KEYNOTE ADDRESS

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"Wounds of war, wounds of displacement: towards a medical anthropology of camp and asylum"

Wednesday, July 5th, 2017, 18:15, Aud. Orlando Ribeiro (IGOT-ULisboa)
It is, as ever, an honour to be invited to give a keynote address, and especially an invitation to a dinosaur such as me. For it is exactly 50 years since I switched from History to re-start in the then new subject of Medical Anthropology: I was in northern Nigeria at the time, and the Biafran war had begun, and I had close, passionately Biafran friends. A new university teaching hospital was being started in northern Nigeria, and I knew full well that none of its staff actually knew what was going through the minds of their patients. So I turned to Anthropology with the intention of creating a Hausa medical dictionary, based upon what people – mainly women and children – actually said amongst themselves when one of them fell ill. From all this, I could make sense of their ideas about anatomy, about physiology – and show how very different were the bodily systems they were living in compared to those described in school textbooks. [With this conference being on *bodies in transition*, I look forward to hearing accounts of how other bodies have been differently construed, and how these constructions have changed over time – or not.]

Such an approach meant for me NOT doing interviews or surveys but living in a single large, rather remote non-English-speaking farmstead for two years, as a GUEST. It is to that same farmstead that I have been going every year for over 40 years – most recently, I spent part of last month (June) there, during Ramadan. As ever, I learn more and more about how very worrying, even controversial my presence was in the farmstead. For some, I was not only a risk but a kind of demon.

Yet as a demon I was given access to the minutiae of domestic life; I could see how Hausa housewives would whisper apologies to any spirits who might be affected by sweeping the courtyard or by filling a bowl with hot water; how they'd brush a bed before lying down on it. I was there, too, when a baby girl was having done what NGOs call FGM: almost no researchers actually see with their own eyes what exactly is being cut (I examined – and passed! – 3 PhDs where the student had not seen it done) – in fact, what was done was nicking the hypertrophied hymeneal tags – NOT the clitoris – and it was aimed at ensuring the vulva remained open (NOT closed, as
elsewhere). The uvula was similarly nicked to ensure the throat was not closed. Or, in a rather different case, a woman of the farmstead told me she had just been beaten (buga). Worried, I asked her, how exactly were you hurt? She showed me how a finger had been lightly struck against her nose; on another occasion, how a finger had pushed against her forehead. No bruises, no lash-marks. Simply to be touched on the face was transgression enough. It was meant angrily, so it was experienced as anger. It ‘hurt’.

In short, we need, obviously, to WITNESS, if possible, what happens, and not just rely on what we are told. But I am suggesting that we know, as anthropologists, remarkably little about the actual details of the religious lives of women and their children, about the boundaries and sites of risk and which wife is sometimes braver than others. Conversion to Islam has made the variability much wider: some women are strict salafis, some more sufi – some, despite their menfolk, prefer old-style religion and practise it almost invisibly. So too their daughters! [Indeed one old friend who did the hajj, actually regretted explicitly (under the influence of his senior wife) having converted to Islam – and this when he was close to death.] Much remains to be done: it IS do-able.

I regret how few postgraduates from abroad can now spend such long periods of time within a household, seeing and hearing what was going on and being immediately corrected when the point of something has been missed. And the correcting of me still goes on: as their refrain goes – “after more than 40 years you STILL don't know that!” [But the farmstead has changed hugely, from 60 children ca. 1970 to nearly 500 this year; early deaths of children have dropped from 50% to almost zero – I go, each visit, to the graveyard to count.] Yet the style of my initial fieldwork is still possible – and very cheap...

While to my Hausa hosts, my behaviour for a white man was a bit bizarre, even in London my medical anthropology was somewhat controversial. Mary Douglas and Maurice Bloch thought it was not a proper subject – for them the whole experience of sickness was covered by the anthropology of religion; purity was best investigated theoretically. But Mary had never once spent a night in an African household. Only Daryll Forde was welcoming – as was his wont. He had
worked with WHR Rivers in his younger days – he even appointed a young Nigerian to a post in Anthropology in his Dept. in 1952, when colonialism was still in fashion.

But it was the Biafran war and its effects that dominated my early years in Medical Anthropology: why was it that some war-torn villages recovered fast, and some did not, and perhaps still haven't? And then there was the Rwandan genocide. When we had an international conference in Windhoek in September 1991 on “Healing the social wounds of war”, many came hoping for answers, but no one had any. My three senior Biafran friends said, simply, that their wounds were far from healed: their scars still itched badly. Their anger was self-evident.

And it is on this anger, on its very unhealability, that I want to focus. For much of the terrorism we have seen recently in London and Paris seems to have grown from roots in the fertile soil of anger, anger at injustices felt deeply despite an everyday upbringing within France or Britain. It is anger, not grief, that is felt as losses occur; pain is expressed in fury (like when as a child I would furiously kick my bike when I fell off it, even if it made my foot hurt still more).

I am very interested in how Hausa and their neighbours express and cope with anger. Some simply turn their head away from whoever is speaking to them. But women in particular take to being totally silent. Indeed it is taken as a sign of depression if someone falls silent; if a death occurs, no one screams – it is silence that signals that disaster, so much so that I'd be woken from sleep by the dramatic silence of a death. Conversely, a babbler (surrutu) is considered just madly manic.

So the local therapeutic question is how to get the silent, the depressed, to speak. And by speaking they'd find relief from their pent-up anger. The answer, at least for the world I have been living in, was to enable the woman to get 'possessed' by one or more spirits or the soul (kurwa) of a long-dead relative. Once that persona was taken on, the ill woman could be coaxed into revealing why she was so angry. She might speak at length as a protective spirit or a soul. It was fascinating to watch this private healing process at work – it wasn't the public performance, the ‘play’ (wasa), that so many visitors to northern Nigeria (and elsewhere) have recorded as bori. It's nowhere like my old Professor, Ioan Lewis’s “war between the sexes”. Indeed, so private was it that the men and
women doing the therapy would wait till every visitor had left the house. I was lucky to be always there as part of the house (or so I liked to think!). That kind of therapeutic spirit possession (bori) has now been superseded by a more Islamic version, ruqiyya – as the need for an effective treatment of silent anger remains.

Such silent anger is often hard to recognise. I suggest, amidst the many displaced people today, there are not only young people fiercely angered by what has happened to them and their families, but also older people who are helping the silently angry – such helpers may be professional (if scarcely recognised) healers or simply elderly men and women with an understanding of how to cope with a stubbornly silent, deeply angry child or adolescent. If we can, we ought to recognise the procedures at work and perhaps give help if, and it’s a big if, our intrusion won’t make matters worse, as it does so often. In Borno and Adamawa, there are many, hugely over-crowded camps where the displaced try to cope, but I speak neither Kanuri nor Fulfulde, nor any of the many minority languages that victims of Boko haram’s insurgency speak among themselves when talking about really serious things.

One point that still needs to be made is that the displaced may well NOT want to return to their old villages or their old homes, but to start afresh. They may well want their land, their fields back, but sometimes not even that. After a disaster or important deaths, people have told me, the land is polluted: so you move, perhaps not very far, and re-build on a good, clean site. Such a move takes time and forethought, but in the past major rulers have regularly evacuated their cities without a fight if the old milieu has turned seriously, irredeemably sour. Boko haram has probably polluted in this way whole swathes of north-eastern Nigeria. The land needs to be cleaned, re-sanctified, made auspicious once more – a process that, even so long after the Biafran war, still needs doing, I am told, in some places there. Who can do such cleansings effectively is not always clear but it needs to be done by those who can be trusted, who ‘know’ – in short not the government or some NGO or even a church.
One final point: there are many stories circulating just now about the ways Boko haram’s operatives put spells on the men, women and children who put on the suicide belts and blow up themselves and others. Apparently there’s a special book whose very touch can spellbind, or special aerosols or even injections: but all the different spells wear off completely after three days. Perhaps that explains why a conference like this one lasts only three days – by the end, the conference spell has lost its power. I apologise to the organisers who invited me if they had hoped a keynote address such as this would serve as such a spell. My powers as a spell-binder have long past – if indeed I ever had them. My former students who are here, know, alas, the truth. Thank you.