantu (where wera live) and eaten food from the local market and from a fish and chip shop. The 'fear' had remained in her belly so that now she was ill.

In response to questioning about the effects of having 'seen' her sickness she said that she was feeling less 'afraid' now that she had 'seen' what was holding her marauha. However, she felt that vuha would be necessary to enable her to 'sleep properly again' and alleviate the shortness of breath and 'aching all over' which were still so severe that she could not garden.

vi). Kamba a married man in his forties, much admired by his co-villagers for his active role in the murder of a number of Chimbu traders who visited Yonura in the 1960s.

I heard Kamba mention to a group of men and women with whom he was smoking tobacco in a village clearing that he had 'seen' that his illness was due to irama sorcery. He had 'seen' the sorcerer burying some betel he had spat out and then capturing his marauha. Kamba said that because

he had 'seen' it clearly he was not afraid of the 'poison' (posina) holding his marauha. However the illness was so severe that he was unable to do garden work. Hence a large pig would be necessary to 'finish the sickness'.

Personal 'seeing' is often referred to simply as a process of alleviating the patient's condition by exposing and thereby weakening the agent that has captured the marauha. However, in the cases just cited patients seem also to be using the idiom of the attacking agent to point to what they regard as processes in which their affective states play a significant causal role. Each, except Kamba (example vi) explicitly represents the disorder as in part the outcome of 'fear' associated with the circumstances in which the agent named typically attacks.

Thus Utau (example iv) says that one reason that he fell ill after being attacked by a centipede on a new garden site was that he was suffering from 'fear' of harm from his co-villagers. On the grounds that she cannot recollect having felt 'afraid' while gathering roofing vine in the forest Memu (example v) claims that her sickness was not caused by maranda. Her diagnosis of illness from wera is partly based on the fact that she recalls having felt 'afraid' while visiting the town where the wera 'lived'. In addition, Aia (example ii), Memu (example v) and Lohu (example iii) attribute their 'psychological' symptoms to the fact that the 'fear' that caused them to fall ill had persisted but had become 'hidden inside the belly' so that they were no longer aware of what had caused it. Moreover personal 'seeing' is represented both in the abstract and by patients themselves as operating primarily to reduce the 'fear' component of the disorder.

It seems clear from these accounts that, on one level, personal 'seeing' is understood as a process of alleviating the sickness through identifying and thus overcoming the 'fear' that caused it and is making it

persist. The sufferer aims, through introspection and reflection on his or her recent activities, circumstances and personal attributes to bring to the level of conscious awareness the distinctive experience of 'fear' that sparked off the illness, and perhaps to articulate that 'fear' through the imagery of a specific agent holding the marauha. The experience of 'fear' and the notion of the agent holding the marauha are metaphorically linked. In attempting to induce a vivid mental image of the agent, and manipulating that image so that the agent is forced to loosen its hold over the marauha by being exposed and perhaps shot or chased away with war cries, the sufferer is seeking to assert a sense of control over the situation seen as having caused the 'fear', thereby alleviating the 'fear' component of the illness and perhaps bodily symptoms.

Memu (example v) states more or less explicitly that she feels she has reduced the 'fear' component of her disorder through recalling the hitherto 'hidden' experience of 'fear' that sparked off the illness and articulating it through the imagery of a wera in Kainantu capturing her marauha. Aia (example ii) claims that through 'seeing' the image of the marauha of a yam holding her marauha she brought to the level of conscious awareness, and overcame the 'fear' she experienced as a result of having breached the taboo against eating one's own extra large yam.

To this extent personal 'seeing', understood from an Ommura perspective, is not unlike the 'shamanistic process' as characterised by Lévi-Strauss. The shaman employs a language 'by means of which unexpressed and otherwise unexpressible psychic states can be immediately expressed' (Lévi-Strauss 1968:198). Moreover he manipulates these states 'through symbols, that is, through meaningful equivalents of things meant which belong to another order of reality' (ibid. 200; cf. Comaroff 1978; Dow 1986). The difference is that in personal 'seeing' the 'shamanistic' treatment is self administered.

Illness 'due to a woman' is the one kind of personal diagnosis that

would seem to lend itself to use by the patient for interpersonal ends. We may speculate that in certain instances a man who attributes his illness to harmful contact with his wife may feel that he is thereby counter-acting her 'anger' or reluctance to work by arousing her pity or demonstrating that she has had her revenge. No one suggested or implied to me however that a diagnosis might be used in this way. There were no instances in which I gained the impression that a personal diagnosis indicating interpersonal tensions was being used, consciously at least, as a means of manipulating others or inducing them to change their behaviour towards the patient.

These cases also throw some light on the kind of reasoning people employed in attempting to determine the causes of their own illnesses. We have seen that personal 'seeing' is considered to involve ratiocination as well as revelation. Informants stressed that the visual experience could not occur until the patient had more or less worked out the cause of the illness 'in his mind'.

In some cases, such as that of Lohu (example iii), the patient seems to have been very conscious from the start of having recently been exposed to a particular nriqa viro causing agent or set of circumstances. In others the sufferer apparently starts by reviewing his or her personal circumstances, relationships and activities to determine which illness causing agent or set of circumstances he or she may recently have been exposed to. Could he have been near sorcerers recently? Has she gathered roofing vine in a particular part of the forest where maranda is known to grow? From an external perspective, of course, this may be seen as a mnemonic device enabling the patient to recall through association the 'fear' experienced in a particular situation.

Where the patient remembers having been exposed to a particular illness causing situation or agent a crucial factor in deciding if that agent was responsible for the disorder is whether or not there is any

recollection of having felt 'afraid' at the time of the exposure. In each of these cases the sufferer cites as evidence for the diagnosis that he or she recalls experiencing 'fear' associated with the agent to which the sickness is attributed. Similarly Lohu (example i) and Memu (example v) reject the possibility that the sickness may have been caused by a particular agent on the grounds that they cannot remember suffering from 'fear' associated with that agent.

In each case except that of Lohu (example i) the patient's estimation of his or her degree of kyapukya or strength appears to have a bearing on the diagnosis. We have seen how nriqa viro categories vary in the extent to which they imply lack of kyapukya.

Thus Aia (example ii) claims that the reason that she but not her husband fell ill from the yam they both ate is that she is lacking in kyapukya while he is a strong man. Large yams, it will be recalled, are among the least potent illness causing agents, and the less powerful the agent to which an illness is attributed the more that diagnosis implies weakness in the afflicted person. Similarly, Lohu (example ii) claims that one reason that he rejected the possibility that he was suffering from illness 'due to a woman' was that he knew that he was stronger than his wife's brothers. While Kamba (example vi) does not explicitly say so, observation of the way in which he announced his diagnosis, and his general conduct, suggest that diagnosing his disorder as the outcome of sorcery reflects the fact that he sees himself as a kyapukya man. He was, in fact, often described by his co-villagers as being one of the strongest men in Yonura. Both Umau (example iv) and Lohu (example iii) imply that their state of health at the time of exposure to the agent was a factor affecting their diagnoses. Umau suggests that he was particularly vulnerable to attack from the centipede because he was already weakened by a cold when he encountered it, and Lohu says that back pain made him more susceptible to illness from menstrual blood.

In keeping with the fact that illness from menstrual blood is the one type of nriqa viro that is distinguished from other sicknesses by its bodily manifestations Lohu (example iii) represents his diagnosis as reflecting the specific nature of his symptoms. In all the other cases the symptoms mentioned are the standard ones conventionally associated with nriqa viro.

In none of these cases is the severity of the condition mentioned as a reason for having attributed the disorder to one cause rather than another. Nor, from an observer's perspective, did there appear to be any consistent relationship between the kind of agent to which the disorder was attributed and the extent of the patient's manifest incapacity. This reflects the fact that susceptibility to illness is seen to depend on the kyapukya of the victim as well as of the afflicting agent. By contrast in these cases, as well as in most others I recorded, whether or not a vuha healing ceremony was deemed to be necessary depended on whether the patient judged the sickness to be life threatening or severe.

One man suggested to me that where a sick person felt that someone had failed to discharge an obligation he or she sometimes attempted to force them into discharging it by claiming to have 'seen' that they must donate the pig necessary for the vuha ceremony. This seemed to be a motive in one case I recorded. Nota, who claimed to have 'seen' that his brother should donate his vuha pig, had often publicly complained that while he had contributed a pig for the initiation of this brother's daughter, the brother had failed to reciprocate by giving him an adequate share of the bridewealth received for the girl.

GENDER DISTINCTIONS IN PERSONAL 'SEEING'

We have seen how in the village forum certain types of nriqa viro are said by people of both sexes to affect mainly men, and others to

affect mainly woman. 'Men's' illnesses are those which imply that the patient has attributes and capabilities, such as strength, that are defined as typically masculine in terms of the principle that men are the stronger sex and ultimately responsible for the survival of the community. 'Women's' illnesses are those which imply attributes such as weakness, which are characteristically feminine in terms of this principle. Outside this type of context illnesses are not generally represented as being sex specific.

This constitutes a particular manifestation of the systematic tendency described in chapter 4 for different paradigms of the distinctions between women and men to prevail in different types of situation. In most contexts male strength and power over life-threatening forces is represented as being quite limited. By contrast on public occasions it is conventional to represent the village's men collectively as having virtually complete power over life-threatening forces, and women as much weaker and as making a relatively negligible contribution to ensuring the survival of the community.

My data on the selection of illness categories in personal 'seeing' show a definite tendency for both women and men to diagnose their own illnesses in terms which reflect the former or 'everyday' paradigm of male/female distinctions. Of those who underwent this process, a significant proportion of the women assigned their sickness to 'men's' categories and a significant proportion of the men diagnosed themselves as suffering from 'women's' illnesses.

Illness from sorcery and from wera are 'men's' disorders. The former implies that the patient is so kyapukya and makes such a vital contribution to ensuring the survival of his community that village enemies have chosen him as their target. The latter implies that the sufferer is sufficiently brave and strong to be capable of enduring the dangers and hardships of visiting towns and coastal areas and has access to

prestigious knowledge associated with these places. However, the proportions of men and women who assigned their disorders to these categories through personal 'seeing' were not very different. Of the fourteen women and seventeen men who underwent this process four of the women as opposed to six of the men diagnosed themselves with illness from sorcery and three of the women and four of the men assigned their disorders to wera. Moreover two women and two men diagnosed themselves with the 'women's' illness nriqa viro from a centipede.

The examples in the previous section show how the selection of the personal diagnosis reflects the patient's estimation of his or her degree of kyapukya. In attributing her disorder to a wera, Memu (example v) is consciously articulating her image of herself as a kyapukya woman too strong to have fallen ill as the result of contact with maranda, and, moreover, as someone who can travel outside Ommura territory.

When a woman assigns her disorder to a nriqa viro category which implies considerable strength and power over life-threatening forces, or when a man diagnoses his illness in terms which imply that he is lacking in kyapukya, the diagnosis is, from the perspective of the person who makes it, primarily a statement about his or her attributes and capabilities as an individual rather than a challenge to the principle that men are the stronger sex. At most such diagnoses indicate that the men and women who make them do not unequivocally define themselves in terms of the images of masculinity and femininity entailed by this principle. None the less at least some men explicitly see in diagnoses of this kind a threat to the validity of the image of men as strong protectors of the community - a point to which I shall return in the following chapter. On several occasions I heard men cite the fact that many women now attributed their illnesses to sorcery and wera and men their illnesses to centipedes as evidence that women were beginning to regard themselves as men's equals while men were losing confidence in their powers.

During an ievati male initiation ceremony the novices were warned that they must keep a constant eye on their future wives because women were increasingly coming to see themselves as kyapukya people who contracted illness from wera and had the right to tell their husbands what to do.

Men sometimes insist that until pacification it was very rare for a man to attribute his illness to an akiau force or a woman hers to sorcery or wera. When Memu mentioned having 'seen' the wera responsible for her disorder an elderly woman remarked disparagingly that in her youth it was unheard of for women to attribute their illnesses to wera. Now some wives were so stupid that because they no longer saw their husbands leaving for battle they were beginning to regard themselves as so important that sorcerers were always after them.

In the nature of things no reliable information exists about diagnosis outside the period for which I collected data, certainly not on a scale that would enable one to judge whether such a change in patterns of diagnosis had in fact occurred. It seems likely, a priori, that as men have been deprived of their role as warriors there has indeed been an increase in the extent to which individual women and men define themselves in terms that are not altogether consistent with the definitions of masculinity and femininity entailed by the view of men as the stronger sex on whom survival depends. If so, the fact could well be reflected in the way in which men and women diagnose their own illnesses. On the other hand it is also possible that the pattern of diagnosis has not in fact changed, or not in the way that these men and women claim, and that in the case of the men at least concern about such diagnoses is rather a reflection of the increased importance they now attach to their own control over illness causing forces. Men stress how their image as strong protectors of the community has been threatened by the decline in their military activities. The following chapter suggests that they have sought compensation through

stressing instead how greatly survival now depends on healing ceremonies that they alone are capable of performing.

CHAPTER 10:

ASSOCHIA

When it becomes apparent that someone has fallen ill with nriqa viro the men of the village usually decide to perform assochia. The staging of this ceremony, as of other public healing rituals, is represented as the collective work of all the village's men rather than of individuals. All villagers without urgent business elsewhere are expected to attend. Deciding to hold assochia or uaha is often likened to planning to combine against an enemy group in retaliation for harm to a co-villager. As one man put it:

If the enemy shoots our men and women we are angry (inronra hita). We pick up our bows and go together to try to kill them. If a Yonura man or woman gets sick we all try to kill the bad thing (uahi haikye) that caused the sickness.

While sickness provides the immediate occasion for holding assochia, men and women stressed to me that each ceremony also serves to protect all participants against the ever growing threat of illness from irama sorcery. In addition the village's men explicitly treat assochia performances as an arena for dramatically affirming the image of themselves as strong protectors of the community.

The preparations for this ceremony take several days and it is usually held after the patient has undergone personal 'seeing'. Assochia was performed for all those who suffered from nriqa viro during fieldwork except for one elderly women who had 'seen' that she was about to die. Where illness is thought to be terminal, vuha rather than assochia is indicated following personal 'seeing'. Patients are not consulted about whether they would like to undergo assochia. However in my experience there were no cases in which a nriqa viro sufferer appeared reluctant to attend an assochia ceremony staged in response to his or her illness.

I was able to attend and tape record most of the assochia ceremonies performed during fieldwork. In addition a number of men and women including the assochia experts Nondatauro and Kyarawa talked with me extensively about the ceremony, expounding their views of its significance, aims and principles.

After outlining some aspects of the history of assochia I describe the typical sequence of events in an assochia session, focussing primarily on therapeutic and prophylactic aspects that are made explicit by Yonura people. I then look at ways in which particular views of the distinctions between the sexes are rehearsed and readjusted in assochia.

Yonura people began performing assochia in 1973 as a means of coping with the increasing threat posed by irama, the one type of sorcery to which Ommura attribute illness. As we have seen, they represent sorcery against members of their village as coming from other groups, especially those with which Yonura traditionally fought.

While on a visit to the Markham valley slopes in early 1973 Kyarawa of Samura hamlet learned how to perform the ceremony known by his Waffa speaking hosts as assochia and used by them to neutralise sorcery substances. His initial suggestions that Yonura men should adopt this ceremony met with little response. However by late 1973 assochia was being performed regularly in Yonura with most villagers participating. Yonura people say that this new interest in assochia was prompted by an increase in the threat of sorcery following the improvement of the Obura-Kainantu road, and by the fact that it was deemed effective by the village's anti sorcery experts. Moreover several Yonura men had visited the Waffa speaking area after Kyarawa and returned with equally favourable reports of the efficacy of assochia.

Late 1973 saw the completion of improvements to the road linking the Obura patrol post with Kainantu. Public motor vehicles now began to enter

the area regularly and people from hostile or potentially hostile Southern Tairora villages increasingly walked through Yonura in order to travel in vehicles waiting at the patrol post. Villagers often described how when this influx started men decided, after discussion in the men's houses, that steps must be taken to protect against sorcery substances that the travellers were leaving on the road to harm Yonura people. The two Yonura men generally considered to be most skilled at anti sorcery magic, Nondatauro and Andotave, were asked to prepare potions to neutralise this irama. They suggested that existing anti sorcery techniques would be ineffective against sorcery on this scale and that the village's men should therefore start practising assochia.

Yonura men often told me how, while they started using assochia specifically for neutralising irama, it was soon being employed as a general treatment for nriqa viro. People claimed that sicknesses were becoming so 'strong' (kyapukya) that they could only be cured if the patient underwent assochia.

The Swiss missionary in Ommura visited Yonura in an unsuccessful attempt to persuade the villagers to abandon assochia. He then warned the administration that Yonura had adopted a 'cargo cult'. Having investigated the matter the patrol officer correctly decided that the missionary was mistaken about the nature of assochia.

In that it involves items such as symbolic aeroplanes and European-style vases of flowers assochia has certain superficial similarities to 'cargo cults'. However Yonura informants invariably denied that the villagers had ever regarded it as a means of obtaining 'cargo' from Europeans or wealth of any kind. Apparently no Yonura person has attempted to sell secret information associated with assochia to co-villagers or outsiders (cf. Lindenbaum 1979:86). Within Yonura men taught it to each other in crowded men's houses.

Assochia has not involved the millenarian attitudes associated with 'cargo cults' (e.g. Jarvie 1972; Willis 1970) or, more generally, the dreams of 'instant socioeconomic transformation' seen by Reay as characteristic of 'transformation movements' in New Guinea (1978:217). Yonura people emphasise the 'strength' of assochia as a means of neutralising sorcery and treating illness. However they describe this ceremony as a way of reducing the threat from illness causing agents that they assume will always be with them rather than as something that heralds the end of sorcery, illness or any other evil. Assochia has never involved or been associated with prescriptions for major social or economic changes of any kind or any suggestion that everyday activities should be suspended.

Both sexes agree that while no woman has the strength (kyapukya) necessary for performing assochia initiated Yonura men are all capable of doing so and are collectively responsible for the beneficial effects of the rites. At the same time three middle aged villagers are generally regarded as particularly expert at conducting assochia, especially at using the tree bark chewed during the ceremony to facilitate the process of 'seeing' sorcery substances and illness causing agents⁽¹⁾: Kyarawa and his elder brother Nondatauro, both of Samura hamlet, and Andotave who lives in Sonura. These men take much of the responsibility for preparing for the ceremonies and usually receive in return for their efforts cooked food from the patient. If food is short they are given a small cash payment (about K1) to share between them.

The role of anti sorcery expert was not a new one for either Nondatauro or Andotave who were acknowledged as the village's leading anti sorcery experts well before the introduction of assochia. Nondatauro also has a long reputation for skill at preparing the plant substances used in uaha (chapter 11) and was an acknowledged expert at uani, a healing ceremony that became outmoded some years before fieldwork. Until he

learned to perform assochia Kyarawa was not an expert in any kind of sphere.

For Nondatauro, Andotave and to a lesser extent Kyarawa their skills at anti sorcery and therapeutic techniques are a source of some prestige. However none of them is particularly influential in public affairs. As we have seen Yonura people say that they currently have no 'big men' or leaders and there is no villager who can easily be described in such terms from an external perspective.

THERAPEUTIC AND PROPHYLACTIC ASPECTS

The special therapeutic efficacy of assochia is said to derive primarily from the fact that it enables many people to 'see' the cause of the illness and thus exert their collective strength against it. People stress that until the introduction of the ceremony no one other than the patient himself or herself had been considered capable of determining the causes of nriqa viro. A woman told me:

Before we had assochia only the sick person could see the cause of the sickness [through personal 'seeing']. This was like a bamboo torch (oma). Assochia is much stronger (kyapukya). It is like a Coleman [the most powerful type of kerosene lamp used in the area]. With assochia many people can see the sickness.

Assochia also involves attempting to strengthen the patient with 'strong' substances to alleviate his or her 'fear' and to wash away the sickness. In addition it may provide a guide as regards further treatment.

Simultaneously with 'seeing' the cause of the patient's disorder male participants in assochia 'see' and neutralise irama sorcery substances prepared by members of hostile groups to harm those present at the ceremony. Attending assochia is also said to increase resistance to illness from irama and other sources through reducing the 'fear' that makes one vulnerable to nriqa viro. Moreover, some men claim that women can be cured of infertility by sitting through many assochia performances.

Assochia ceremonies start shortly after sunset and usually take place in Nondatauro's house. Like other Ommura residences it is divided by a line across the centre into a rear zone where only fully initiated men may sit and a zone for women, girls and uninitiated boys. The men, including the assochia experts, sit huddled together around a large fire which illuminates the house. The patient sits among others of the same sex not in any way separated from them.

The explicit therapeutic goal of the first stage of the proceedings is for the men to 'see' the afflicting agent and the circumstances under which it 'attacked'. They will then communicate their visions to the women so that the whole group 'sees' the afflicting agent, thereby depriving it of its invisibility and its power over the victim. In order to achieve this men, including the assochia experts, chew assochia bark while gazing at a glass bottle which contains a red hibiscus flower and in which images associated with the cause of the illness will eventually appear. While waiting for the images they sporadically chant special assochia songs and periodically tell the women to 'help' them by singing loudly from the repertoire of songs praising male strength and prowess.

This collective focussing on a shared image of the agent is considered to be intrinsically efficacious in alleviating the disorder. Here, as on other public occasions, the underlying concept is that group unity generates power, especially over external human or non human 'enemies'. Men continually remind one another how if the afflicting agent is to be effectively chased away, it is essential that they all concentrate on 'seeing' the same 'picture' or 'image' (ara) of it. The patient is constantly reassured that all the participants are combining forces to 'help' him or her. I was often told: 'If he hears this he won't be afraid any more and his marauha can return to his body'.

In Ommura publicly 'shaming' someone involves ostracizing them. By

contrast, while it was never represented to me in this way, the emphasis on collectively 'helping' the patient in assochia may be seen as a means of alleviating the 'shame' or loss of self esteem from which nriqa viro patients often claim to suffer.

It is generally considered that where the patient has made a personal diagnosis prior to assochia this ceremony can only be maximally effective in alleviating the sickness if the agent collectively 'seen' by the participants is the same as that already identified through personal 'seeing'. This reflects the principle that 'only the sick person can see (identify) the true cause (tanruva okiera) of the illness' because he or she alone can 'see what is in the belly', that is identify the specific 'fear' that led to the disorder.

Where the assochia diagnosis affirms a prior personal diagnosis the collective 'seeing' episode is perceived as augmenting the effects of personal 'seeing' as regards alleviating the 'fear' component of the disorder. By enabling the patient to 'see' for a second time it enhances the sense of control induced by personal 'seeing' over the situation that caused the 'fear'. It should hence lead to further improvement in one's capacity to 'sleep properly' and possibly also in physical fitness. In such cases the 'seeing' in assochia is represented not as a process of decision making or of discovering something hitherto unknown in an intellectual sense, but as one through which the men induce in themselves and the female participants a visual experience similar to that undergone by the patient in personal 'seeing'. By the time assochia is under way any prior personal diagnosis is usually common knowledge.

My informants invariably maintained that where the agent collectively 'seen' in assochia is different from that already identified through personal 'seeing', assochia cannot lead to a substantial reduction in the patient's 'fear'. The sufferer may share in the collective vision while the ceremony is actually in

progress. However, it seems to be generally taken for granted that, as one man put it: 'Afterwards he will say that the men did not see the sickness clearly (dapihi) because they did not see the true cause that he saw himself'. Under such circumstances the patient's body may be strengthened by the 'strong' substances employed during a later stage of the ceremony and the 'fear' reduced to some extent by the knowledge that the participants are combining forces to 'help' him or her. However, the disorder will not be alleviated as far as would have been possible had the assochia diagnosis affirmed the personal one.

I attended performances of each type of healing ceremony currently in use as well as male and female initiations and various marriage, birth, crop fertility and mortuary rites. What is immediately striking about assochia is that there is more emphasis on the solemnity, authority and potency of the proceedings than in any of these other ceremonies apart from male initiations. This may be seen as reflecting the perceived need for very powerful therapy to cope with the alleged increase in irama sorcery and in the 'strength' of illness, as well as the fact that assochia does not have the same taken-for-granted authority as the more established ceremonies. It may also be understood in relation to the fact that men treat assochia as an arena for affirming the image of men as strong protectors of the community.

In most public ceremonies, while it is not appropriate to joke or bicker loudly, people are free to chat among themselves, eat, sleep or sprawl on the ground. In assochia, however, as in male initiation ceremonies, adult participants continually exhort one another to sit still and upright, refrain from talking, pay attention, sing in tune and keep their children quiet. The solemnity of the occasion is also emphasised by the unusually elaborate and symmetrical way in which the assochia experts adorn the hut with leaves and flowers.

The chanting of assochia songs creates an aura of potency and solemnity. They should be sung in the slow, hushed style (akyomakye) characteristic of male initiation ceremonies and strongly associated with secret knowledge and hence power. Those who lapse into the loud, rhythmic style used in most public ceremonies are hastily corrected by the experts. The effect is heightened by the fact that the songs are in a Waffa dialect. Exotic or arcane words are often represented as having a special potency. Most spells and the songs sung at male and female initiation to enable the novices to develop adult capabilities and mature physically, are based on an arcane vocabulary sometimes represented as the language of uri. There is an association between knowledge of exotic or arcane words and access to external sources of power. Sharing a common language is said in certain contexts to create a special bond. Just as government officials are deemed to be more likely to do favours for those who can talk to them in Melanesian Pidgin, so if the assochia marauha (or vana) is addressed in its own language 'it will come and shine its very strong light so that we can see the sickness'.

Assochia ceremonies are pervaded with 'foreign' symbols associated with urban life, government officials, and missionaries. This is in keeping with the general association between exoticism and power. The only other Ommura ceremonies involving extensive use of 'foreign' symbolism are male initiations which incorporate flute melodies, songs and stories from neighbouring villages.

Thus men continually liken assochia to a Coleman lamp, an electric light, a photograph, a camera or a movie film. They graphically mime pilots taking off in aeroplanes and announce that the assochia marauha is flying them 'like an aeroplane to the place where the irama has been hidden'. A woman likened the bottle containing the hibiscus flowers to vases of flowers seen in churches and the homes of missionaries and patrol

post staff. Hibiscus is not indigenous, grows only around the mission and patrol station and is not used in any other type of ceremony. It is always referred to by the Melanesian Pidgin term flaua which is rarely used for indigenous plants. While most of the flowers and leaves that adorn the assochia hut are of the varieties routinely used for all indoor ceremonies, there is always a bunch of hibiscus flowers hung from the central post.

At regular intervals men make speeches extolling the powers of assochia, and their audience responds with cries of 'You speak truly!' (Utama utira!). On one occasion, Kyarawa announced:

When we eat assochia we see inside everything. The stones break apart, the trees break apart, the grass breaks apart, the ground breaks apart, the mountains break apart, the water in the pools breaks apart. Everything breaks apart and we can see inside everything. Before, we could only see part of the sickness as if by the light of a bamboo torch (oma). Now assochia is like a Coleman lamp and shows us everything.

During another assochia ceremony, Andotave told the participants:

Before if you dropped something on the road they [the enemy] would pick it up and make irama against you and you'd get very sick and die. Now when we eat assochia we follow its light to the place where they left the irama. The assochia marauha rushes us there like an aeroplane and puts pork fat on the irama so that it melts and you won't get sick. If we didn't have assochia we would have very bad blood and many would die. When we eat assochia we don't just see the sick person. We see all the irama that has been prepared for other people in this house. But you must remember that if the irama is very strong even assochia cannot help you.

After gazing into the bottle for an hour or so, 'helped' by the women's singing, assochia experts and often other men announce that they are 'beginning to see the sickness'. This is a sign for the men to turn their backs on the women who are told to sing loudly to help the men to 'see'. The men then confer quietly among themselves about the nature of the indistinct 'pictures' or 'images' (ara) that have appeared to them in the bottle until an expert announces that the men can now see clearly (dapihi tagena). The men turn round and tell the women to stop singing

and 'look carefully' at what they are about to be 'shown'.

What follows appears on first observation as a dialogue in which the three experts and then other men describe the images they see in the bottle, the rest of the male participants help them to interpret these images, and women, and sometimes the patient, back up these interpretations with evidence concerning the patient's recent activities and circumstances. However, once I had become familiar with the principles of Ommura dream interpretation, attended a number of assochia ceremonies and analysed tape recordings of this phase of the proceedings, it became clear that the initial image that the experts describe is always one which is generally understood as indicating a particular illness causing agent. The dialogue which follows is a process in which the participants collaborate to create verbally a shared image of this agent and circumstances associated with it, an image which is sufficiently vivid that each person is able to experience a powerful sense of its reality and focus their attention on overcoming its influence. Where the agent indicated is different from that identified in personal 'seeing' the patient sometimes starts by protesting that what is being seen is not the true (tanruva) cause of the illness. However, in my experience, the sick person was always quickly prevailed on by the rest of the group to acknowledge the tacitly accepted assochia diagnosis and participate in the process of collective image building.

The diagnostic decision making process will not be analysed until the following section as the logic according to which assochia diagnoses are selected only becomes apparent when sociopolitical as well as therapeutic goals pursued in the ceremony are taken into account. Here I wish to illustrate by means of a transcript of a tape recording the way in which the participants work together to induce this collective 'seeing' experience through graphic, detailed and frequently reiterated accounts of the circumstances which led to the illness. The ceremony was for Pareh, a

young married woman who had been suffering from nriqa viro for several days and had not undergone personal 'seeing'. The assochia diagnosis was that she had fallen ill as the result of inadvertently picking up some branches of akiau ebora. Because the wood was dry she had been unable to tell that it was of the harmful akiau variety of ebora which has reddish leaves and fruit rather than of the harmless green leaved cultivated variety. Where images of round fruit falling off trees occur in dreams they are taken to represent akiau ebora, and Nondatauro's opening words were tacitly understood as a statement about the causes of Pareh's illness.

Nondatauro: Stop singing you women and listen carefully. The men have been chewing assochia for a long time and our teeth are nearly broken. Now I look into the bottle and see a round fruit falling from a tree and then someone jumping over a fence and after a short while jumping back again onto the footpath.

Pareh: When I was on my way home the other day, I saw some firewood on the other side of the path and jumped over the fence to get it.

Hindo (a man): You didn't break any branches from the ebora tree in Orekyia did you? [Orekyia is a site where domesticated ebora grows, and this question is aimed at eliciting a negative response in order to eliminate the possibility that any ebora branches Pareh gathered were of the harmless domesticated variety].

Pareh: No I didn't because none of those trees had dry branches. Ndainti [a women who was with her at the time] left us and when we got as far as Oa's father's garden I picked up some dry branches from the arepa trees from which I usually get my wood. I got some of this arepa and then I picked up a dry branch which I found on the ground a little further on.

Nondatauro: Yes, I saw all this before you told me.

Pareh: Then I picked up some more branches around there.

Hindo: You made a fire in Waku didn't you, with twigs that you found there? [Waku is a stretch of grassland where both akiau and domesticated ebora grows, and where women often stop on their way home from the gardens to catch rats and roast them.]

Pareh: Yes, I made a fire there. I saw an ebora tree from which people had cut some leaves and branches and I was going to cut some branches from it myself until I saw that there were no dry ones left. Then before we burned the grass [to expose the rats] we cut down some branches from an ebora tree that

was already dry. [Further evidence to suggest that any ebora wood she gathered was not of the cultivated variety and that she may have accidentally gathered akiau ebora because the branches she picked up had no leaves.]

Kyarawa: Yes, I've already seen this in the bottle.

Iatai [a man]: Didn't you then pick up some more wood from the place where they washed the ievati novices last time? [Another place on Pareh's route home where akiau and cultivated ebora trees grow.]

Pareh: Yes, there was a dry ebora tree there which had fallen down and I picked up some branches and walked on.

Kamba [a man]: Did you say these branches were green or dry?

Pareh: Dry.

Kyarawa: I see something red, a red ball, a ball which is red not green.

Andotave: If you break red ebora you'll get sick. Was this ebora she picked up red or green?

Hindo: That ebora near Oa's father's garden is red ebora. That ebora she burned at Waku was red, akiau ebora.

Nrita [a woman]: Yes, Memu and I were with Pareh. She made a little fire in Waku. She was going to take some branches off a green ebora tree but then she saw it wasn't dry so she picked up some dry ebora branches from the ground.

Memu [a woman]: Then we walked on through the grassland we saw another dry ebora. Pareh broke off one branch, put it in her bundle of firewood and walked on through the grass.

Nrita: Yes, she broke this dry ebora and then I pulled up some grass for my roof and went home.

Queue [a man]: Shut up you women and let us men speak! Only we know how to see with assochia.

Aita [a woman]: Yes shut up you women and listen to what the men have to say!

Andotave: I see a tree with round fruit. It is leaning to one side in the wind and the fruit is falling down.

Hindo: It's an akiau ebora tree, one that grows in Waku where she made the fire.

Taito [a man]: I see the marauha of a man cutting down wood for fence posts and putting it in a neat pile near that white stone near Oa's father's garden. [Taito Sara who helped me to translate the tape recording explained that Taito was indicating that the wood which Pareh collected here could not

have been arepa because all the dry arepa wood had already been put into a pile and Pareh had picked her wood up off the ground. Fence posts are usually made of arepa.]

Taito: Yes I cut down arepa there and put it in a neat pile.

Andotave: I saw something leaning over the edge of the water and I thought 'Is it from the bush or from the grassland?' Now I see it's not from the bush but from the grassland. [Ebora is classified as a tree which grows in the grassland as opposed to the bush.]

Taito: That water is the place where they washed the levati novices last time and where Pareh picked up this wood.

Andotave: Now I see that this thing leaning over the water is a tree and one of its round fruit has fallen down.... This is like what is in this house now [i.e. there is an association between this tree and Pareh's sickness]....I saw this sickness last time we ate assochia but I left it for tonight and tonight I saw it again.I also saw someone making a fire. Weren't you making a fire in Waku?

Pareh: Yes.

Nondatauro: That concludes the matter. It is the marauha of this ebora which is holding her marauha. This wood she picked up in Waku was akiau ebora.

Taito: She also picked up akiau ebora in the place where they washed the levati novices. There was arepa wood there and green ebora but she didn't take these, only the dry akiau ebora.

Taito: Yes she got some wood from there and also from near Oa's father's garden. This was bad wood from red ebora. This wood makes women sick.

Kyarawa: Yes she picked up this wood from where the white stone with the hole in it is. The leaves and fruits of this wood are not green but red.

Taito: Was this wood she picked up arepa or ebora?

Veta [a woman]: Ebora, bad ebora with red leaves.

Memu: Yes that wood she broke was akiau but she couldn't tell because it was dry.

Andotave: You women stop talking so much and look at what we are showing you. Women can't see what assochia shows to us men. We looked into this bottle and thought 'What is this round thing? What is this water? What are these round, red balls falling?' Now we realise that we were seeing Pareh's sickness, the thing that is holding her marauha.

The dialogue continues in similar vein until the redundancy, the minute and vivid detail and the aura of authority which pervades the proceedings have created such a powerful sense of the reality of what is being described that men and women begin to jump up and point their fingers at the afflicting agent and the emphasis switches from collectively 'seeing' the agent to collectively chasing it away.

The assochia experts summon the patient to the centre of the hut and through vivid use of war imagery, incite the other men to 'frighten away' the agent. In the ceremony for Pareh they announced:

This akiau ebora is pointing an arrow at her, drawing its bow and pointing an arrow. The feathers on its shield are shaking and it is pointing an arrow at her chest, pointing it very straight. She cannot run away because this akiau ebora is holding her neck with its other hand. It is holding it very tightly and wants to strangle her, and the feathers on its shield are shaking. It is holding her so tightly she can hardly breathe, and with the other hand it is drawing its bow.

The response was striking in its intensity. Men uttered war cries and drew their bows while women cheered them on.

The assochia experts then call the group to attention and demand silence while they and other men pour water over the patient's head to 'wash the illness away' and thus to 'finish' it. The sufferer is reassured that the participants have done their best to 'chase the sickness away'. A man told Pareh:

This akiau ebora has seen that we are all here and can see it and are strong, so it is very frightened and is running away. It is running so fast that it has dropped its shield. It has taken its hand away from your throat.

At this point there may be suggestions or prescriptions as regards further treatment. On several occasions assochia experts reported having 'seen' a pig with a leaf in its mouth, an image which they interpreted as indicating that the patient had been correct to have suggested that the illness was so 'big' (nronra) that vuha was required in addition to assochia. There were also two instances in which Apaia, a vuha expert,

claimed to have 'seen' during assochia that the patient was wrong to have thought he would need vuha and would in fact recover perfectly well without it. In my experience vuha was never prescribed during assochia where the patient had not already suggested that it was necessary.

Most of the female participants have brought cooked vegetables. This food is now put into several bowls which are passed round so that everyone present can eat a spoonful from each container. We have seen how food is treated in certain contexts as a medium through which a person can harm someone with whom they are 'angry'. Conversely, the food sharing episode in assochia is explicitly regarded as a means of conveying 'good feelings' to the patient: 'We all eat with you so that you can see that we all want to help chase away the sickness and you won't be 'afraid' any longer so that your marauha can return.' The fact that the usual rules against food sharing between fathers and their children and between wives and husbands do not apply here constitutes a powerful expression of the unity of the participants and hence their collective power over the afflicting agent.

While the bowls are handed round, the assochia experts mix the patient's portion with a small amount of pork or tinned meat sprinkled with hema. Hema is a mixture of powdered tree barks which is also used in vuha and sometimes as a self administered treatment for nriqa viro. It may be obtained from any tree 'so long as it has hard, strong wood and can therefore make the sick person strong again and finish the sickness'. The composition of the mixture does not vary according to symptoms or the cause to which the illness is attributed. Meat is regarded as the most strengthening of all foods. That used in assochia is usually supplied by the patient.

Finally assochia experts announce that Yonura men have worked very hard together to 'frighten away' and 'kill' the illness causing agent. They have also endeavoured to 'see' and 'kill' irama sorcery substances prepared by

members of hostile villages to harm participants in the ceremony. On several occasions experts announced that the men had also 'seen' and 'killed' magical substances prepared by enemies to prevent Yonura women from conceiving. In assochia sorcerers and their intended victims are not named.

The ceremony is now over and the atmosphere becomes less formal as men prepare themselves for speeches in which they make normative pronouncements and draw out ideological and evaluative implications of the diagnosis. As on other public occasions men hold forth about subjects such as the importance of working hard and not squandering food. However insofar as assochia is used as a platform for explicit ideological statements the emphasis is on distinguishing between the relative strength and social importance of men and women.

ASSOCHIA AS AFFIRMING THE IMAGE OF MEN AS STRONG PROTECTORS OF THE COMMUNITY: 'MEN'S' AND 'WOMEN'S' ILLNESSES IN ASSOCHIA.

During assochia as on other public occasions the definition of men as strong protectors of the community is asserted in a particularly flamboyant and exaggerated way. We have seen how the village's men treat public ceremonies as an arena for projecting this image of themselves. More generally the conventions that govern public ceremonies and gatherings of village people underscore the notion that men collectively exercise great power over life-threatening forces, while women as a category are weaker and make a relatively unimportant social contribution. Men represent such assertions of masculine prowess as reinforcing not only male prestige but also their confidence in their own powers and hence their ability to protect the village. Also they regard women's sense of dependence on powerful male protection as a crucial corrective to wives' tendency to neglect their work, a tendency with implications for the interests of individual

husbands as well as for the public good.

Moreover men explicitly treat assochia ceremonies as a forum for asserting that any decline in their role as vanquishers of military enemies has been counterbalanced by an increase in the social importance of their role as vanquishers of illness causing forces. Before and during assochia performances they remind each other how important it is for all the village's men to attend and to try hard to 'see' and 'kill' illness causing agents so that their wives realise that men's work is still arduous and essential for survival.

As in other public ceremonies the emphasis is on distinctions between the strength and social importance of women and men as categories rather than on differences between individuals. While the assochia experts play a prominent role during certain episodes they and other male participants constantly stress that the ceremony is the collective work of Yonura men. In the food sharing episode male and female participants combine to exert their collective strength against the afflicting agent. However during most of the ceremony men officiate and play the most active roles while women act as helpers and spectators.

The aura of potency and solemnity that pervades assochia ceremonies creates an enhanced sense of the social importance of men's healing activities. The spatial arrangements are such that only the adult male participants can see the bottle clearly. There are parallels between the episode in which men confer together while women sing and certain phases of male initiation ceremonies where women are told to sing loudly not only to 'help' the men but also so that they cannot eavesdrop on male 'secrets' (uakyera). As can be seen from the transcript from which I quoted earlier, men make a display of being able to interpret the images in the bottle while women merely support what they say with evidence regarding the patient's activities and circumstances. Both sexes represent the

strengthening properties of the food eaten during assochia as deriving less from what women do to it than from the hema sprinkled over it by men. Moreover, when, as not infrequently happens, the patient vomits up the medicated food it is the women who are roundly blamed for having cooked 'bad food'.

The ceremony is interspersed with statements from the experts and other men about how survival depends on assochia and other perilous and arduous 'men's work', and how women could never muster the great strength necessary for performing assochia. They hold forth on how sorcery has increased, on how powerful illness causing agents have grown, and on the extraordinary potency required for vanquishing these life-threatening forces. They also issue frequent reminders of the sacrifices and risks involved in protecting the community in this way, of how men have to travel into dangerous parts of the forest to obtain assochia bark and then 'break their teeth and burn their mouths' chewing it.

In many of the assochia ceremonies I attended men made lengthy speeches asserting that performing assochia was no less arduous and crucial for survival than conducting warfare. During one held for Oata, a young married woman of Samura hamlet, Nondatauro warned:

Women see that their husbands no longer bring them arrows that they have pulled from the bellies of the enemy, so some of them say that their husbands are trying to deceive them when they say that they do great work (kyayha nronra) to chase away the bad things that try to kill Yonura people. These women are blind in one eye. They do not see that Yonura men break their teeth and make their eyes fall backwards into their heads chewing assochia and trying to see the very strong things that make us sick.

During the same ceremony Natao of Samura hamlet said:

Before we [men] used to watch out all day for men from other villages and chase them away when they tried to burn our men's houses and gardens and shoot our wives and pigs. Now we watch out all the time for the irama that these men are leaving on the road to harm Yonura people. This irama is very strong but we don't run away when we see it. We follow the assochia marauha to the place where the irama has been left and kill it so that Yonura people will not get sick. When we see the very strong things that make our men and women sick we don't throw down our bows and run away.. We work hard to kill them.

In attributing the illness to a particular agent through personal 'seeing' the patient is generally making a statement about his or her degree of kyapukya as an individual rather than about the relative strength of women and men as categories. By contrast, an assochia diagnosis is not only perceived as reflecting on the sufferer's personal attributes, it is also, depending on the patient's gender, treated as a vehicle for explicit ideological statements about the nature of masculinity or femininity.

Where a woman has been 'seen' to be suffering from an illness caused by an akiau agent assochia experts and other men commonly make speeches in which they represent this diagnosis as evidence that women in general are so lacking in kyapukya, and hence in the ability to contribute substantially to ensuring survival, that even the weakest of illness causing forces can make them ill. Thus Andotave observed on one occasion:

She picked ebora that was red not green. This ebora makes women sick because they are not strong and cannot chase away its marauha. Then the men eat assochia and the ebora sees that they are strong so it gets frightened and runs away.... if women tried to chew assochia it would kill them or make them mad (werendara) because assochia is a very strong thing.

Similarly diagnoses of wera or sorcery for men are treated as indications that men in general are so powerful that it takes one of the more kyapukya illness causing forces to reduce a man to sickness. When Sonau of Sonura hamlet was diagnosed with nriqa viro from sorcery Apaia commented:

Akiau things tried to capture Sonau's marauha but only irama made him sick. These akiau things make women but not men sick because when men see them they stand with very strong legs [i.e. do not become afraid]. Food and pigs in Yonura grow large because our men frighten away the things that try to kill our pigs and vegetables. Men from other villages see this and say: 'We will make Yonura men sick with irama so that Yonura people will be short of food'.

In many contexts women tend to challenge assertions of male strength and superiority and taunt men with jokes about their vulnerability. In assochia, however, as at other formal gatherings of village people, they

collude in situationally creating and maintaining the definition of men as considerably stronger than themselves and as making a more important social contribution. They defer to the male participants in a manner that contrasts markedly with their behaviour in informal situations, echoing speeches about male superiority and female inferiority with cries of 'You speak truly' and signifying wholehearted acceptance of men's claims to authority. A woman who makes a speech in assochia is, as the transcript of the collective 'seeing' episode shows, liable to be warned by other women as well as by men, to 'Shut up and let the men speak'.

Another way in which the assochia experts and other male and female participants demonstrate their overriding commitment to situationally asserting the image of men as the stronger and more important sex is by systematically failing to affirm personal diagnoses perceived as casting doubt on the validity of this principle. We have seen that it is quite common for both men and women to diagnose their disorders through personal 'seeing' in terms that may be perceived as inconsistent with the definition of men as forceful protectors of the community. Moreover, it was sometimes suggested to me that such diagnoses had become more frequent and that this was an indication that women were increasingly coming to regard themselves as men's equals while men were losing confidence in their powers.

In interviews and general conversation assochia experts were as adamant as other informants that where the patient had undergone personal 'seeing' prior to assochia the ceremony could only be maximally effective in curing the illness if the agent 'seen' by the participants was the same as that identified by the patient. Hence I was surprised when, in the third assochia ceremony I attended, the disorder was attributed to 'mother of marsupials' although it was common knowledge that the patient, a man in his thirties, had himself 'seen' that the sickness was due to an angry centipede. At the start of the collective 'seeing' episode he protested that

the illness was not being 'clearly seen' (dapihi taqena). However he was quickly silenced by the experts and other men and women who warned him that he would not recover unless everyone saw the same image (ara), and that he must stop contradicting the other men.

When, the following day, I asked Nondatauro why the assochia diagnosis had been different from the personal one, he answered: 'This is what assochia showed us'. Later he added that in this case the illness had not been 'seen' very clearly, and that because the agent 'seen' in assochia was different from that identified in personal 'seeing' the patient was unlikely to recover as much as might have been hoped.

It was not until several weeks later that it became apparent that this kind of failure to affirm the personal diagnosis in assochia occurred quite regularly and was, in most cases, perceived by practitioners and other participants as a strategy for avoiding diagnoses felt to cast doubt on the extent of men's potency as protectors of the community.

On one occasion, a man persisted in complaining that what was being 'seen' in assochia was not consistent with his personal diagnosis of illness from food touched by his wife. Kyarawa warned him that he had no right to bring 'shame' on the men and women present by suggesting that men were so weak that their wives could make them ill. During another assochia ceremony a woman protested about the fact that her personal diagnosis of wera was not being affirmed. The retort was that women's sicknesses were caused by akiau forces which were weak like themselves and not by strong agents like wera. Moreover, when I asked Nondatauro why a young man had been diagnosed in assochia with illness from wera when his personal diagnosis had been of illness from menstrual blood, he replied:

Sometimes men say that they are so weak that women can make them sick. But assochia tells us that we [men] must show everybody that men are strong. They are not afraid of their wives. If we didn't do this then people would say that we were just lying (kumani) when we said we could see the sickness with assochia. If people said this then

men wouldn't be strong enough to perform assochia and vuha properly and everyone would get sick from irama. Also, women would become so lazy that they never listened when their husbands told them to work hard.

Similarly, a woman told me:

Now some women think that they are kyapukya like men and that only wera and ... [irama] can make them sick. But if all the men and women in assochia see that a woman is sick from wera or irama they will say that women are as strong as men and needn't listen when their husbands tell them to look after gardens and pigs properly, or when men say that they can see the sickness. If that happened, we wouldn't have any food to eat. Men wouldn't be able to see clearly in assochia and kill the irama our enemies leave for us. Everyone would be sick.

Table 5 divides the assochia diagnoses made during the fieldwork period into three categories: those for patients who had already undergone personal 'seeing' and which affirmed the prior personal diagnosis; secondly, those which were different from the personal diagnoses that preceded them; and thirdly, those not preceded by personal 'seeing'. Those personal diagnoses that were 'changed' in assochia and those which were affirmed differ quite markedly in terms of their connotations regarding the validity of the image of men as strong protectors of the community. Most of the 'changed' personal diagnoses are inconsistent with this definition of masculinity: diagnoses by men of nriqa viro from menstrual blood, from food touched by a wife and from the weak akiau agent, centipede, and diagnoses by women of illness from strong wera forces and from sorcery specifically directed at a woman. The one exception to be discussed shortly, is a man's personal diagnosis of sorcery.

While Nondatauro represents failure to affirm personal diagnoses of illness from menstrual blood as a means of avoiding portraying men as weak in relation to women, such diagnoses are also symbolically linked with tensions over affinal prestations. They may thus allude to specific intravillage tensions and serve as general reminders of the uncomfortable fact that internal quarrels can impair Yonura men's ability to co-operate as a unit and hence their collective power over harmful external forces.

TABLE 5:

ASSOCHIA DIAGNOSES DURING THE FIELDWORK PERIODA. ASSOCHIA DIAGNOSES THAT AFFIRM A PRIOR PERSONAL DIAGNOSIS

MEN	WOMEN
1 diagnosis of illness from 'mother of marsupials'	3 diagnoses of illness from <u>maranda</u>
5 diagnoses of illness from sorcery	2 diagnoses of illness from centipede
4 diagnoses of illness from <u>wera</u>	1 diagnosis of illness from sorcery (a sorcerer aiming to harm a man accidentally harms a woman instead)
	1 diagnosis of illness from large yam
Total men's personal diagnoses affirmed in <u>assochia</u> = 10	Total women's personal diagnoses affirmed in <u>assochia</u> = 7
Total personal diagnoses affirmed in <u>assochia</u> = 17	

TABLE 5 (continued)

B. ASSOCHIA DIAGNOSES THAT DO NOT AFFIRM THE PRIOR PERSONAL DIAGNOSIS

MEN	WOMEN
2 personal diagnoses of illness from centipede ^(a) changed to illness from 'mother of marsupials'	2 personal diagnoses of illness from <u>wera</u> changed to illness from <u>maranda</u>
2 personal diagnoses of illness from menstrual blood changed to illness from <u>wera</u>	1 personal diagnosis of illness from <u>wera</u> changed to illness from centipede
1 personal diagnosis of illness from menstrual blood changed to illness from food touched by child	1 personal diagnosis of illness from sorcery changed to illness from large yam
1 personal diagnosis of illness from sorcery changed to illness from food touched by child	2 personal diagnoses of illness from sorcery changed to illness from centipede (a sorcerer specifically sets out to harm a woman)
1 personal diagnosis of illness from food touched by <u>wife</u> changed to illness from sorcery	
Total men's personal diagnoses not affirmed in <u>assochia</u> = 7	Total women's personal diagnoses not affirmed in <u>assochia</u> = 6
Total personal diagnoses not affirmed in <u>assochia</u> = 13	

(a) In one of these cases the assochia diagnosis acknowledged that a centipede had been partially responsible for the disorder. The experts decided that while 'mother of marsupials' was the immediate cause of the sickness the patient would not have fallen ill when she attacked him had he not already been weakened by a centipede.

TABLE 5 (continued)

C. ASSOCHIA DIAGNOSES FOR CASES WHERE PATIENT HAS NOT (b)
PREVIOUSLY SEEN THE CAUSE OF THE ILLNESS

MEN	WOMEN
1 diagnosis of illness from food touched by child	3 diagnoses of illness from centipede
2 diagnoses of illness from <u>wera</u>	1 diagnosis of illness from <u>akiau ebora</u>

Total assochia diagnosis involved = 37

(b) In one of these cases the patient (a man) underwent personal 'seeing' after the assochia ceremony.

Further, in each case in which a prior personal diagnosis is 'changed' in assochia the 'substitute' diagnosis is one of those that is consistent with the image of men as powerful vanquishers of life-threatening forces. The 'substitute' diagnoses for women are of illness from relatively weak agents: centipede, maranda and large yams. Those for men attribute the disorder to the strong forces, wera and sorcery, to 'mother of marsupials', a diagnosis which implies skill at hunting, or to food touched by one's child, the only diagnosis never treated as having significant connotations regarding the patient's strength.

In contrast, all those patients whose personal diagnoses were affirmed in assochia had explained their disorders in terms that are consistent with the definition of men as kyapukya people on whom survival depends. The men had attributed their disorders to wera, 'mother of marsupials' and sorcery, and the women theirs to maranda, centipede, large yam and to sorcery which was directed at a man and only harmed a woman by accident.

Similarly, all the assochia diagnoses for patients who had not undergone personal 'seeing' prior to the ceremony are consistent with this view of masculinity. The women's illnesses are attributed to centipede and akiau ebora and the men's disorders to wera and food touched by a child.

In short, the course of action generally considered to be most efficacious as regards alleviating the patient's condition is not always compatible with the aim of asserting in assochia the stereotype of men as potent protectors. All participants appear to take for granted that where it has been preceded by personal 'seeing' assochia can only be maximally effective as regards alleviating the sickness if the agent 'seen' by the participants is the same as that previously identified by the sufferer. However, not infrequently, the personal diagnosis is

perceived as casting doubt on the axiom that survival depends ultimately on male strength. Where this occurs assochia experts, other male participants and even women accord priority to affirming this principle as compared with 'seeing' the sickness in the way generally regarded as being most efficacious in purely therapeutic terms.

Insofar as assochia diagnoses provide vehicles for explicit ideological or sociopolitical statements, the main emphasis is on stressing differences between men's and women's vulnerability to harm from the weaker illness causing agents and hence between male and female strength and control over life-threatening forces. The significance of most nriqa viro categories used in assochia is such that assigning the illness to one of them does not generally provide a medium for moral pronouncements or for morally discrediting particular members of the community (cf. Turner 1968; Middleton 1960; Ohnuki Tierney 1981:169-72). Diagnosis of nriqa viro could in principle provide an arena for the expression of rivalry among male co-villagers through statements about the relative strength of particular individuals. We have seen how, in certain contexts, men taunt each other with statements like: 'You are so weak that your wife will always make you ill'. During assochia, however, in keeping with the situational emphasis on male solidarity, the village's men do not attack each other's reputations through diagnoses implying a lack of kyapukya.

There were two cases though, in which failure during assochia to affirm a prior personal diagnosis appeared to be partly motivated by the desire to use the assochia diagnosis as an occasion for speeches about men's social obligation to maintain their strength.

In both instances the patient was Lohu, a married man in his thirties who was notorious for his habit of eating his daily meal off a plate also used by his children. He suffered three distinct episodes

of nriqa viro during fieldwork. In each case the assochia diagnosis was that he was ill from food touched by his child. It was followed by warnings from experts and other men about the folly of neglecting the rules for preventing such sickness, thereby risking one's health and ability to perform assochia and other life-saving men's activities. Lohu himself had not diagnosed the first of these illnesses through personal 'seeing' and had attributed the second and third episodes to menstrual blood and sorcery respectively. The third assochia ceremony for Lohu was the only occasion on which the assochia diagnosis involved 'changing' a personal one compatible with the image of men as strong protectors of the community.

Insofar as the participants believe that the ceremonies neutralise irama before it can strike then assochia might well have a moderating effect on inter-group sorcery by decreasing the likelihood of illnesses being attributed to this source. In my experience Yonura people themselves did not represent assochia as playing this kind of role. Nor does controlling the incidence of sorcery accusations appear to be a motive for failing to affirm personal diagnoses of illness from irama.

Returning to Table 5 it can be seen that while four personal diagnoses of irama were not affirmed there was one case in which an assochia diagnosis of irama was 'substituted' for the personal one. The fact that fewer women's than men's personal diagnoses of sorcery were affirmed seems not to reflect significant differences between the political implications of sorcery diagnoses for men and for women. Given that sorcery is always between villages rather than individuals and that women are only ensorcelled by virtue of their current residence in a particular village, a sorcery diagnosis implies attack from the same village irrespective of the victim's sex. Nor does the gender of the victim appear to have a significant bearing on the readiness of co-villagers to start

retaliatory hostilities with the sorcerer's group.

By the end of the collective 'seeing' episode the patient has generally stopped denying the validity of the 'substitute' diagnosis. All the other participants have tacitly or explicitly signified that they accept it by putting forward 'evidence' to support it, or by otherwise seconding the experts' statements. Any subsequent vuha ceremony is usually directed at the agent identified during assochia. Yet a day or two after assochia the patient usually reverts to treating the cause identified in personal 'seeing' as the real (tanruva) one. Moreover, a few days after the ceremony, other villagers, including assochia experts, often represented the disorder to me as the outcome of attack by the agent 'seen' personally by the patient, sometimes adding that 'only the sick person can see what is inside his belly'.

The situation is thus one in which an illness is quite frequently attributed to quite different causes by the same person and at much the same stage in its development. It was only after some months in the field that I began to understand that much of this apparent inconsistency was in fact a specific manifestation of the systematic tendency to which I have referred on a number of occasions, for different paradigms of the relations between men, women and life-threatening forces to come to the fore in different types of context. Chapter 4 showed how the exaggerated emphasis on male strength and superiority during public gatherings of village people is only situational. Shortly after they are over there is a reversion to 'everyday' definitions of masculinity and femininity in terms of which men's powers appear quite limited, women can be more kyapukya than men in certain respects, and it is taken for granted that individual men may fall ill from contact with weak illness causing agents and individual women from contact with strong ones.

CONCLUSION

All participants in assochia appear strongly committed to ensuring that the ceremony restores the patient's health and protects the participants against illness by neutralising sorcery substances and alleviating the 'fear' that increases vulnerability to nriqa viro.

An assochia diagnosis of illness from irama may implicitly allocate responsibility for the disorder to a specific group. However assochia deals with sorcerers themselves mainly through 'long range ritual vengeance' (Douglas 1970:xxvi). It does not involve systematically attempting to identify them or their villages as a basis for revenge nor, as in the case of the Fore kibung meetings, seeking to control inter-group sorcery through ritual 'peace making' between hostile groups (Lindenbaum 1979:100-8).

The adult male participants explicitly treat assochia performances as a platform for rehearsing and refurbishing the threatened image of men as powerful vanquishers of life-threatening forces, an image that entails particular notions regarding feminine attributes and capabilities, the importance of strength and bravery (kyapukya) and threats posed to Yonura villagers by hostile external forces.

Where the patient has already 'seen' the sickness in terms that are inconsistent with the definition of men as the stronger and more important sex, assochia experts and other men accord sociopolitical goals priority over purely therapeutic ones. They 'change' the personal diagnosis to one that is consistent with this stereotype, despite their belief that assochia cannot be maximally effective in alleviating the sickness unless the agent collectively 'seen' by the participants is the same as that identified by the patient through personal 'seeing'.

Men represent such public affirmation of collective male potency

not simply as performing an expressive function but also as important on therapeutic and sociopolitical grounds (aspects not always separable from an Ommura perspective). They stress the importance of reinforcing their confidence in their own powers and thus enhancing their ability to effectively protect the community. They regard women's sense of dependence on strong male protection as crucial for maintaining masculine prestige, and also as a corrective to wives' reluctance to work industriously for the benefit of their husbands and the community. Further, notions about differences between male and female strength may be seen as an important element in a set of arrangements that allocates to men the most prestigious activities and key roles in public affairs.

That the female participants collude in situationally maintaining this image of male superiority may be partly attributed to habit and convention. Also, I have observed that women seem not to place quite the same value as do men on personal kyapukya. However, when they give public assent to exaggerated assertions of male strength women may be seeking to reinforce their own as well as men's confidence in the reality of the collective male power to protect. Yonura people see their welfare and survival as chronically threatened by human and non human forces beyond the village. I suggested earlier that this orientation - quite striking in its strength - gives women an interest in sustaining male powers which they see as their own collective protection against external life-threatening forces. A basic belief in the reality of this power is not inconsistent with more private doubts or grumbles at the privileges men claim in other contexts on account of it.

Thus, while the aims of personal 'seeing' are primarily therapeutic and expressive, the collective 'seeing' episode in assochia must be understood as a process in which the assochia experts, the patient and other participants pursue, with varying degrees of commitment, therapeutic

prophylactic and expressive ends and also sociopolitical goals relating to the affirmation of dominant gender distinctions. In keeping with the differences between the aims of these two 'seeing' procedures illness categories are used for different communicative purposes in assochia and personal 'seeing' respectively and different dimensions of their significance come to the fore. In assigning the sickness to a particular category in personal 'seeing' the patient is primarily attributing it to 'fear' arising out of exposure to a specific agent or set of circumstances, and perhaps articulating the distinctive experience of that 'fear'. The emphasis is on cognitive and affective dimensions of the significance of illness categories. The assochia diagnosis also involves a descriptive or cognitive use of nriqa viro categories insofar as it is aimed at enabling the participants to 'see' the cause of the disorder. However, here the primary emphasis is often on using illness terms as vehicles for ideological or normative statements. Where what is generally regarded as the 'true' or 'real' (tanruva) explanation for the illness is perceived as inconsistent with the image of men as strong protectors of the community many participants accord reasserting this definition of masculinity priority over focussing on the agent that they hold responsible for the sickness.

Recent analyses of the explanation of sickness in Papua New Guinea societies have stressed the fact that these procedures appear unsystematic when judged against what are broadly the standards of biomedicine or scientific explanation. Having focussed on cognitive aspects of the diagnosis and explanation of illness among the Gnau, Lewis concludes:

As a mode of medicine, it lacks the systematic ordering and institutionalization that would fit it to be called a medical system. Made as it is of a great variety of kinds of knowledge to penetrate why things should be as they are, questions of proof and disproof remain uncertain. The reference to evidence in diagnosis, and interpretation of it, follow general rules of logic in terms of space, time, category, person and cause. But in detail the variety of bits and pieces of possible evidence, the selective attention given now to one facet of the situation, then another, permit multiple explanations for the same illness along different lines of reasoning (1975:353).

Similarly, Barth characterises Baktaman modes of explaining sickness and making decisions regarding treatment as 'a poorly systematised sector of knowledge' (1975:244). This judgement is based primarily on the observation that multiple explanations are often given for the same sickness with little apparent concern for their mutual consistency and 'no attempt to measure their varying plausibility and implications against each other...' (ibid. 142).

Given that neither Gnau or Baktaman have procedures for arriving at diagnoses which the whole community treats as being relatively authoritative one would not expect the explanation of sickness among either of these groups to be as systematised as in Yonura. Nevertheless, it would be interesting to determine whether analysis in terms that took account of sociopolitical and expressive as well as cognitive and 'medical' factors in the explanation of illness would reveal that in these two New Guinea groups apparent inconsistency in the labelling of sickness was regularly, as in Yonura, the outcome of systematically according sociopolitical considerations priority over 'medical' or cognitive ones. One might expect sociopolitical and expressive goals to have a significant bearing on diagnostic decisions in relatively undifferentiated societies such as these where illness concepts are often deeply embedded in their social and cultural contexts.

Yonura people cite an increase in sorcery as their immediate reason for having adopted assochia. They tell how they later modified the ceremony so that it could be used to cope with increasingly 'strong' illnesses. In taking up this new treatment, or at least in adapting assochia in the particular ways that they did, Yonura men may have been responding to the perceived implications of pacification for gender distinctions as well as for public health and safety.

Assochia, as currently practised in Yonura, seems a particularly

suitable medium for refurbishing the threatened image of the village's men as strong protectors of the community. It provides an alternative arena in which men, deprived of their role as warriors, can engage in regular and spectacular displays of their power over life-threatening forces. Ommura healing ceremonies have traditionally constituted a setting in which men collectively impress women with their prowess. However assochia appears to be much more elaborate than any other therapeutic rite in use now or in the remembered past and to involve more spectacular displays of male kyapukya.

Not only did the introduction of this ceremony involve an overall elaboration of men's healing activities, it also marked an extension of male control over the diagnosis and treatment of sickness in women. This is the first time in remembered history that anyone other than the patient himself or herself has regularly claimed the authority to make diagnostic decisions regarding nriqa viro in adults, or that almost every case of nriqa viro has been treated as an occasion for a public healing rite. Nor have men previously claimed to be able to cure disorders defined as gynaecological. The treatment of such ailments was traditionally an exclusively female activity.

The shift from self diagnosis to public identification of the afflicting agent by Yonura men is consistent with Ommura notions of therapeutic efficacy. Perhaps, however, we may see this development as reflecting not simply therapeutic or 'medical' considerations but also a feeling that traditional definitions of masculinity are now so severely threatened that it has become necessary to protect them against further questioning in the contexts of diagnosing illness.

Despite extensive questioning I learned of no Ommura rituals that emphasise the male role in procreation or men's contribution to human fertility, nor of practices that can easily be interpreted as involving

male 'imitation' of menstruation or pregnancy (cf. for example, Strathern, A. 1970; Meigs 1976; 1984; Hogbin 1970; Lindenbaum 1976)⁽²⁾. However, Ommura men have traditionally claimed ultimate responsibility for producing the next generation on the grounds that mothers and children would perish without military protection. It may be, then, that men who present assochia as a cure for infertility in women are responding to a sense that, following pacification, they need new grounds on which to claim responsibility for the production of children. They can cite the increased 'strength' of illnesses and of healing ceremonies as evidence that the decline in warfare has not diminished their contribution to women's survival. However children, as we have seen, are not generally considered to suffer from nriqa viro.

CHAPTER 11:

UAHA AND VUHA.

Yonura people say that uaha and vuha have 'always' been practised in the village. One or both of these ceremonies is indicated in addition to assochia where the illness is considered to be severe (nronra, literally 'big'). In keeping with the principle that susceptibility to sickness depends on the patient's kyapukya as well as on that of the afflicting agent judgements of severity are based on the extent to which the sufferer feels incapacitated rather than on the cause to which the disorder is attributed. An illness may also be judged to be severe where the patient or others 'see' or intuitively feel that he or she is close to death although not severely incapacitated.

It is usually the sick person who suggests that vuha should be performed although assochia and vuha experts may claim to 'see' during assochia whether the patient's decision was correct. Vuha was not in fact held for the two men whose suggestions that they should undergo this ceremony were 'seen' to be mistaken. The decision to hold uaha is made collectively by village men.

UAHA

Uaha, it will be recalled, is considered to have been largely superseded by assochia as a means of 'chasing away' the afflicting agent. It is staged occasionally when additional 'chasing away' is deemed necessary following assochia. The only performances during fieldwork were one for Irai, a Samura man in his thirties, and one which I was unable to attend for Hindoha of Sonura, in his late twenties. Both men had 'seen' that their illnesses were from irama and their personal diagnoses had been affirmed in assochia.

The only explanation I was able to elicit as to why uaha had been performed for these particular cases of illness and not for others judged to be equally severe, was that 'assochia showed that uaha must be held for these men'. However it may be relevant that both Irai and Hindoha were diagnosed with sickness from irama at times when feeling was running high against the village implicitly held responsible for the sorcery. Uaha with its violent displays of mimed aggression is explicitly regarded as providing a particularly suitable opportunity for the patient's kin and co-villagers to vent 'anger' against the afflicting agent. Perhaps the violent symbolic attacks in this ceremony are also seen as a means of containing hostility that might otherwise erupt in military attacks at times when embarking on inter-group fighting appears unfeasible.

The following account of uaha is based on observation of the ceremony for Irai, which was held in Nondatauro's house, and on informants' descriptions of several others.

Nondatauro is considered to be especially skilled at preparing the plant substances used in this healing ritual and takes much of the responsibility for this task. However in the case of uaha, as opposed to assochia and vuha, there are no experts who play a leading role in conducting the ceremony. Yonura people say that all men are equally adept at performing it and no one receives payment for their contribution.

Uaha starts shortly after sunset and is attended by most villagers. Women, girls and uninitiated males assemble in the 'women's' zone of the house near the door. The patient sits against the central support post, just in front of it if she is female and just behind it in the case of a man. The atmosphere is less formal than during assochia and the house is not decorated.

The therapeutic goal of the first stage of the ceremony is to 'attack' and 'frighten away' the afflicting agent. The men, dressed in full mili-

tary regalia and brandishing shields, bows and arrows, rush into the hut from outside and perform war dances around the patient. The women cheer them on and sing 'to make them strong so that they can kill the sickness'. In Irai's uaha the 'attack' continued for about half an hour, gradually increasing in intensity until all the men were snapping their bow strings and uttering war cries and the women stamping their feet and brandishing sticks. When the war dances are over, several men light bamboo torches and circle the hut with them 'so that the sickness knows we can see it and will get frightened and let go of the marauha'.

The afflicting agent is never named in uaha although generally personal 'seeing' and/or assochia have been completed by the time it is performed. It is possible that until the introduction of assochia in which personal diagnoses can be 'changed', this was considered important for averting reference, in a formal, public gathering to diagnoses perceived as casting doubt on the image of men as strong protectors of the community. A healing ceremony in which the agent is not named could also serve to counteract any dissatisfaction on the part of those whose personal diagnoses are not affirmed in assochia, through enabling them to feel that the ceremony is being directed against the agents which they themselves have identified. As noted earlier, both of the men who underwent uaha during fieldwork had received assochia diagnoses that affirmed their personal ones.

Once the agent has been 'chased away' some men pour water over the patient 'to wash away the sickness'. Sometimes he or she is also made to walk under an arch formed by splitting the trunk of a banana tree of the hirachia variety 'which is full of water and therefore washes away the sickness'. Finally men spit powdered aromatic tree bark (kupu) over the patient and all male and female participants throw aromatic leaves: 'The good smell of the kupu and leaves goes into the sick person's nostrils and chases away the bad smell of the sickness so that he feels better.'

Any leaves considered to have a strong and pleasant smell (kiuge munda) are appropriate. The most commonly used are the varieties known by the Ommura names of ahiri, vatekya, manria and taponara, all of which are used in various contexts to counteract the 'bad smell' of death or decay. People who have buried a corpse or accidentally consumed rotten pork wash their hands in water in which such leaves have been boiled. Some women say they wear aromatic leaves in their skirts during their periods 'to chase away the odour' of menstrual blood.

As the men dance brandishing their weapons their most flamboyant displays of strength and martial prowess are manifestly directed at the female participants rather than at the patient. They appear as concerned with reinforcing women's perception of men as powerful people on whom survival depends as with freeing the patient's marauha and maximising their own powers to protect the community. Some dancers are clearly intent on enhancing their attractiveness to the opposite sex. We have seen how girls and women are said to be powerfully attracted by male dancers in fighting attire and Yonura people stressed how uaha, like other ceremonies where men perform war dances, provides an occasion for initiating courtships.

As in other public ceremonies and gatherings of village people women actively participate in creating and maintaining an exaggerated image of men's strength and social importance. They greet each flamboyant display of martial skill with cheers and applause. Their songs during uaha stress male attractiveness as well as strength. In one, here in rough translation, women tell men that they are so greatly impressed by and attracted to them that they cannot sit down:

Uaha men! uaha men! we can't sit down.
Although we are married and have babies we can't sit down when we see you.
Uaha men! uaha men! when we see you dance we can't sit still.

VUHA

It is said that all men are capable of performing vuha although some are more skilled than others. In all the fifteen vuha ceremonies during fieldwork - nine for women, five for men and one for a child - Apaia of Samura hamlet, an acknowledged vuha expert, played a leading role. Towards the end of my stay Umau of Sonura hamlet who had only recently settled in Yonura, began to conduct vuha together with Apaia and was generally considered to have become a vuha expert.

Ideally a pig should be killed for vuha. However tinned meat or fish is used where the patient is unable or unwilling to kill a pig or to obtain one as a gift or loan or through exchange.

The twelve vuha performances I attended all followed a fairly standard procedure although the emotional tone varied according to the value placed on the patient and the extent to which the disorder was felt to be life-threatening. In each case participants explained the proceedings to me during or after the ceremony. Experts' explanations did not differ in any systematic way from those provided by other men or women.

Before noon vuha experts and other men gather the necessary leaves and barks and, watched by the patient and other members of his or her household, prepare a stone oven near one of the streams which run through Yonura. As the smell of heated aromatic leaves and cooking pork and/or vegetables begins to waft through the village people start to assemble and sit chatting in small groups. Those with pressing work are not expected to attend. Hence there are generally fewer participants than in assochia, uaha or other public ceremonies performed after dark. When the ovens have been opened, the preparations completed and a portion of the cooked food put aside as the experts' payment the participants assemble at the stream. The patient stands or sits on a stone in the water while the expert(s) hold over his or her head the therapeutic substances

combined into a single, visually impressive structure called the kamara. The other men gather round the expert(s) with the women, girls and un-initiated males facing them in a semicircle.

The composition of the kamara does not vary according to the cause to which the disorder is attributed. It consists of a large vertically held branch of tapu'a, a tree fern, to which the following items have been attached:

- 1) Aromatic (kiuge munda) leaves of the same varieties used in uaha to counteract the 'bad smell' of the sickness and 'make the patient feel better'. These are tied in a fan shape around the leafy end of the tapu'a branch.
- 2) A heated stone from the oven in which the food was cooked.
- 3) An unheated stone.
- 4) A parcel of obu leaves containing a mixture known as kapika which is used in a variety of dangerous situations to protect against harm. It consists of mashed green bananas, pork fat, meat, hema bark and vegetable or store bought salt, all steeped in an infusion of aromatic leaves. The banana should be of the hirachia variety also used in uaha and which is regarded as particularly suitable for 'washing away the sickness' because of the large amounts of moisture in its leaves and trunk. Salt and meat, like hema, are used in various contexts for their 'strengthening' properties. Some people claimed that the pork fat helps to restore the patient's skin' (mamanta) to 'fatness' or sleekness. One woman suggested that when this fat was 'melted' it helped to 'wash away the sickness'.
- 5) Strapped horizontally across the tapu'a branch is a split length of sugar cane into which have been sandwiched pieces of meat sprinkled with hema and wrapped in an aromatic leaf. As in other contexts in which leaves are used to counteract the 'smell' of sickness or decay, any of the varieties classified as kiuge munda, or pleasant smelling, may be used.

Usually the lower half of the sugar cane from which this length is taken is planted 'so that as it grows strong the sick person grows strong too.' This was not done in the vuha for a woman who was judged to be terminally ill and was undergoing the ceremony 'to enable her to live a little bit longer' rather than in the hope that she would be restored to health.

6) Sometimes the kamara also includes a cordyline cutting with a lock of each participant's hair and some meat and hema wedged into a slit at its base.

The attack on the afflicting agent in assochia or uaha is said to leave it angry with its victim and possibly seeking an opportunity to take revenge by recapturing the marauha. Hence if one is severely ill one remains so 'afraid' that, despite the fact that the agent has been forced to release it, the marauha fails to return and bodily symptoms persist. Yuha involves attempting to avert further attack by 'making peace with' the afflicting agent. In addition, the participants combine forces to 'hold' the marauha so that it cannot be recaptured. They also hope that this display of support will reduce the patient's 'fear' sufficiently to enable the marauha to return to the body.

When the participants are assembled each reaches out a hand to touch the kamara and remains in this pose for the rest of the ceremony. The meat sandwiched in the sugar cane (item 5) and the meat wedged into the cordyline with the hair (item 6) are handed round so that everyone including the patient can take a portion and then spit on the unheated stone. If a man who provided the patient with the vuha pig is present he may inhale the aroma of the food rather than eating it.

The combining of participants' hair and saliva constitutes a powerful expression of their solidarity with the patient and of the unity of the group and its power over the afflicting agent. It is reminiscent of episodes in male initiations where all the novices spit together onto a stone and

defaecate communally to emphasise their solidarity as age mates and military comrades. Similarly, as in assochia, the everyday rules against wives and husbands and parents and children eating from the same utensils or touching each others' food are situationally lifted.

As they eat the participants reassure the patient that there is no longer any cause to fear because

we are all touching the kamara and eating this meat together so that the marauha of each person is going out to your marauha. Our marauha will stay with yours for a while and hold it so that it can't be taken away.

The only other purpose for which tapu'a is regularly used is making hides for hunting. Perhaps in holding these large tree ferns over the patient the experts are 'hiding' him or her from the afflicting agent. All informants insisted that only tapu'a could be used for the base of the kamara. However neither vuha experts nor other men or women could give me any reason for this other than 'that is what the uri taught us'.

In each vuha ceremony I attended I was struck by the extent to which, during this episode, every participant appeared genuinely and intensely concerned with providing support for the patient and alleviating the sickness.

Next the men collectively make peace with the afflicting agent in a manner reminiscent of the obu peace making ceremony in which enemy sides exchange pork cooked with obu leaves. They pour some of the kapika mixture in the obu leaves (item 4) onto the heated stone so that it sizzles, and make speeches asking the agent to take the pork so that it and Yonura people can cease to be enemies. Until the introduction of assochia the agent was not named in vuha. Now, in keeping with the new emphasis on ensuring that sicknesses are publicly presented in terms that affirm the image of men as strong protectors of the community, men tend to address their speeches to the agent to which the disorder was attributed in assochia. In the vuha held for Nrinti, a middle aged married woman who

had been diagnosed in assochia with illness from a centipede they said:

Centipede, Nrinti cut you when she was digging in the ground so you got angry and made her sick. Then we men attacked you because you had taken away her marauha and locked it up in your house. But now we're burning pork and obu for you.... . Let the smell go up into your nose and mouth. Then you can leave the people of Yonura alone and not try to harm them.

In one case where the illness had been attributed to maranda, a further portion of the kapika was set aside to be burned at the site where the patient had cut the vine.

When the agent has been pacified water is poured over the aromatic leaves onto the patient's head 'to wash away the sickness'. The men throw the kamara into the stream 'so that the sickness will float away with it'. All participants remind the patient that there is no need to fear the afflicting agent because the whole group is holding the marauha. Then follow speeches by vuha experts and other men to the effect that Yonura men have had to do extremely hard and dangerous work in order to pacify the agent, 'kill' and 'wash away' the sickness and strengthen the patient. In particular they hold forth on the dangers men have had to face entering the forest and climbing trees to obtain the plant substances used in the kamara, on how they have risked burning themselves with hot stones and on how women would 'always be sick' if it were not for the fact that men were sufficiently kyapukya to perform vuha. As in assochia the beneficial effects of the ceremony are credited to the village's men as a collectivity rather than to the expert(s).

Finally the adult male participants call out names of villages in the area warning them that Yonura men have just demonstrated their strength by 'killing' a sickness and will likewise 'kill' anyone who launches an attack on their village. Women echo these boasts with cries of 'You speak truly!'.

CONCLUSION

In this thesis I have attempted to convey the cultural meaning of illnesses recognised by Yonura people and the logic according to which they manage these disorders. This has involved analysing illness concepts as polysemic categories that link up with diverse cultural domains. Assigning an illness to a particular nriqa viro category can constitute a statement about the patient's recent activities, circumstances, 'emotional' state and personal strength as well as about the nature of masculinity and femininity and the dangers involved in failing to make adequate affinal prestations.

Diagnosis and therapy were analysed as processes in which multifaceted illness categories are used for a range of expressive and communicative purposes, and which entail explicitly pursuing a range of goals over and above alleviating the patient's condition.

The aims of personal 'seeing' are primarily therapeutic and expressive. In assochia, as in other public healing ceremonies, the participants pursue therapeutic, prophylactic and expressive ends as well as attempting to affirm particular gender distinctions. In keeping with the differences between the aims of these two diagnostic procedures, illness categories are employed for different communicative purposes in personal 'seeing' and assochia respectively, and different dimensions of their significance come to the fore. Through assigning the disorder to a particular agent in personal 'seeing' the sufferer is attributing it to a specific configuration of 'fear' and perhaps articulating the experience of that 'fear'. Affective and cognitive dimensions of the significance of illness categories are to the fore. Assochia diagnosis also involves a cognitive or descriptive use of illness terms in that it is aimed at enabling the participants to 'see' the cause of the disorder. However in this ceremony

there is often an overriding emphasis on using diagnostic categories as vehicles for ideological statements about the distinctions between the sexes.

Yonura people recognise four general classes of illness: nriqa viro which mainly affects adults, afi nriqa or 'nothing' pain or discomfort, women's reproductive disorders, and vunrato afi, a rare psychological disorder which did not occur during my stay. Only nriqa viro is always considered to require explanation and treatment, and this study focussed nriqa viro in adults. I did not deal with women's reproductive disorders as knowledge relating to these is regarded as 'secret' and I was asked not to write about what I learned of it.

The people of all three Ommura villages share the same general views of illness and its causes. Their modes of managing sickness are also similar in many respects. However, certain aspects of my account apply only to Yonura as assochia is not performed in Asara and Koronombura. Moreover, due to their fear of sorcery, Yonura people make less use of the mission aid post than their neighbours from the other two Ommura villages.

A striking feature of Ommura representations and practices associated with illness is the extent to which they are bound up with ideas, values and attitudes associated with the inter-village warfare that was endemic in the region. People of many cultures couch some of their medical ideas in a military idiom. Even biomedical discourse contains images of the body being 'attacked' or 'invaded' by and 'mobilising its defences' against germs or cancer cells. In Ommura, however, perceptions of and attitudes towards sickness are so powerfully coloured by a cultural preoccupation with the threat of attack by external enemies that warfare imagery pervades almost every phase of the explanation and management of nriqa viro.

Thus the sets of circumstances considered to cause bodily harm in the form of illness have in common that they are metaphorically linked with the situations seen as sources of bodily harm from military attack. Every public healing ceremony involves either symbolic military attack on the afflicting agent or making peace with it through a process that is analogous to the obu ceremony with which war is terminated.

A warfare paradigm also shapes evaluative attitudes to sickness. Just as attack from military enemies is not something for which the victim is held morally responsible, so illness is not generally treated as the outcome of serious moral misdemeanours. Yet succumbing to attack from an illness causing agent can, like failing to vanquish a war enemy, indicate that one lacks courage and strength (kyapukya), a personal quality that Ommura value very highly.

While the process of illness causation is often represented in terms of the mystical sounding idiom of 'attack' by a non human 'enemy', the patient's 'emotional' state is also seen as playing a causal role. Resistance to illness is considered to derive not only from physical strength and control over magical forces but also from the ability to face threatening situations without becoming fearful. There are intriguing parallels between the causes of nriqa viro taken as a set and those lists of 'stressful life events' used by sociologists and psychologists for studying psychosocial factors in the aetiology of disease. Nriqa viro categories can be seen as collective representations which metaphorically represent distinctive configurations of 'fear' arising out of the specific conditions of Ommura social life. Links between the patient's 'emotional' state and the onset of illness are posited in many parts of the world. The fact that Ommura associate sickness specifically with 'fear' rather than with, say, 'sadness' (cf. Buxton 1973; Ohnuki Tierney 1981:147) 'fits' well with a military paradigm.

The view of illness causation as the outcome of war attack is related to another distinctive feature of Ommura medical beliefs and practices - the fact that they focus so strongly on aetiology that the body is virtually reduced to an uninformative 'black box' (Young 1982: 259).

Young has suggested that 'medical discourses' can be arranged along a continuum from externalising to internalising discourses. Externalising discourses rely primarily on aetiological explanations for illness. Internalising discourses rely mainly on functional explanations, that is, explanations which situate objects and events within the sick person's body. By 'discourse' he means 'generative rules that govern the content of a particular domain of knowledge (e.g. the science of chemistry, Kwakiutl medicine)' (Young 1978:110. *Emphasis in original*).

Externalising discourses do not involve elaborated notions regarding functional links between aetiological events and symptoms. Hence they can generate only relatively gross symptomatic distinctions. Symptoms are often unarticulated, percepts rather than concepts. By contrast, internalising discourses, of which biomedicine is an extreme example, enable people to observe a wide range of bodily states and concentrate diagnostic effort on observing symptoms (Young 1978:114-5).

Most 'medical discourses' include functional explanations as well as aetiological ones. However, when externalising discourses incorporate functional explanations the latter are simple notions such as soul loss and do not link bodily components into a system (Young 1978:114). Internalising discourses involve more elaborate functional explanations which are often based on concepts of abnormal bodily functioning and which 'make it possible and necessary to distinguish between symptoms that simple functional explanations cannot or will not separate' (ibid:113).

Ommura 'medical discourse' is very close to the externalising

end of the continuum. Their most elaborated 'medical' concepts relate to the aetiology of nriqa viro⁽¹⁾ and there is little emphasis on precise discrimination of bodily symptoms or explanations organised around notions of abnormal bodily functioning. What treatments there are for minor ailments (ati nriqa) are symptom specific. Yet they are performed comparatively rarely and seem to be less complex and numerous than symptom specific treatments practised by, say, Tshidi of Southern Africa who also classify sickness primarily in terms of its causes (Comaroff:1980:644-5) or by Zinacanteco Indians whom Fabrega and Silver have described as lacking refined notions concerning the body as a system (1973:218).

This emphasis on aetiology rather than symptoms or functional explanations must be understood in relation to Ommura conceptions of the person and body. There is more conceptual elaboration regarding the relations between bodily states and social circumstances than regarding the functioning of the body as a relatively independent system. It also seems that concepts relating to the aetiology of 'psychological' or 'emotional' states are more elaborated than those relating to their phenomenology. Emotions and feelings, like bodily sensations, are conceived of as being in large part 'hidden' in the body, invisible to others and not a subject for precise verbal communication. Moreover, my data suggest, although not conclusively, that there are more Ommura terms which like kiaunrinro (shame) described in chapter 5, have a social as well as a psychological reference, than terms denoting purely 'psychological' or 'inner' states.

The fact that their 'medical discourse' is so markedly externalising also 'fits with' the way in which a 'healthy' state of society is defined in terms of Ommura social ideology. As in many other cultures conceptions of bodily health are analogous, in certain respects, to views of what constitutes an orderly state of the body politic.

It seems that Ndembu, for example, assess the 'health' of their

community primarily according to the extent to which internal harmony prevails, and see tension among its members as the main threat to its well-being (Turner 1967; 1968). By contrast, Ommura social ideology represents the primary threat to the well-being of the community as coming from outside it in the form of war or sorcery attack by enemy villages. These differences between Ndembu and Ommura conceptions of a 'healthy' state of the social unit are paralleled by differences in their views of sickness. Ommura tend to construe illness as the outcome of attack by external forces rather than as a matter of internal disorder. Ndembu place more emphasis than them on functional explanations which situate objects and events within the sick person's body. Moreover Ndembu symptom specific treatments are more numerous and complex than those currently employed by Yonura people (Turner 1967).

There are indications that a marked emphasis on aetiological rather than functional modes of describing and explaining sickness may be a characteristic feature of indigenous medical beliefs and practices in certain types of Papua New Guinea society. I noted how the Gnau of the Sepik also classify illness primarily according to aetiology. While they have terms for indicating the site and features of a sickness they do not ordinarily use these terms to define or analyse how someone is ill (Lewis 1975:137). Lewis also describes Gnau as being 'pitiful herbalists' in the sense that by comparison with Ndembu (Turner 1967) and Zande (Evans-Pritchard 1937) they have very little in the way of 'treatment by specifics, by herbs and medicines whose appropriate composition depends on recognising the kind of illness by its symptoms' (Lewis 1975:143).

Similarly, for Gimi of the Eastern Highlands, 'diagnostic statements centre on the premise (so integral to their world view as not to receive overt expression) that what matters most about an illness is its cause' (Glick 1967:39; cf. Foster 1982). What medicines they use are, with a

few exceptions, 'not related to particular illnesses and never are they said to be cures for specific disease processes'. As in treatment for nriqa viro they are used primarily to 'strengthen' the patient (ibid:44).

A tendency to treat emotions, feelings and bodily sensations as subjects not amenable to precise verbal communication may also be typical of certain types of New Guinea society. Barth notes how Baktaman of the Western District are not given to 'exploratory or analytical discourse about the complex constitution of the emotions or motivations of others...' (1975:245), and according to Lewis the 'use of simple behavioural descriptions to indicate more complex human conditions, emotions or responses is characteristic of Gnau idiom' (Lewis 1975:137)⁽²⁾.

Further, it appears that in New Guinea sorcerers and witches are commonly said to be outside the communities of their victims (Marwick 1970; Brown 1978:64)⁽³⁾. This suggests that a tendency to emphasise external rather than internal threats to the well-being of the social unit may often be a feature of New Guinea social ideologies.

Where a group's 'medical discourse' is situated on the internalising/externalising continuum will clearly be related in a general way to its technological level (Young 1978:113). At the same time, the comparisons just drawn between Ommura and Ndembu indicate that groups at a similar technological level may vary quite significantly in terms of the extent to which they use elaborate functional modes of explaining and describing sickness or rely on aetiological explanations. The parallels noted above between Ommura and other New Guinea cultures, together with the contrasts between Ndembu and Ommura, raise the question of whether a marked emphasis on aetiological rather than functional models may be regularly correlated with certain types of conception of the person and of what constitutes a 'healthy' state of the body politic. Further comparative analysis may be able to investigate whether, as this discussion suggests

may be the case, an ideological emphasis on internal rather than external threats to the well-being of the community and a cultural tendency to treat 'psychological' states as not amenable to precise verbal communication or as inextricably related to social factors will be regular concomitants of strongly externalising 'medical discourses'. Conversely, it may be that where a 'healthy' state of the community is defined primarily in terms of internal order or harmony, and dominant conceptions of the self encourage exploratory or analytical discourse about emotions and sensations, there is likely to be more emphasis on elaborated functional modes of explaining and describing sickness.

In Yonura beliefs and practices associated with illness constitute potent symbolic media through which dominant views of male/female distinctions are rehearsed, questioned and reformulated in the wake of threats posed to their validity by the decline in men's role as warriors. The nature of the distinctions between males of different initiatory status is not a major theme in diagnosis and treatment. This reflects the fact that nriqa viro is an adults' disorder. Moreover male initiation ceremonies constitute the main ritual sphere in which these power distinctions between men and youths are affirmed.

Notions about differences between male and female strength (kyapukya) are integral to views of the distinctions between the sexes. Definitions of masculinity are closely bound up with the image of men as the stronger sex who are ultimately responsible for the survival of the village community by virtue of their military activities and the healing and crop fertility rites that they collectively perform. These men's activities are all represented as processes which involve vanquishing powerful life-threatening forces and require a degree of strength that no woman could muster. Central to Ommura images of femininity is the definition of women as nurturers of crops, children, pigs and men, and as

ultimately dependent for their survival on male protection against military enemies and illness causing agents. These gender stereotypes are an important element in a set of arrangements that allocates to women the primary responsibility for routine productive work and to the village's men control over public affairs.

The image of men as strong protectors of the community has traditionally been less consistently affirmed in certain contexts than in others. In most everyday contexts male strength is represented as being quite limited. By contrast on public occasions it is conventional to represent the village's men collectively as having virtually complete power over life-threatening forces, and women as much weaker and making a relatively negligible social contribution. The decline in men's military activities following the banning of warfare by the administration has exacerbated men's and women's doubts regarding the extent of masculine kyapukya.

Illnesses vary in their connotations regarding the patient's strength. Hence the diagnosis of illness in men and in women bears a significant relation to notions regarding the kyapukya of each sex. People of both sexes tended to diagnose their own illnesses through personal 'seeing' in terms which reflect the 'everyday' paradigm of male/female distinctions that represents masculine and feminine strength as being relatively balanced. When a woman assigns her disorder to a nriqa viro category which implies considerable strength or a man diagnoses his in terms that imply he is lacking in kyapukya the diagnosis is, from the perspective of the patient who makes it, primarily a statement about his or her attributes as an individual rather than a challenge to the axiom that men are the stronger and more important sex. Such diagnoses may indicate that the men and women who make them do not unequivocally define themselves in terms of the images of masculinity and

femininity entailed by this principle. However, they are also treated as a threat to the validity of the axiom that men are the strong protectors of the community. People of both sexes maintain that diagnoses that are inconsistent with this principle have become more common and that this reflects the fact that, following pacification, women have increasingly come to regard themselves as men's equals, while men lose confidence in their powers.

Assochia diagnoses reflect the emphasis during public healing ceremonies, as on other public occasions, on exaggerated affirmation of the image of men as potent vanquishers of life-threatening forces. Where the patient has already 'seen' the illness in terms that are inconsistent with this image the assochia experts and other men accord sociopolitical and ideological goals over purely therapeutic ones. They 'change' the personal diagnosis to one that is consistent with this stereotype despite their belief that assochia cannot be maximally effective in alleviating the sickness unless the agent collectively 'seen' by the participants is the same as that identified by the patient through personal 'seeing'.

More generally the adult male participants in this ceremony explicitly treat assochia performances as an arena in which they can engage in powerful displays of masculine strength and powers to protect the community. They also use assochia as a forum for refurbishing threatened images of masculinity by asserting that any decline in their role as vanquishers of military enemies has been counterbalanced by an increase in the social importance of their role as vanquishers of illness causing forces.

In many contexts women do not unequivocally concur with assertions about male strength and superiority. In assochia, however, as at other formal gatherings of village people, they collude in situationally

maintaining the definition of men as considerably stronger than themselves and as making a more important social contribution. I suggested that this may partly be attributed to habit and convention and to the fact that women do not place quite the same value as men on personal kyapukya. However when they publicly concur with exaggerated assertions of male strength women may also be seeking to reinforce their own as well as men's confidence in the reality of the collective male power to ensure survival. I noted the extent to which Yonura people still see their welfare and lives as being chronically threatened by human and non-human forces external to the village. This orientation - quite striking in its strength - gives women an interest in sustaining masculine powers which they see as essential for their own collective protection against life-threatening forces.

Yonura people cite an increase in sorcery and in the 'strength' of illnesses as their immediate reasons for having adopted assochia. However I suggested that in adopting this new treatment, or at least in modifying it in the particular ways that they did, Yonura men may have been responding to the perceived implications of pacification for gender distinctions as well as for public health and safety.

Assochia provides an alternative forum in which men, deprived of their role as warriors, can regularly and spectacularly demonstrate how survival depends on their prowess. Ommura healing ceremonies have traditionally constituted a setting in which men collectively impress women with their powers to protect the community. However assochia appears to involve more flamboyant displays of male prowess than any other therapeutic rite in use now or in the remembered past. Its introduction also marked an elaboration of men's healing activities and an extension of male control over the diagnosis and treatment of illness in women. This is the first time that anyone other than the patient has regularly

claimed authority to make diagnostic decisions regarding nriqa viro in adults or that men have claimed to be able to cure disorders defined as gynaecological. The shift from self diagnosis to public diagnosis by the village's men is consistent with Ommura notions of therapeutic efficacy. Perhaps, however, this development reflects not only 'medical' considerations but also a sense that men's image as strong protectors of the community is now so powerfully threatened that it must be shielded from further questioning in the diagnostic context.

APPENDIX ONEPERSONAL REMEDIES FOR ATI NRIQA

While these remedies were not regarded as secret, each was apparently known only to one man in Yonura and practised only on himself and his children.

- i) Cure for pain or discomfort in the stomach (bvikyokya) caused by eating raw or undercooked food: 'Chew up some kuauva leaf and spit it over food before eating'. Kiauva is a cultivated plant of the general class maunra and is also used for decorating the body for dances.
- ii) Cure for pain or discomfort in the belly (bvikyokya): 'Eat some dried, powdered iramunira leaf with pig grease.' This plant is also of the maunra class and is sometimes used for decorating the body for dances.
- iii) For headache: 'shoot the forehead with a nrunda huru (miniature bow and arrow). Then rub water or pig grease into the hole made by the arrow.
- iv) For vu nranrenra huviro (red inflamed eyes): 'Heat the tail of a marsupial of the karekora variety and brush it over the afflicted eye. The smoke will remove the pain'.

Karekora tails are also used for decorating novices undergoing the Umara male initiation ceremony.

NOTES TO CHAPTERS

Notes to Introduction

- (1) Approaches that focus on medically relevant aspects of illness related beliefs and practices vary in terms of how they deal with affective and interpersonal dimensions of the significance of illness concepts and the management of sickness. Ethnoscience studies tend to bracket out these aspects while 'explanatory model' studies (Young 1982) stress the 'clinical' relevance of taking account of psychosocial dimensions of illness and healing (e.g. Good 1977; Good and Good 1981).
- (2) Clearly, it may not always be culturally meaningful to distinguish between 'sociopolitical', 'economic', 'therapeutic' and 'interpersonal' goals pursued in the course of managing sickness. (See for example Turner 1967; 1968).
- (3) In Frake's formal analysis of 'The diagnosis of disease among the Subanon', 'social role contingencies' (e.g. a speaker's desire to avoid classifying his own symptoms in a stigmatizing way) - are recognised as a source of disagreement about what name to place on a given set of symptoms (Frake 1961; Young 1982:262; cf. Ohnuki Tierney 1981:14).
- (4) Some of the most detailed material to date regarding the cultural significance and use of specific illness concepts in a Papua New Guinea society is provided by Lindenbaum's analysis of Fore views of the symptoms and aetiology of the neurological disorder kuru. Lindenbaum traces out in detail how the significance of kuru for Fore ramifies into domains such as kinship, politics and gender ideology. She also shows how the explanation of this disorder in concrete instances is shaped both by judgements about the nature of symptoms and by sociopolitical considerations, and sometimes constitutes a vehicle for articulating fear of particular individuals or categories of person (Lindenbaum 1979). In addition to the studies already cited which contain detailed material regarding the cultural meaning of illness in Papua New Guinea contexts and the logic according to which it is managed, there are various articles that provide limited or incidental data concerning the 'emic' significance of illness related beliefs and practices in this culture area. Hayano describes the diagnosis of 'ghost illness' among Tauna Awa as a process shaped by recognition of symptoms, 'the curer's style of diagnosis, his personal interest in the patient and other social pressures' (1975:101). His article is brief and does not examine the ways in which any of these various factors affects diagnostic decisions. Hamnett and Connell (1981) and Romanucci Schwarz (1969) touch on factors affecting choice of therapy in short articles concerned primarily with aspects of the relations between biomedicine and traditional therapies in the North Solomons and Admiralty Islands respectively. Panoff's paper on 'Maenge remedies and conceptions of disease' is intended 'not to be exhaustive...simply...to submit an hypothesis which permits the correlation of certain diseases with certain plants' (1970), and in the course of evaluating the adaptive effects of Nekematigi therapy from an ecological perspective Johanness (1980) shows something of the cultural logic of these practices.

The English articles in the 1977 Societe des Oceanistes issue on Melanesian shamanism deal primarily with aspects of the shaman's role and performance and peripherally with the logic of diagnosis and divination (Wagner 1977; Shieffelin 1977; Herdt 1977). In his analysis of the relations between the sickness beliefs and the ceremonial exchange practices of some Wiru speakers and a group of Melpa speakers respectively, A. Strathern (1968) provides some information about ways in which each of these groups explains illness.

In addition, Barth examines certain aspects of Baktaman diagnosis in the context of a study of Baktaman ritual as a mode of communication (1975). The early literature on curing in Papua New Guinea tends to be primarily descriptive with little attempt to examine the logic of these practices. (Luzbetak 1957-8; Blackwood 1935; Stanhope 1968; Wedgewood 1934-5).

- (5) This figure includes three distinct episodes of nriqa viro suffered by one man, Lohu. His accounts of how he attempted to 'see' the causes of two of his illnesses are outlined in chapter 9, and the assochia diagnoses he received are briefly discussed in chapter 10. Lohu was the only person who suffered from more than one distinct episode of nriqa viro during fieldwork.
- (6) It has not been possible to include in this thesis the detailed material I collected regarding the evaluation of treatment for nriqa viro.
- (7) It may reasonably be assumed that most of the states construed as illness by Ommura people will involve disease as biomedically defined (cf. Kleinman 1980:74; Eisenberg 1977).

Notes to chapter 1

- (1) The ethnographic present used in the account that follows refers to Ommura as it was during fieldwork between June 1975 and August 1976.
- (2) Before national independence in September 1975 administrative units now designated 'provinces' were called 'districts' and those currently called 'districts' were known as 'sub-districts'.
- (3) On some maps Koronumbura is spelled Koronmbuara.
- (4) Johnson estimated that the number of pigs per person in Yonura in September 1975 was 0.40, a figure that does not distinguish between mature pigs and piglets. Johnson's calculations are based entirely on verbal information provided by Yonura men and he stresses that there is good reason to believe that people sometimes withheld information in order to avoid being placed under pressure to donate particular pigs to kinsmen (Johnson, S.R). Details of pig per capita ratios in various parts of the Highlands can be found in Modjeska (1982:73) and Boyd (1984). It should be stressed, however, that the figures provided by different authors are not always comparable.
- (5) Following Hogbin and Wedgewood (1953), the term 'parish' has been used by New Guinea ethnographers to refer to the largest local aggregate to form a distinct political entity.

- (6) De Lepervanche (1973:32-3) notes the existence of intra-parish marriage in some Eastern Highlands groups.
- (7) Feil's argument is for a general trend. He stresses that a strict dichotomy of Western versus Eastern Highlands societies cannot be maintained.
- (8) According to Watson (1983) the people who have traditionally called themselves 'Tairora' are the thousand or so inhabitants of what is sometimes known as the Tairora valley in the Southern Tairora region.
- (9) I did not find significant variations in origin myths as told by men, women and children. This reflects the fact that in contrast to the 'secret' (uakyera) myths told only at particular stages of initiations those about the origins of the Ommura people are frequently related in public. I heard this particular myth narrated on several occasions as groups of villagers sat around a fire entertaining each other on a rainy day.
- (10) Quaokiera = 'one okiera' or 'the same okiera'. The term okiera may be used in a number of related ways, for example, to refer to the trunk of a tree, the source of a river, the stem of a plant, the beginning of a story or the cause of an illness. Apparently irrational behaviour may be described as 'hia okiera', 'without okiera'.
- (11) These were all residents of the Samura hamlet of Yonura.
- (12) Glasse notes, for example, that describing Fore 'corporate groups as "clans", "subclans" and "lineages" suggests a greater concern with formal principles than people manifest in their speech and behaviour'. However he used this terminology 'for want of a better set of terms' (1969:20).
- (13) These groupings are described in chapter 2.
- (14) The constituent lineages of a Northern Tairora 'sib' may be represented as being linked on the basis of common provenance in the mythical past (as with the quaokiera) or through shared provenance in the remembered historical past. Watson provides detailed analyses of the ways in which sibs may be formed from previously unrelated groups who have migrated from the same village and are now co-resident in another locality (1979; 1983). Similarly Westermarck notes how among Agarabi immigrants to a new settlement, although members of different clans, gradually took on a single identity based on their former local group identity (1981).
- (15) There are also of course more general parallels between the association of each quaokiera with a particular territory and the 'creation place' notions described for some other Highlanders. For instance the Fore of the Eastern Highlands are represented in their origin myths as having originated in the lowlands to the south of the territory they currently occupy (Lindenbaum 1979:85).
- (16) In Sonura hamlet, Yonura, I noted five existing marriages in which both partners claimed that their fathers had been members of the same quaokiera.

The possibility of marriage between spouses known to be of the same quaokiera is reduced not only by the number of people who 'do not know' about their quaokiera affiliation but also by the prohibition against marriage with children of one's father's siblings and by the fact that, due to inter-village hostilities, Yonura men marrying outside the village prefer to take their spouses from outside the Ommura area.

- (17) Some men also call out the names of 'their' mountains to enhance the effectiveness of personal magical techniques. Those who told me of such techniques asked me to keep them secret.
- (18) There are apparent parallels among other Eastern Highlands peoples where the local group is represented as being composed of members of a number of unrelated 'clans', 'lineage clusters' etc. Among Agarabi for instance 'clan' membership appears to have little bearing on men's house affiliation (Westermarck 1981:90. See also Mandeville 1979a: 108).
- (19) This dating is based on statements that the first steel implements were obtained from Waffa shortly before the birth of Yonura people whom I estimated as being in their mid-forties.
- (20) As my information about warfare is from Ommura people I do not know whether or not any of these villages was involved in fighting with groups outside this sphere.
- (21) In parts of the Northern Tairora region smallholder cattle projects are important cash earning activities (Grossman 1984). Pineapples are a recently introduced crop grown by Northern but rarely Southern Tairora.
- (22) Before 1975 Australian currency was used in Papua New Guinea.
- (23) During fieldwork a village court system was being established in the administrative area in accordance with the introduction of a national village court system in 1975 which invested judicial authority in villagers elected by other villagers.
- (24) In 1975 Papua New Guinea established its own currency, the Kina. One Kina equals 100 toea. At this time the Kina and the Australian dollar were approximately equivalent. At the end of 1975 the value of the Kina was approximately K1.43 to one pound sterling.
- (25) However in the Northern Tairora case 'The suggestion of a foreign origin may...be vigorously denied with no more than a few generations involved in transition. Because of rapid assimilation immigration will probably often escape current investigation' (Watson 1973:113).
- (26) It has been suggested that the acquisition of land may be an underlying cause of New Guinea warfare even where the people themselves deny that they fight over land (Rappaport 1968:114. See also Meggitt 1977:14; Cook, S. and Cook, E. 1979; Koch 1979).
- (27) However in his discussion of war among Northern Tairora Watson shows how land vacated by a defeated group may be taken over by others in the long term although in the shorter term it is generally left vacant. (1983:208-9. See also Brown, P. 1978:206).

- (28) Berndt (1962:159f) describes a parallel situation for elsewhere in the Eastern Highlands.
- (29) Women sometimes used sticks to fight with each other and to beat the corpses of the fallen members of the enemy.
- (30) This kind of situation may be common in Highlands war alliances (e.g. Rappaport 1968:117; Robbins 1982; Meggitt 1977; Strathern, A. 1971:64n).
- (31) None of the men to whom I spoke recalled any instance in which agnates (members of the same quanranre) had found themselves on opposite sides in battle. Presumably if this had occurred they would have spared each other.
- (32) There is no general term covering the various types of sorcery recognised by Ommura although any of them may be referred to as posina from the Melanesian Pidgin for 'poison'. There is a rapid turnover in sorcery techniques.
- (33) In fact many Highlanders now claim that sorcery of the 'assault' or 'sanguuma' type is practised in their areas (Lindenbaum 1981, 1979; Westermarck 1981; Zelenietz 1981). Northern Tairora speakers reported instances of 'sanguuma' in their area in the 1960s (Watson 1983: 295).

Notes to chapter 2:

- (1) The government census figures and my own are not strictly comparable. The government census of early 1975 records the total population of Yonura as 437. The difference between this figure and my own calculations appears to reflect the fact that the government census includes as residents of Yonura five men and two of their wives whom I did not record as members of the village because they had been absent for at least five years, had no gardens or residences in Yonura and had not visited the village during their absence. Two births and one death occurred between the time of the government census and my own.
- (2) However Watson's finely detailed analysis of changes in the composition and boundaries of Northern Tairora groups suggests that in the pre-contact era too discrete hamlets sometimes drew together for defence purposes or for easy access to bushland when this was in short supply (1983).
- (3) While I refer to kapa as menstrual houses women also give birth in them and sleep in them during the post partum period. I have avoided the term 'women's house' as this is often used by New Guinea ethnographers to refer to residences occupied only by women and children.
- (4) The Sambia are another Eastern Highlands group where married men normally slept with their wives in the pre-contact era (Herdt 1981:29). Sambia family dwellings are divided into 'male' and 'female' zones in much the same way as are Ommura ones (Herdt 1981:76).

- (5) Just under 80% of men resident in Yonura in 1975 were the sons of men whom I judged to be or have been members of Yonura village on the grounds that they had lived there for most of their lives and held full gardening rights even though they were not always natal members.
- (6) In my experience Ommura people do not represent male initiation lore as varying from village to village.
- (7) This particular idiom does not distinguish between male and female residents. The term namu refers only to residential houses and not men's houses which are always referred to as vainya.
- (8) Ommura men do not have male cult objects which they store in men's houses. The flutes and other paraphernalia used specifically in male initiations are newly made for each ceremony and then discarded.
- (9) Some idea of the extent of movement between the hamlets of a village can be gained from the fact that just under one fifth of the married men resident in the Samura hamlet of Yonura in 1975 had resided in one of the village's other hamlets for a substantial period of their adult life.
- (10) An emphasis on minimising the significance of sub groupings within the local group has been described for a number of Eastern Highlands groups (cf. Langness 1973a:315n). In Eastern Highlands villages composed of members of discrete 'clans' or 'sibs' fellow clansmen are sometimes discouraged from co-residing in the interests of village unity (Watson 1983:208; Westermarck 1981:90).
- (11) Different New Guinea Highlands groups use the 'one blood' idiom to refer to different kinds of kinship link. Among some groups it is used in different contexts to refer to different kinds of ties (e.g. de Lepervanche 1973:49-50; O'Brien and Cook 1980; Strathern, A. 1972).
- (12) As elsewhere in the New Guinea Highlands the image of blood is polysemic and is used in different kinds of context to represent different kinds of relationship (e.g. de Lepervanche 1973:47-51; Strathern, A. 1972:14-15; Strathern, A. and M. 1969:14). As later chapters show blood and women are symbolically linked in certain contexts.
- (13) While Ommura girls only undergo one initiation ceremony boys undergo two, umara and ievati.
- (14) As in some other parts of the Eastern Highlands boys also symbolically ingest the semen of older men during initiation ceremonies (e.g. Herdt 1981:232-239; Godelier 1982:14). However in this context the semen is used to represent masculinity as opposed to femininity rather than to distinguish between different kin groups (cf. Watson 1983:257-259).
- (15) See Salisbury (1964:170) for another example of an Eastern Highlands group who represent 'post natal' influences as well as birth as being crucial for the formation of ties of common substance, in this case the relationships between members of Siane clans.

Notes to chapter 3:

- (1) Elsewhere in the Highlands the range of prohibited marriage partners is similarly narrow (cf. Herdt 1981:39-44).
- (2) Of a total of ninety four married couples in Yonura in 1975 there were sixty seven cases in which both partners were known in the village as having been established (not necessarily natal) village members at the time of the marriage as against twenty one in which the husband but not the wife had been an established member. A further six couples had married prior to moving to Yonura from other villages. These figures treat as a separate marriage the relationship between a polygynist and each of his wives. Widowers, widows, and divorced men and women are not included in this formulation.
- (3) Wanitabe parish had a population of 351 in the early 1960s (Lindenbaum 1979:40).
- (4) The population of Batainabura at the time of Watson's study in the mid 1960s was 187 (Watson 1983:89).
- (5) It should be stressed, as regards the earlier period, there is some uncertainty about the village of residence at the time of marriage. Moreover my dating of marriages is based on necessarily rough estimates of the husband's age at the time of fieldwork. It also assumes that most men married around the age of twenty.
- (6) Unmarried girls wear short front and rear coverings (called vunyara and viora respectively) in such a way that their upper thighs are left bare. The married women's skirts (hiara) are longer and fuller and cover the upper thighs.
- (7) Someone who has been married before does not attend eta nrañre for his or her second marriage.
- (8) If a married women is involved in an adulterous affair her lover must pay compensation to her husband although she may well be blamed for having initiated the affair. A woman is not normally entitled to compensation for her husband's adultery.
- (9) K10 was added to the bridewealth during the ceremony. Hence the difference between amounts cited for the cash components here and in Table 3.
- (10) A polygynist and his wives tend to reside in a number of separate houses within the same fence.
- (11) After marriage a woman may continue to harvest vegetables that she has planted in her parents' gardens. However she is expected to cook these for her husband.
- (12) Shell valuables were previously an important component of Ommura bridewealth and other prestations but are no longer used for such purposes. In certain contexts cash is classed as kioa.
- (13) Yonura people say that the amount of bridewealth is not affected by whether the bride and groom are from the same or different villages.

My information on marriage transactions between about 1965 and 1976 would seem to confirm this. However there is some uncertainty partly due to the fact that all the marriages contracted in Yonura during fieldwork were between co-villagers and occurred at a time when the rise in income from coffee had led to an increase throughout the area in the amount of cash included in bridewealth prestations. Some indication of the extent to which the size of bridewealth prestations has increased is provided by the fact that the average amount of cash included in six such prestations made during 1965 and 1966 (bride's first marriage) was \$A38. The number of pigs has remained fairly constant over the last decade. I learned of no case in which more than one large pig (live or killed) or two small ones were included.

- (14) However, as will be seen, the tasks performed at a child's initiation by his or her mother's brother may be represented as, in part, a return for the affinal prestations made by the child's father's quanranre to his or her mother's kin.
- (15) Where the groom has no natal or adoptive kin in his village of residence, usually because he is a relative newcomer, the transfer of bridewealth may be treated as a transaction between him as an individual and the bride's kin.
- (16) At male initiation pigs are slaughtered both for the prestation to the mother's brother and for a subsequent distribution of meat to villagers in return for their 'help' with the preparation and staging of the ceremony. The pigs for this distribution are typically provided by several members of the novice's quanranre.
- (17) In both male and female initiation ceremonies men play an important role in instructing the novices.
- (18) While male initiation ceremonies are performed for several boys at a time girls are normally initiated singly.
- (19) Ommura distinguish four types of ground-dwelling marsupial: vatota, ortachia, irochia and maunamu. Both ground-dwelling and tree-dwelling marsupials are associated in certain contexts with children.
- (20) Men and women practise nose bleeding to enhance a sense of well-being by eliminating 'stale' (tapitaira) blood from the body, rather than specifically as a treatment for swelling in the nose caused by blood accumulating there.
- (21) It may be noted that Ommura place less emphasis than other Highlanders seem to do on rules against eating one's own pigs (cf. Rubel and Rosman 1978). When I asked men whether they avoided consuming pigs from their own households many replied that this was a restriction practised by neighbouring peoples and which they saw no reason to adopt.

Notes to chapter 4:

- (1) Another, less common, explanation sometimes given for the rule against women climbing trees is that they might offend passers by exposing their vaginas to them.
- (2) This figure includes couples with only a pig or piglets.
- (3) In Melanesia a tendency to plant cash crops near settlements has commonly led to an increase in the distance between residential zones and food gardens (e.g. Grossman 1984:234). While I neglected to enquire about this it is possible that the introduction of coffee as a cash crop further increased any tendency among Ommura people to locate subsistence gardens further away from the village. However Ommura have so far devoted relatively little space to coffee trees in comparison with many other Highlanders.
- (4) Grossman relates the reduction of time spent on subsistence activities during the coffee flush in the Northern Tairora village of Kapanara partly to the fact that the influx of cash from coffee sales enabled village men and women to spend a significant amount of time being drunk, drinking and gambling (1984:207-18). Yonura people had relatively little opportunity to purchase beer and had not taken to gambling with cards in a big way.
- (5) Occasionally a man with rights of 'trusteeship' over a plot of land may be referred to as its 'father' (mata ova).

Strictly speaking, of course, the notion of 'property' may be misleading when applied to certain cultural contexts, insofar as it implies features that are characteristic of specifically western notions of property (Hirschon 1984:2-3; Strathern, M. 1984).
- (6) It is my impression that while men can claim superior rights to women as regards the exchange of pigs, consumption of pork by men and women is approximately equal both subjectively and objectively (cf. Modjeska 1982:85).
- (7) Male initiation ceremonies involve the distribution of pork to village members in return for their 'help' as well as ritual prestations of pork to the novices' maternal kin.
- (8) As will be seen in chapter 6 there are various types of situation in which wives regularly challenge their husbands' claims to superior rights over the allocation of pigs.
- (9) I know of no terms in the Ommura language that correspond closely to English notions of 'bravery' or 'courage'. When referring to the ability to face threatening situations without showing 'fear' (atu hiro) or fleeing, Ommura people use the term kyapukya.

Notes to chapter 5:

- (1) I should note that those who spoke Melanesian Pidgin regarded the term 'sik' as applicable to each of these categories of disorder. Ati nriqa, or trivial illness, was distinguished from the others as being 'only small sickness' (liklik sik tasol).
- (2) Ommura, like certain other New Guinea people (Read 1967:213; Herdt 1981:123; Cook 1969:101) place considerable easthetic and symbolic significance on the nose. It is a focal point for several cosmetic procedures and initiation ceremonies, and descriptions of facial appearance tend to focus on the nose rather than eyes or mouth. There is a wide vocabulary for different shapes, conditions and 'expressions' of the nose.
- (3) It seems that elsewhere in New Guinea too some of the most elaborated ideas about bodily processes in relation to illness focus on blood flow. Lewis notes, for example in his discussion of Gnau conceptions of the 'processes of harm in illness', that 'in those views which come closest to pathology blood, is the disordered element' (1975:202). See also Panoff's account of Maenge conceptions of illness (1970:473).
- (4) Glick (1967) reports a similar range of blood letting practices for the Gimi of the Eastern Highlands.
- (5) It will be recalled that in other contexts Ommura people stress that children are born with some blood from both their fathers' quanranre and from their mothers' quanranre of origin.
It is probably worth reiterating here that in Ommura, as elsewhere in New Guinea, the image of blood is polysemic.
- (6) On the basis of his comparative analysis of several 'elementary systems of medicine' Fabrega notes that in such systems generally 'a physically elaborated schema about the body functions does not appear to be part of the rationale of treatment' (1979:171). Similarly, Young suggests that absence of elaborated conceptions concerning the body as a relatively independent system may be a characteristic feature of health related beliefs in 'structurally simple kinship based societies'. In such contexts the experience of sickness may be 'so thoroughly externalised that the body is reduced to an uninformative "black box" and people's attention is concentrated on the social and symbolic conditions of sickness' (Young 1982:259).
- (7) While these aspects or states do not have external bodily manifestations, they are not conceived of as independent of the body but as 'inside' it.
- (8) For example: Nte mmia nruua tira ienama = 'I can hear this noise'. Mmia haikya qioma iena = 'I understand this matter well'. Similarly, knowledge and memories are 'stored' 'in the ear' e.g. I nrato teraea rima mia = 'If you know about this tell them', literally, 'If this is in your ear tell them'.
- (9) There are parallels here with the way in which Gnau treat illnesses that they regard as relatively serious. While they have a few herbal simples for use in treating disorders they judge to be trivial, in serious illness they do not use any medicaments except nettles outside the context of healing rituals (Lewis 1975:144).

- (10) To the best of my knowledge there is no special class of male sexual or reproductive disorders.
- (11) It is interesting in this context that, during his research among the Gnau of the West Sepik, Lewis noted several cases of severe breast abscesses in women whose children had died while their mothers were still lactating and which appeared to him 'sufficiently abnormal for me to expect from them some particular explanation, which I did not obtain... They did not suggest 't was caused by something'. Lewis 'would regard this as an example of a distressing ailment accepted as a natural event' (1975:198). Could it be that these abscesses fall into a category of women's illnesses which, like those noted here for Ommura, are diagnosed by women in secret from men?

Notes to chapter 6:

- (1) Ommura, like some other Highlanders, represent smells as having considerable positive and negative powers under certain conditions (cf. Meigs 1978:305, 317n). This is manifest, for instance, in the use of aromatic leaves in the vuha healing ceremony (chapter 11).
- (2) If a wife is menstruating she should not even give her husband food that she has handled on the end of a stick.
- (3) A similar attitude appears to exist among the Northern Tairora of Kapanara village (Grossman 1984:161).
- (4) I have noted how a person's feelings or emotions may be described as remaining inside his or her belly so that they are 'invisible' or hidden from others. In other contexts representing an experience as remaining inside the belly indicates that it is also considered to be partially or wholly 'invisible' to the person in whose belly it is 'hidden'.

Notes to chapter 9:

- (1) While personal 'seeing' may be taken as indicating whether or not the patient has been ensorcelled it is generally acknowledged that it cannot reveal the identity of the individual or group responsible for the sorcery. This is something that is supposed to be determined collectively by men of the victim's village. None of those who attributed their own disorders to sorcery claimed to have 'seen' who was responsible for the harm.
- (2) A similar principle apparently underlies certain therapeutic practices of the Daribi of the Chimbu district of Papua New Guinea. Wagner was told:

Now that the sogoyezibidi [type of Daribi healer] has seen the cause of this sickness, the sickness will go away, because the ghosts wanted to keep it secret. Now they have been found out, they cannot do it any more (Wagner 1967:49-50).

Notes to chapter 10:

- (1) This bark has been identified by the department of pharmacography, Kew Gardens, London, as probably from galgulinima belgraveana, a large tree found in New Guinea, the Moluccas and the rain forest areas of North Queensland. Hayano (1975) notes that according to Hamilton (1960) chemical analysis of the bark has indicated that alkaloids are present which may cause fluctuating moods and possibly hallucinations. However, the matter is not settled.
- (2) Those writers who have examined the significance of ritual blood letting among Southern Tairora speakers have concluded that there is no evidence to suggest that these groups view such practices in any sense as an imitation of menstruation (Hays, T. and P. 1982; Johnson 1980).

Notes to conclusion:

- (1) It is worth reiterating that while the most elaborate Ommura 'medical' concepts relate to the aetiology of nriqa viro this does not mean that Ommura people see most disorders as being 'psychosocially' or mystically caused. Ati nriqa is probably the most frequently occurring type of ailment, and is tacitly understood as being physically caused. However, there are not elaborate notions about the causes of ati nriqa and in most cases it is considered not to require explanation.
- (2) At the same time it is necessary to bear in mind the well attested nebulousness with which English speakers characteristically use words denoting emotions (Schachter and Singer 1982; Totman 1979:38).
- (3) However sorcery or witchcraft from within the community has been reported for several New Guinea groups (Epstein 1974:18; Brown 1978:64).

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