

Comparative Illness Narratives: Bali, Indonesia and the Iron Range, Minnesota

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Abstract

This study utilized semi-structured interviews to uncover illness narratives of 15 individuals from the island of Bali and the Iron Range Region of Minnesota. Intra and interregional themes and comparisons were extrapolated with the goal of bridging cultural understanding of medicine. Emphasis is given on whether discourse is associated with internal or external factors, as well as any deviance from the traditional discourse of the region. Deviating from traditional illness views is stark among the Balinese where the younger the subject the less tradition plays in their narrative.

Introduction

When we speak of illness, we do more than just express a discomfort. We paint a picture of our lives and our society. Do we describe our maladies in terms of science, in metaphors, as a person outside of ourselves? What is this style of painting? How did we learn to speak in such a manner? Who is allowed in our world to define illness and disease? We construct our world of sickness or health (another aspect) creatively, and the implications are powerful. In this project, illness narratives were collected from two very different regions (the Island of Bali and the Iron Range of Minnesota) to find potential commonalities and trends in narratives both within the individual region and between these two very different locations.

An island of great tradition, Bali brings much of the past into the present. The island has been going through an economical transition from a primarily agrarian powerhouse to a reliance on tourism. There is a great struggle for identity as the demands of tourism cry out for a commoditized experience of “Bali” versus what is really Balinese.

Beyond the influence of tourism, there are strong influences of the west from the expat community and Non-Governmental Organizations (here on referred to NGO.) They bring a more accessible taste of the west to the Balinese. Corporate goods and fusion restaurants create a new path for many. This path means a change from the tradition, whether its food or religion or style of dress or much more. How an individual navigates the influences of the new and pressures of tradition to forge an identity of Balinese is an important question that reaches all faucets of society.

While the traditions of Bali are engaged in potential reforming of their identity, the Iron Range is also facing a similar identity reformation. The Iron Range region of Minnesota is, as the name implies, an iron mining region. The bulk of the people are “meat and potato” blue collar workers. People work, go home, enjoy the weekend, maybe go on one or two vacations in their lives, and retire. The standard life is cyclical and down to earth. A great importance is put upon the family and holding a steady job. A sense of community belongs in the bar, church, veterans groups, or unions. However, there is not a strong citywide sense of community.

Yet there is some change to the community identity. The Iron Range traditionally has been a fairly isolated community from the rest of the world. However, with rise of a global economy, the internet, and Essar Steel (a mining company based out of India), the people of the region are now encountering more and more of an external influence.

By examining these changes to identity, we allow ourselves not only to understand how people different from ourselves view illness, but also to understand our own views of illness. To fully understand an individual we need to understand the world and context in which they live. We also need to be able to explain to them the context in which we live. In terms of illness, this not only creates a cultural understanding, but also is needed to help one another in times of emergency and crises. A broken bone can be considered an illness or something that is treated by a doctor in one area of the world. In another location and culture the broken bone can be equated with a broken tool and a bonesetter is the proper person to fix it.

These differences and knowing these differences allows us to translate all issues related to the body so we can work in terms that make cultural sense to one another. What good is an

NGO¹ or emergency aid group in a time of crises if they cannot get aid to those in need due to simply a lack of understanding of the cultural context? There have been and still are areas where the people an NGO is trying to help are literally a few feet away, but this misunderstanding and communication prevents the service from arriving.

¹ Nongovernmental organizations (NGO) are nonprofit organizations that usually have a mission statement or purpose that seeks to improve an issue within a community, state, or region.

Literature Review

In the field of anthropology there are many definitions of what a narrative is. In this work the scope of the narrative, the illness narrative specifically, will utilize a modified definition established in Waitzkin and Magaña (1997). Whereas Waitzkin and Magaña looked at the narrative as the attempt to tell the tale of physical and mental symptoms in tandem with each other along with socio-cultural cues, in this research we included factors such as economic impact, political environment, and format of conversation.

Pierre Bourdieu's concepts of Habitus and Fields are paramount in this study. Habitus² is the set of dispositions developed over time that allow a person to perceive and relate to stimuli in the environment. These are malleable only over a long period of time as they are resilient stances. They lead into the concept of fields.

A field³ is a societal arena of play so to speak. It involves several key factors. These include having knowledge of the different roles, the rules of playing in these roles, having the means to enter the game, and having an interest or reason to play. A field can be a field within a field as well.

The rise of the metaphorical interpretation of the body as a machine and disease seen as an invader has its origin with the industrial revolution and the shift from primarily rural populations to urban centers. Osherson and AmaraSingham (1981) theorized that this rise in

² Consult Pierre Bourdieu, *Pascalian Meditations*, (Stanford, California: Stanford University Press, 1997), 128-163 for further reading on habitus.

³ Consult Pierre Bourdieu, *Sociology in Question - Some Properties in Fields*, (London: Sage Publications, 1993), 72-77 for further reading on the concept of fields.

the concept of medicine and the body in terms of machine helped to develop a dehumanized clinical environment.

In terms of the body there is a concept of being at war with it or disease, a separation that occurs most readily in the Western biomedical texts. These concepts rose out of the growth of capitalism. Waitzkin approaches this concept of man as the machine with the viewpoint that medicine is an institution that serves capitalism. Capitalism presumably needs a growing workforce to maintain market growth and medicine as an institution serves as the tool to keep birth rates high.

The location of interaction between healer and patient is inherently socially symbolic. In the west Joralemon (2010) illuminated that the prior works during the 1980's and early 1990's by Kleinman (1988), Taylor (1988), Waitzkin (1991), and Cassell (1991) pointed to the image of doctors and surgeons being granted an elevated status by right of location. The clinic serves as a field for medical habitus to play out. Highlighted as well with that is how miscommunications occur often because of an inability of some medical personal and patients to relate to each other and understand class specific codes.

Balians are the traditional spiritual healers of Balinese society. They come in many different forms, use a variety of methods, and have various specialties. Conversely, Leyaks are the Balinese equivalent of witches. Balians generally do not like to be addressed as a Balian because the word itself implies the use of all forms of magic and spirituality (good and bad).

They often feel this puts them in association with Leyaks. This is considered a harmful and potentially brings forward demons and other negative energy⁴.

Duality is a keystone piece of Balinese culture and exists within the views of medicine and illness. In the Calonarang, one of the most important Balinese religious stories, Barong , the creature of good, wins in the fight versus Rangda, the creature of evil, but does not kill Rangda. This is because the Balinese have a strong sense and desire for balance⁵. Numerology and the Mandala are two other important concepts in traditional Balinese Culture. The concept of the Mandala speaks to the way the world is arranged as well as how for proper living. Whereas numerology speaks to many things this includes the calendar system which dictates which days are auspicious for events such as planting a field or getting married⁶.

Elsewhere in the world traditional medicine has been used to establish and compete for cultural identity. Dr. Lawrence Cohen's "The Epistemological Carnival: Meditations on Disciplinary Intentionality and Ayurveda" outlines the issue of biomedical tourism and the commodification of the Ayurvedic⁷ tradition, and global embrace of it has led to a battle of sorts for the identity of what is Ayurveda. Further involved is that by extension this medical debate becomes a realm of contention to define the larger identity of what is the identity of India and its citizens. There two fights in this as well, the fight of Indians versus the outside

⁴ The term Leyak can also be used to describe any black or negative magic, among other things. Consult pages 135 through 145 of *Bali Sekala and Niskala: Essays on Religion, Ritual, and Art* for more information on the nuances of Balian and Leyaks.

⁵ Consult pages 315 through 317 of *Bali Sekala and Niskala: Essays on Religion, Ritual, and Art* for more information on duality in Balinese society and the full Calonarang story.

⁶ Consult pages 172 through 176 of *Bali Sekala and Niskala: Essays on Religion, Ritual, and Art* for more information on the calendar system. As for the relation to medicine, interviews with traditional practitioners of Balinese medicine prior to this research project have stated that there is always an intersection of mandala and numerology in terms of how many uses a plant has for medicine.

⁷ Ayurveda is the traditional healing modality of India.

cultures and Indians within their own culture and country to have authority to determine identity.

Drawing all of this together into theories of global health, Kleinman (2010) sums up four social theories for global health: unintended consequences of purposive action, social construction of reality, social suffering, and biopower. The theory of unintended consequences of purposive action states that all social actions have unintended consequences. The social construction of reality points to the concept that all things based in the real world are translated into “socially and culturally legitimated ideas, practices, and things.” Social suffering refers to the idea that illness and suffering can be caused by social constructions, both “socioeconomic and sociopolitical.” Finally the theory of biopower is in reference to the use of control over an individual’s body via policy to strengthen governmental authority.

The theory of ideology of inner reference, like biopower, relies on mechanisms that control a person. Metalinguistic labor is used to create a proper format for how one’s medical narrative should be formed. This format creates a proper “healthy” language which one must speak in to mark progress of wellness. In the case of court mandated 12-step programs, this discourse forces an individual to adhere to the healthy language in order to gauge recovery. One must refer to a self-inflicted action (drug-use in this case), admit they are an addict, then prescribe to a discourse speaking of no substance abuse. The format must be followed to be considered “legitimate” healing. Failing to adhere to the institution’s established discourse format causes consequences outside of one own health.

In the case of Carr (2006), the individuals must show improvement by adhering to the 12-step dialogue format or run the risk of actions such as social services removing children from a mother's home or imprisonment. She further details the effects metalinguistic labor utilizes wording mixed in with location to limit options. In the same facility group meetings are referred to as "safe zones" where individuals may be open and honest about their experiences. However, in the group of women studied it is common knowledge of mandatory reporting requirements force the ascribed "healthy" language to be used.

Methods and Hypothesis

Participants were found via social contacts and snowballing. Once found, they were given a consent form verifying their permission to be interviewed and whether or not it would be OK for them to be voice recorded. A series of questions were asked in no particular order in order to facilitate a conversation and encourage participants to tell their story.

Participants in this study were grouped into three categories: those who identify as ethnic Balinese, all the various others in Bali available for interview, and those who have been residents of the Iron Range region for at least five years. Due to the limited time of this project and resources of the researcher the parameters of the participants were open to all adults of the age of 18 or older. No focus on a specific gender or age was made.

With some interviews in Bali, translators were employed. The consent form was translated into Indonesian or Balinese as needed. Great emphasis was centered on making sure that the interviews were conducted by a sociology student, not a medical professional. Pseudonyms have been assigned to all interviewees to protect their identity and privacy.

Analyses of the interviews will focus to attention on the language used in order determine whether or not medicine in each region is utilized by an institution as a tool. The hypothesis constructed among the interviewees from the Iron Range was that medicine as an institutional control mechanism by capitalism is losing its hold, while the traditional social unit's use of medicine as a tool to maintain cultural identity among the Balinese is weakening. These

worked off the assumption that the each institution was using medicine as a tool and that the tool was used in the aforementioned ways.

Findings from the Island

A Royal Balian

Through my guide I was able to meet with an elderly Balian. This Balian is the only known practitioner of his form of healing on the island and is a member of a prominent royal family. He spoke very little English, so the entire interview was reliant on my translator. My translator had to explain some parts of this conversation to me after we returned to our hotel.

The Balian told his story of how he became a healer. He was working in Java and studying medicine for a number of years. At some point he kept having dreams about his home in Bali and having an intense feeling of needing to return. When he returned he underwent much spiritual meditation. The Balian states that in order to become one, you must study all forms of medical texts. If you are meant to be a Balian, you will get a calling from a higher being.

He made it very clear that he does not like being called a Balian in person as the term is broad. It can include leyaks or others who practice black magic as well as those who perform white magic and acts of healing. He said that it can also cause bad spirits for a Balian to go by the title in person. It is considered a sign of arrogance.

The Balian views that all disease is not illness but rather an imbalance of spirit. Karmic repentance, a curse or other black magic, or metaphysical maladies are what cause one to be

unwell. When he sees individuals he does not administer healing; rather a taksu⁸ works through his body.

As a Balian and as a member of a royal family, he described an inescapable duty to his family and community. Once you receive the calling to be a healer you must follow through with it and commit to your duties as a healer for the rest of your life. While he had handed off most of the royal duties to his brother, he still had community commitments to maintain in addition to his role as a healer. He had briefly talked about how there are severe spiritual consequences for neglecting the duties as a healer or using the skill for improper purposes.

Museum Curator and Dancer

While in transit between sites on the island, I had the fortunate luck to run into a contact of mine. Gundul is a middle-aged man who works as a historian, museum curator, artist, and accomplished dancer in Javanese style. Beyond that, Gundul is deeply connected to his community and spiritually devout. The interview took place en route while we were heading to a temple.

The bulk of this interview had centered on the story of when he was afflicted by black magic. He had felt an extreme amount of pain and a fever. Being a man of strong faith, he sought out the assistance of a Balian. The first Balian was unable to fix the problem, but had “chased” something all through Gundul’s body. He was told that the issue was spiritual in nature and would need to seek another Balian.

⁸ The term Taksu has a few different meanings. In this case it is in reference to a spirit that uses an individual as a vessel to take action.

Gundul heeded this advice. It was not until he saw the seventh Balian that full healing would take place. Gundul described a painful process over several weeks to clear the moving malady in his body:

“There were times where I felt he was beating me up. He would move from one end of my body to the next to chase it out of me. My joints felt like they were fire, and I could barely walk after a session. Sometimes I had to throw up. After going through so much of this, the Balian was able to clear this black magic from me.”

When asked what caused this illness, Gundul explained that he was a target of jealous people. He expressed that these people used a cursed charm most likely placed by a food cart. This food cart was outside Gundul’s home, and he ate there for breakfast every morning. He also described the various ways in which a person can be hit by black magic.

“I know it was a neighbor that envied my position... ability. I am very active in several temples and my community. They knew which cart I got my breakfast from every morning and put a charm under it. That is how they do it. They sneak their hexes around things you eat or drink and that’s how it gets in you. Otherwise, they can shoot you with a straw sending their magic into you from afar. They can conjure up some spirits up too that can follow you around. You have to be really careful around things like bridges and crossroads, some of the earth spirits really like those places. That is why a lot of drivers honk their horns going over those places.”

Further along, Gundul started to describe the importance of remaining connected spiritually and to the community. Spiritual devotion and adherence, he said, leads to stronger protection magic. Staying strongly committed to the community is needed to keep all relations strong in order to avoid wronging someone that may decide to practice black magic against you. Both connections are also needed to help prevent chaotic spirits from harming you.

“It is a constant responsibility. You are always a member of your community. You need to partake in helping out with community events, temple ceremonies, and respecting the spirits. You need to keep those ties to the temples strong. It is

dangerous to offend a spirit, and even more dangerous to offend someone that can do black magic. If you stop fulfilling your community obligations you are going to offend someone. Even worse people may start to gossip about you. This can get out of hand and then black magic starts to get thrown around. Charms and other things can be used help keep yourself safe. The strongest protection is fulfilling your obligations and having many friends in the community to help you.”

Gundul clarified that he does find that illness can be spiritual or physically cause by pathogens such as viruses and bacteria. He finds that western style medicine does have a place, but in limited situations. Health requires a mind-body-spirit connection.

Prince of Princes

Bli is a small framed middle aged man. He also is a Balinese prince. Like Gundul, Bli is a very spiritually devout individual and is also very active in his community. He has travelled through much of Southeast Asia and North America. Yet, he maintains a strong connection to a traditional life. Bli’s narrative focused on an experience that brought him near death.

He describes vividly the night that a black dragon entered his room. It swirled around for a bit then enter Bli’s abdomen. He fell ill soon after. Over the course of a year he and his family approached both western style doctors and Balians for aid. Bli also approached Balinese priests and community members for advice.

When he had approached the Balians one had given him a treatment. It had helped the problem for a short while, but the symptoms of the illness returned in a couple weeks. The rest of the Balians said that the cause of the illness was not something of black magic origin. When he heard this, his family, especially his wife, approached the western style doctors.

Doctors in Indonesia, Thailand, and Malaysia were all unable to find the root of the problem. When all was looking grim, the Mayo clinic reported back to the family. When they had looked over his chart and x-rays they had found an aneurysm in Bli's abdomen. With this knowledge the doctors were able to fix the damage.

When asked what he thought caused the aneurysm, Bli responded by talking about the various things people around him suggested he do to fix it. When this aspect of the conversation was revisited twice more, each time he responded the same way and changed the topic of discussion.

At one point in the interview the topic of what healed his aneurysm was rehashed. Bli stated the surgery that was performed. He would downplay it and partner it up with following through with suggestions from a priest about the plant arrangements in his house complex. Other things he had coupled with the surgery were his protective rings and charms.

One final note on Bli's responses, he does have a belief in western style medicine. Viruses and bacteria, physical ailments, etc. are very real and a part of his narrative about general health and wellness. Like Gundul, Bli believes there is a place and time when the spiritual or western approach is more appropriate.

Farmer Extraordinaire

Bagus is a man who wears many hats and is truly the Jack-of-All-Trades. He is by trade a traditional farmer from a much dryer part of the island. His usual routine is to spend half of his time at his home village tending to the farm and the other half of the time working in the cities.

His jobs include helping guide college groups, working as an assistant for a homeopathic doctor, serving as a Balinese translator, and many other roles when in the city. He is a versatile and traditional man approximately in his 30s⁹.

He believes heavily in the impact of balance among the spiritual, mental, and the physical. A strong focus of energy and being in tune with nature is needed to remain healthy. Bagus feels that while bacteria, viruses, and all the other aspects that are paramount to the conventional western perspective of medicine exist, it is when there is an imbalance in the three parts of humanity and nature that one becomes ill.

“We come from nature and we are a part of nature. People try to build over it... put huge buildings and pollute it. It pollutes the mind, then you lose the connection. McDonalds is not natural. We talk about Bali Belly, I say McD belly. That food is made from chemicals and people who eat it get sick. People also worry too much about the future, worry too much about money, worry, worry, worry. It weakens the mind and spirit and weakens the body. All this worry is unnatural and leads to sickness of every piece of man.”

Bagus feels that being close to nature includes having a diet that is minimally processed, keeping food as close as possible to its natural state. Along with being close with nature is using sustainable materials in buildings. According to Bagus, sustainability and a strong connection to nature is the foundation of a strong spiritual being. The other aspect the spiritual side of being a human deals with the importance of giving offerings and respecting the gods along with other spirits.

“You need to respect nature. That means going to the temples and behaving. You need to do prayers and feed your spirit. It also means keeping balance in nature as a sign of respect. Permaculture is something I work with and learned from

⁹ The Balinese calendar is 210 days long, as such a cultural difference is that some individuals, such as Bagus, do not know their age according to a 365 day calendar.

some Australian friends. It focuses on doing things the old way. That means sustainable methods that do not harm nature. It is almost spirit building spirit when you do things that way.”

In regards to the mental aspect of being human, Bagus says that a person who is strong mentally lives in the here and now. The person must practice and learn not to dwell in the past or future. A person must be patient, practice humility and humbleness, and must not make rash decisions.

The physical requires that mental and spiritual needs are being met first and foremost. Then one must follow through with a natural diet. Bagus stressed the importance of being mobile and using your body.

“So many people stay still like plants. They do not move. We are animals, right? Yes you can feed your soul and you can stop worrying to free your mind, but you need to exercise. The birds fly and the monkeys run around the forest during the day. We need to do the same or you will get sick too.”

When asked how he developed these beliefs towards medicine and health, Bagus said he was taught by the members in his village, members of his family, some of the individuals for whom he works, and his observations of tourists. Bagus notes some of this and the consequences of deviating in his statement:

“In my village tradition is important. We do not do anything so lavish as you see in other places, but they are important. Our traditions keep you grounded with nature and help lead you to a good just life. This makes you healthy, it is like a guide. I see many of the tourists, they are very heavy and lethargic or they drink too much and wake up sick. They fear Bali belly when they already have McD belly and do not even see it. I have seen many Balinese try to embrace this life and they lose their health, lose their community... They suffer from it. I like western music, especially Greenday, but you have to do things in balance and that’s what traditions teach.”

Royal Healer

Alit is a prince who went for a number of years to Australia. While in Australia he trained to become a homeopathic doctor. He runs his practice out of his family's house complex and serves a great variety of both Balinese and tourists. He takes a different approach to medicine. The homeopathic approach to medicine focuses on finding miasmas and treating an individual based on an entirely different approach. Something as subtle as a person's attraction to certain colors are used in the diagnosis and treatment of maladies in the homeopathic modality.

Alit is related to a Balian, but even though he is a person of medicine he is not outright considered a Balian. His views of illness and medicine are neither traditional Balinese nor Western in style. Although Alit takes his own path when it comes to medicine and illness, he still respects his traditional spiritual and community obligations. While interviewing Alit, he was returning from a temple event and prepping for the next event of the day. Half-way through the interview, his son returned from school, who was then immediately instructed to put on his pakian adat¹⁰.

As a homeopath Alit has his opinions and views on illness, but as a member of a royal family he also must give respect and some adherence to the old ways. To do so otherwise could bring upon some severe cultural ramifications. As a prince among one of the more influential royal families, he is a leader in the community simply by status.

¹⁰ Traditional temple clothing, for men it includes two different wraps of a fabric called a kain, a shirt, a sash worn around the hip, and a headband. For women it is a single layer wrap, sash, in some cases a girdle, and a shirt.

Yet even with all of this he forges his own path and walks the fine line with ease. He developed this dual identity between the traditional roles that are required of him in society and the exposure to the tourists via his family's hotel. His introduction to homeopathy was from a tourist friend of his when he was sick.

"I was sick once with a flu. I tried both traditional and western ways to treat it, but I just couldn't get better. A friend of mine from Australia suggested that I try a homeopathic remedy. It did not take long at all before I started to feel better. Later on in life I had gotten a degree in art and design, but switched over to homeopathy as something more directed towards an interest of mine. It became a passion and now I administer my talents to both my community and tourists. I have a belief in the traditional and the scientific viewpoints, but I just learned another way to describe something that I think all methods describe."

Bartenders

Wayan and Made¹¹ are two bartenders in their late teens. They live in a more impoverished section of the island in the northeast. Along with three others, they all live in the back of the bar and restaurant where they work. In contrast to the others interviewed, their entire lives have been reliant upon following the tourist trade. They crave anything Western in origin, and an exchange of music and clothing was the highlight for them of the interview.

Wayan spoke English much better than Made and translated much of what Made said. They had very similar things to say in regards to medicine, illness, and legitimate medical practitioners. Their views are much different from the others interviewees. The biggest contrast is that they openly mock the Balian.

¹¹ Wayan and Made along with Khetut and Nyomen are 4 names given to Balinese based on where they are in their siblings birth order.

Made: "OOO very scary guys they are! They deal with magic and spirits. I am sure something is going to float out of the ground and eat me in my sleep!"

Wayan: "He is being funny. We go to them sometimes, but we don't believe that old stuff. They are cheaper than pills. We let them talk so we can get medicine."

They view the Balian as glorified herbalists, yet they paint a clear image of medicine dictated by economics and geography. There are no doctors within walking distance of the bar where they work, but there are several small stores that sell pharmaceuticals. When they get sick they rely on their rudimentary understanding of western drugs. What they use and when depends on how much money they possess. If there is enough they will buy a western drug; otherwise, if they do not have enough money, they will see a Balian.

Wayan: Pills work the best and fast! Much better than the Balian, but the pills are expensive. We do not need to see a doctor, we know what pill to take when we are sick. If I have enough money I will take pills every time.

Made: But we do not have a lot of money. We do not get sick often so it is not a big problem.

Anything western is seen as synonymous as advanced by these two, a gateway for opportunity, and modern. This view of outside cultures being above what they consider to be Balinese is not restricted to Western societies though. They have a taste for Japanese, Indian, and Chinese.

Even in their formation of what illness, they keep a strictly conventional western viewpoint. Doctor speak¹² is used heavily in their determination of what is illness and the

¹² Doctor speak is a coding given for when individuals develop their narrative around conventional western medicine scientific report approach to describing illness. Colloquial words for illness, symptoms, and expressions get substituted with words that are perceived by the individual to be scientific in nature.

causes. The same can be applied for what medicine is and how it works, as demonstrated by the back and forth banter between Made and Wayan.

Findings from the Intersections

Taste of Java

Joko is a Javanese man who has spent the last 10 years living in Bali. He works as a manager for an art gallery. Both of his parents were doctors and died of cancer. Joko has a metaphysical view of health and illness. Despite the profession of his parents, his experiences have conditioned him to view all things as energy.

“I have had very intense feelings of surging energy. One time while my mother was in the hospital I put my hands on her shoulders. I felt this heat go through my body and into hers. You could see the different spots on her heat up as it went around. It finally went into me, I felt so hot I passed out. Afterwards my mom started to feel better for some time. I know this is what helped her out.”

Joko believes that energy imbalances weaken the body and make it susceptible to disease and illness. Through meditation and exercise one can redevelop a balanced energy. Beyond the metaphysical sense of medicine, Joko views the body as something that needs to be properly maintained. Without proper nutrition and conditioning a person’s energy cannot be maintained.

“You need to take care of your body so it can hold onto your energy. A starved out of shape body cannot keep the right energy level. It would be like a cup with a leak.”

When questioned why he left Java, Joko displayed apprehension before answering. He had wanted to live more openly; relationships with his family and community restricted the level of freedom in all regards to his life, especially in regards to his spiritual beliefs and thoughts of health associated with energy.

“Life is more open and accepting here. My siblings are devout Muslims. They do not tolerate any deviation from that strict path. My thoughts of energy and spirituality would have consequences. It would be perceived as against Allah if I talked openly of it. For instance my family has a special cemetery for us because of our ancestry on my mother’s side. If I did something that went against tradition and stood out in society I would be barred from going there to pray for my ancestors. In Bali I’m away from my family and can live life how I want to, I can visit Balians, go to yoga retreats, and other spiritual places to work on my energy.”

Northwest Yoga

Through a mutual friend I was introduced to Lawrence, a yoga instructor from Washington state. The interview took place in a small rooftop café

“When I think of disease, I think of the opposite. I focus on ease.”

He feels that disease is not random. Rather it is a condition in which an individual forgets the memory of being in a healthy state. Lawrence explains this is caused by not living in the present and responsibility:

“Disease is not random; it is the act of forgetting the body’s sense of ease. This is caused by forcing oneself too hard or existing too much in either the past or future. Doctors do not deal with health they deal with disease. The road to health is about acceptance... Health is about is about taking responsibility, that only you can do something about yourself. Our mindset is so much geared towards someone can fix you.”

Lawrence has been to Bali before; on this particular trip he came to Bali for holiday and to instruct yoga. He made no reference to “Balinese” yoga or medicine, but rather sought out the commodified Bali experience. He hopes to expand yoga into more of the Balinese culture by offering his classes for free to residents.

Lawrence sees yoga and the spread of the practice and his beliefs as a way to counter the control that allopathic medicine plays on society. He views yoga as active energy practice to teach people to regain the ability to take responsibility for their health and sense of ease.

Findings from the Iron Range

IT Family Man

George works as a manager for an online database system that supports an educational institution. He grew up in a working class mining family and is married with one child and another on the way. His dialogue is very to the point and utilizes doctor speak.

George views medicine as an external invasion. Illness is mainly something that comes from the outside; viruses, bacteria, etc. He feels that mental illnesses such as long-term depression and high level anxiety, while not caused by a microbial, are external inflictions of a sort due to work-life-environmental stress being seen as the cause.

As medicine, George finds that conventional medicine is the default definition of medicine. However, after the formal interview we had chatted with Adam and played cards (permission was given by both members to keep taking notes while socializing), and the two developed and further expanded their definitions for health, illness, and medicine. By the end of the night George developed his final view to include talk therapy, CAM¹³, and even diet into his definition of what is medicine. The overall theme however is that the therapies and physical substances are medicine. George does not include the people administering the therapies and medicines as part of medicine.

¹³ Complementary and Alternative Medicines, non-conventional western modalities such as acupuncture, chiropractic, reiki, and aromatherapy can all be considered in this classification.

George viewed that CAM, while he feels is effective, is not something he would actively seek out due to fear of being associated with perceived practitioners of CAM. George used words such as “dirty,” “smelly,” “crazies,” and “hippies” to describe people who regularly practice CAM. Among his friends and family, these titles are used as insult and lower social standing. He explained that these issues stem from a concept that “good working people” do not use CAM services, as they are perceived as a waste of time and “hard earned money.” Actual CAM use is not needed to have a lower standing, just perceived use.

“You just do not admit to using that stuff! It is for wackos and pot heads. I mean it may work sure, but you need to remember that good people get jobs. A good job means benefits, and benefits means clinics and hospitals. That stuff does work and it gets you back to work. If you work for the mines or any place like that and people find you’re using some of that alternative stuff you will get razzed. If your supervisor or anyone hears you use that stuff they will label you as a druggo. That is bad! You will get passed over for promotion and you will always be in the group that gets drug tested. I know at one job I worked the other guys were making fun of me behind my back because I drank a cup of tea one day. It is weird, it is OK to drink tea if you go to a Chinese place, but that is it.”

One point of great emphasis was placed on classifying and determining the differences between the words illness and disease, also the words health and wellness. George viewed illness as a short term infection, while disease is mental health issues, long term infections, or chronic conditions.

Registered Nurse

Adam is a registered nurse in his mid-thirties. His narrative focuses on his experiences with poor health service while being in the hospital for the flu and his experiences while battling testicular cancer. He takes on a back and forth approach about what is medicine and what he feels is a failing of conventional medicine regime.

"I was in the hospital for a severe flu. The nurse wouldn't listen to me that I was too sick to get to the bathroom on my own and I needed assistance. I finally had an accident and called the nurse for help again, and was promptly thrown some wet wipes to clean myself up with. She then went outside the room and complained to the rest of the staff about what had happened. I decided then that our medical system has taken out the humanity of medicine. We are taught to separate the human and focus on the drugs and procedures. This was just wrong!"

Foremost Adam describes disease as something external and foreign to himself. The cancer he fought, and the flu he was infected with are described as invaders and at points of the interview the cancer cells are considered "defectors," "traitors," and "rebels." Adam uses terminology of conflict, physical fighting, and war in recovering from illness.

"I was diagnosed with testicular cancer. You know going through nursing school I knew exactly what cancer was. This was different though. It was happening to me and it was my own body that was making me sick. I had to poison my whole body to try and kill off these traitors and end their coup. It was like a part of me was a spy for an invasion."

Adam sets up another division in medical practices by demonstrating what he feels is a conflict between conventional western medicine and CAM modalities. He speaks of the failings of the conventional medical system and points out a revelation that CAM may have the better impact on health. However, he feels that these two systems cannot co-exist or form one coherent fused system.

"I give merit to doctors, that is medicine and it works. I give credit too, to the alternative medicines they work as well. They just don't mix. Let's face it, the drug companies and a lot of doctors want to make too much money. The hospitals are designed to cure you while prolonging illness and the alternatives are designed to cure all the way, but can't do any surgery or anything. You have to choose one or the other. If you cross those borders it is like you started a whole new battle just to get medical services."

Adam developed his medical habitus by growing up in a northern Minnesota working class family that only used conventional medicine. His views were further shaped to accept and adhere to the conventional when he went through school to become a nurse. It was not until he went through the traumatic experience in the hospital that he challenged his views on what is proper medicine. Even still he does not fully feel at ease with making a switch in view points and is conflicted as demonstrated when he says:

“What do I pick and do I stay with it? Some of the doctors I work with are learning to be a little OK with alternative stuff. You still have to really limit what you say about alternatives though or you get chewed out... Growing up using only regular doctors it’s almost like an addiction to break when I even consider using alternatives. Like I’m betraying a piece of me or something.”

Religious Coordinator

Hugo works as a youth minister and religious school counselor. He is a devout Christian in his early thirties. This interview was very short. Like the interview with George there was a lot of emphasis on doctor speak and classifying different terms.

“Illness is something short term, disease is more long-term., Medicine are drugs, but not things like casts. Doctors have to be trained through a certified school. I would consider an acupuncturist or something to be a professional, but they aren’t a doctor.”

A brief mention of a sister going through mental illness was mentioned. The condition, the prescriptions, facility sites were all described. A small overview of the last time Hugo had the flu was discussed as well. It was very restricted to temperatures, drugs, locations of services, and result orientated outcomes.

Hugo emphasized a split between mental illness and physical illness. In order to be considered mental illness, a condition must be based in chemical imbalances of the brain. All other conditions are represented of either physical failings or a passing environmental condition. Physical illnesses, however, he reported to be those maladies caused by viruses and bacteria and other microorganisms.

Religious Teacher

Lisa is a mid-twenties kindergarten teacher at a Catholic school. As with Hugo, this interview did not last very long, as her narrative was very direct. Her focus was on giving a doctor speak like report to all questions asked. There is also a focus present on classifying different terms.

“When I think of illness I think fever, sore throat, like an infection. When I hear disease or chronic I think of something like asthma or something that just is not caused by something like a virus. Mental illness is where there is something wrong with the brain, like beyond stress or feeling sad.”

The development of this form of medical thought she feels comes from just never being exposed to anything outside of the conventional western medicine. She feels that it works and can be trusted. She describes her reasoning for never trying anything related to CAM:

“People who use stuff other than a doctor and what you get a pharmacy tend to be a little out there. I mean if you can avoid taking any drugs that’s great and you should try to do that, but if you’re sick stick with what works. Why move away from something that works and doctors and other professionals have tested before they even get to you?”

Jill of All Trades

Maria is in her late 20's works at a call center and works on the side as a professional wrestler. She has a degree in elementary education and is not afraid to get her hands dirty doing yard work. Her narrative is focused on fighting against the extended use of pharmaceuticals and the recognition of the metaphysical.

“Growing up my brother was diagnosed with ADD and a long list other quote unquote mental diseases. I saw his mind and body ruined from the effects of all these different chemicals. He was a high energy boy whose body was under siege by god only knows what random chemicals that the doctors told my mom to pump him full of. The reality is that as long as you are exercising and eating healthy most of everything else can be dealt with positive thoughts and not letting yourself get too dragged down with worry of things you cannot control.”

Maria's feelings against conventional medicine come from the observations of how prescriptions affected her brother. However, her views for the metaphysical come from her feelings. Maria feels the most important part of health comes from one's energy generated by an individual's thoughts and spirit.

“There is just something about letting yourself be positive in thought and feeling. It is all about your energy. I was weighed down by so much of my past experiences. I learned somewhere along the way that If I opened up to someone about what was on my mind, I could let go of it. Once you do that and learn what you can deal with now and learn to be OK with that you can't deal with life gets much better. It is purifying when you stop that war that goes on in your heart and mind. You can stop fighting with everything, and that most of the time keeps you in balance. When your energy is in balance then everything heals.”

Travelling Masseuse

Julie is in her early thirties and also works at a call center. She is a licensed massage therapist. The school that she went to for her training was “very new aged”. This greatly shaped her views of medicine and health as well. While she did not go through a specific trauma, upon changing her views from conventional western to a more CAM view she describes feelings of more energy and being happier.

“I was working as a bartender for a number of years and decided I wanted to do something different with my life. I liked being social, but I also liked the idea of making people feel better so at the suggestion of a friend I applied to this massage therapy program. I was in a lull in my life feeling listless, always tired, and just sad a lot of the times. That wasn’t healthy. I was sick. When you’re not healthy you’re sick it’s a simple concept really. When I started classes they taught me not just massage, but also herbalism, aromatherapy, reiki and so much more. When you get an infection those all help to cure the infection. It is more of a lifestyle change that gives you long lasting health and happiness. The two go together and doctors just don’t administer that.”

Her views on illness center more on the mind and positive thinking than of microorganisms. Rather than being the cause of illness, things like bacteria and viruses, are a symptom of negative thought and life imbalances. These imbalances can include things such as the stress brought on from working too much or worrying too much. Also included are actions such as overeating, bad nutrition, or drinking too much in response to a life imbalance.

“The reality is that negative thoughts, life-work imbalances, holding on to old emotions and the like are what causes illness. That’s what I learned as I when through my massage therapy program. I was performing insanity. You know doing the same thing over expecting different results. What made it worse was I was doing the same things over that were making me sad and stressed. These caused imbalances in my life and that was why I was unhealthy. When I started to change my lifestyle to something that was less worry filled I started feeling 100% better. Amazing when you change your energy and state of mind how much everything changes.”

Discussion

All the individuals interviewed carry a very unique story and perspective. This project cannot be considered more than a pilot study due to the small population sample. However that does not prohibit us from pulling out some interesting similarities and differences and where these can lead to a larger undertaking.

First and foremost is the use of societal consequences in medicine as a potential for cultural control. In Balinese society the older individuals all had varying reasons based from tradition to maintain a respect towards the Balian and traditional view of medicine. It is integrated with Balinese religion and community obligation. Breaking from these practices entirely leads to consequences in the rest of an individual's world. In the case of members of the royal family it would mean loss of status, for the others it means social isolation, potential susceptibility to black magic, and even possible loss of property.

Among the Iron Range participants there are two camps; those who use CAM and those who use conventional medicines. In both cases there are social ramifications for crossing the boundaries between the two camps. Those who are in an environment where conventional medicine is the norm there is economic ramifications as a control keep people in that system (see George and Adam as examples). In the case of people who come from an environment where CAM is preferred, there is social isolation and mistrust as controls.

In both the case of the older Balinese and the Iron Rangers, there are controls and reasons beyond medicine that keep people adhering to their medical systems. However, in the

case of the Balinese there is flexibility allowed to introduce conventional western medicine.

This allowance of adding in the western I believe to come from three points.

The first is that the Balinese economy is now almost entirely dependent on tourism. There is a certain degree to which most Balinese seem to need to be able to communicate and interact in all aspects of the western tourists. This creates an allowable adoption of non-Balinese ideas. The second point is that traditional Balinese views of medicines and conventional western medicine have not yet drawn the lines of all-out war that is seen in the Iron Range between CAM users and conventional medicine users. Finally, in Indonesia as a whole, cell phones with internet access and internet cafes are commonplace, opening up Bali to a worldwide perspective that is available to a person's finger tips combined with the worldwide perspective already being brought in by the tourist industry. This is something that is not necessarily available socially with the Iron Range where much of the focus, even with the addition of the same technological access, is still on the local culture and economy.

Within the Balinese participants, there is a gradient of how important and focused the traditional sense of medicine remains. The older the individual the more important the role of traditional medicine is in terms of social control and personal investment. The reasons for this are speculative at best with the sample size. One potential reason could have to do with the intensity of lifelong exposure to the tourist industry and involvement with it. The older the individual, the more likely during a person's upbringing that they were solely reliant on tourism. In the case of Made and Wayan, they have been dependent on the tourism their whole lives, and it has been the symbolism of a livable trade. Conversely, the Balian does receive some

benefit from the tourist trade and would have his livelihood or quality of life greatly decreased without tourism.

Another potential reason has to do with location, both geographically and within society. Made and Wayan live in the northeast section of the island where currently the tourist trade is the only way to etch out a living that is more than living on the absolute bare minimum. They are also the only individuals who are not royalty or work in close relation with royalty.

In comparison, the Iron Range individuals have no apparent age gradient trend with their change in habits. However, in order to go from conventional medicine and go into CAM without being raised in a household that practices CAM, there is a required traumatic or very prolonged illness not cured by conventional medicine. This is unlike in Bali, where participants who demonstrated that traumatic experiences were not required to start incorporating part of other medical systems.

Conclusion

With a small sample population, and that the population was gathered through convenience and snowball sampling, this research can only be considered a pilot project. However, there are several strong launching points for future projects. First another project focusing on location, age, and caste\social standing for participants in Bali in regards to the illness narrative would provide much more insight. Furthermore it would be interesting to study the cultural transfusion that tourists bring back to their homes after a visit to Bali and to see how that affects them and their social networks.

As for the Iron Range, a larger population sample is needed. It may be helpful to pick one segment of a population to see specific narratives and feelings. There is a grave need to recognize the importance of domestic social studies, especially on the Iron Range. Mesothelioma illness narratives and the changing iron miners' construction of experience needs to be documented and brought forward. Beyond the court cases and obscure interviews on the news, a more formal study is needed on the experience and narrative.

The project encountered a great deal of limitations to those who were interviewed in Bali. It may be due to the community knowing the connection to one of the Royal families of Bali that the researcher possessed. Some the limitations also had to do with gender cultural norms; there are some realms where men and women outside of a family do not intermingle or discuss with the opposite gender. The most obvious limitation is of language and a lack of readily available translators during this time. Along with a limited knowledge of the language is

also knowing how well questions translate, and if the translator's status in a community has an effects on how an individual responds in an interview.

It would be ideal to expand this project in the future to be in the field for at three months, if not longer, to build up better community trust. Preferably to go with a small research team for this project instead of a single researcher. The plan would be to include members of both genders and to spread out to avoid class ties. In this manner the project would hopefully reach a much larger and more diverse range of Balinese.

This study scratched the surface of its intentions, and will need to be revisited to be able to develop broader reaching significance. It nevertheless has uncovered more questions and interesting points to explore, and it is the hopes of this researcher that more interest can be gathered in comparing and contrasting the upper Midwest with other global locations to further bridge medical cultural understanding. It is deeply needed in order to help refugee centers and medical staff in the upper Midwest as they try to aid new immigrants to our nation.

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