This work is the result of a long period of reflection, discussion and further reading, following a nine-month period of fieldwork in Timor-Leste in 2004. While ostensibly the study’s aims were in keeping with that of conventional and cultural psychiatric epidemiology, in the wake of the countries recently won Independence in 1999 and prior history of colonial violence, we quickly came up against powerful and palpable cultural realities, through which the East Timorese articulated their present and past daily life experience, and which posed a challenge to Western psychiatric epistemology and ontology. For example, in relation to the countries fight for Independence, many people, including in our local team, invoked ideas of magic, as contributing to the resilience of the country’s freedom fighters: tree bark tunnelled under the skin was said to render the skin impervious to the bullets of the enemy. We also heard how four sacredly held crocodiles—symbolic creatures of the islands’ geographical contours and recounted in creation myths—crawled out of the sea onto a beach in the capital Dili, on the eve of the UN Independence vote, bringing confidence and portending to the people a successful outcome. More closely related to our own work, people spoke of the powerful unseen forces: water and land spirits (Tetum: bai nain and rai nain), ancestral powers, and sacred houses (Tetum: uma lulik) and objects—linked to manifestations of both physical and mental illness. People we spoke with regularly invoked the name of Maromak, the Tetum word for God, with tangible feelings of belief, forgiveness and hope, despite the country’s troubled history.

Laderman (1994) writes of the anthropologist’s embodiment of cultural symbols, and indeed, our experience was that these unseen but felt and spoken realities were compelling, and over a relatively short period of time began, in some way, to feel palpable to those of us out in the field. We were aware that the original terms of reference of our work, based in Western psychiatric nosology, were at odds with the ways of understanding of local people both in relation to trauma and mental illness. While not wishing to downplay the value of previous more epidemiological-based publications from this work, we felt compelled to tell a contrasting (but hopefully complimentary) story about the social and cultural shaping and containing of distress, in particular of trauma-related dissociation and psychosis, in Timor-Leste.
However in moving from the supernatural world of Timor-Leste to the secular understanding of anthropology and Western psychiatry–psychology contained herein, we inevitably commit some level of “interpretive violence” (Bibeau and Corin 1995) in reflecting on the nature of such experiences. Prior work and our own study suggests that East Timorese people do dialogue and move between different registers of explanation, according to need and context, and that traditional beliefs and practice can be necessarily resistant to change where serving a useful function. Nonetheless, it was also clear that mental illness and/or distress was a salient concern within Timor-Leste and a problem not wholly solved by local responses, the analysis of which is further complicated by forces of acculturation and socioeconomic change, beyond that of the recent introduction of certain Western mental health concepts. Nonetheless, our aim is not to influence the beliefs and practices of the people of Timor-Leste, but rather we would anticipate our primary audience to be that of Western-trained clinicians and researchers with whom we hope to be able to further contribute to an understanding of cultural patterned distress and disorder, respect for clinical complexity and the psychological “work of culture”.

We hope the work will be of value to specialists and students, in both research and clinical work, across the range of disciplines from which we have drawn, including transcultural and critical psychiatry/psychology/psychotherapy, medical anthropology and sociology, critical and cultural neuroscience, psychiatric epidemiology and epistemology, international public health (including the global mental health movement), and psychoanalytic and cultural studies.

In preparing the manuscript, we are especially grateful for the inspiration and tolerance of our families and friends, the support and flexibility of the Springer Editorial Team, and the local project workforce, in particular the team manager and assistant manager, who provided cultural consultancy to the project, helped negotiate access with participating communities, and oversaw the data collection process. Cultural consultancy was further supported by the three local interpreters who assisted our study, alongside a separate interview with a traditional healer, and extensive discussion with an East Timorese mental health worker with an additional background in philosophy. Not least we are also indebted to the communities and community leaders of Timor-Leste, who courageously told us their histories of both resilience and distress, and whose accounts inspired the writing of this book. While written in a very different cultural key, we hope that we have done justice to both their courage and their experience.

**Note on Identity of Persons Described in Case Material**

In order to preserve the anonymity of persons described in case material, names, specific location, narrow ethnolinguistic grouping and other sensitive identifying features have been changed or withheld. We hope that we have achieved this with minimal compromise to more essential material necessary for our analysis.
References


Between Trauma and the Sacred
The Cultural Shaping of Remitting-Relapsing Psychosis in Post-Conflict Timor-Leste
Rodger, J.; Durney-Steel, J.
2016, XXIII, 188 p. 3 illus., 2 illus. in color., Hardcover
ISBN: 978-3-319-24422-8