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An Introduction to Malay Shamanism

We had recently moved into a house in Merchang, a Malay village on the South China Sea, in the state of Trengganu, Malaysia: myself, a graduate student hoping to write a dissertation on childbirth and nutrition,¹ my husband, and our ten-year-old son. We were the only foreigners who had ever lived in Kampung (Kg.) Merchang, except for Japanese soldiers during World War Two. The village was chosen after consultation with the director and staff of the General Hospital in Kuala Trengganu, the state capital. Located on the main highway, twenty-five miles away from cosmopolitan medicine in either direction, Merchang seemed perfect as a research site. The director of nursing told me that although a government-trained midwife had been in attendance for seventeen years, traditional midwives (*bidan*) and indigenous medical practitioners (*bomoh*) were still very much in demand. She said that the most common medical problems were intestinal worms, infected cuts, and scabies and asked me if I would be willing to do some first aid. The hospital pharmacy provided me with a supply of medicines.

When word got around that I had medicine that could take away the maddening itch of scabies and was giving it away free, people came to my house in ever greater numbers. Not only my close neighbors ap-

1. I did write the dissertation I had intended to, "Conceptions and Preconceptions: Childbirth and Nutrition in Rural Malaysia" (Department of Anthropology, Columbia University, 1979). A revised version, *Wives and Midwives: Childbirth and Nutrition in Rural Malaysia*, was published by the University of California Press in 1983. Interested readers will find an overview of the village's society and cultural ecology in this work.

peared, but others as well, who told me they lived in nearby hamlets. It seemed unreasonable to me that they should have to walk to my kampung when there was medical help available close at hand—the bomoh they had always called in times of need. I decided to pour some of the benzyl benzoate that was so effective in treating scabies into several bottles which I brought with me on visits to the local bomoh, many of whom I had not yet met.

Two of the bomoh lived in Kg. Padang Pauh, a hamlet located up a steep hill leading past the cemetery, toward the jungle. The first one I visited, Tok Kemat, claimed to have come from a long line of wonder-working (*keramat*) bomoh. Although he accepted the benzyl benzoate graciously, he declined to speak to me about his own methods, saying that, although other bomoh might be willing to speak to me, his knowledge could be passed down only to his children. The other bomoh, Pak Long Awang, lived far off the dirt road in a small house reached by climbing over a stile. He was a sturdy old man with short white hair whose tiny, skinny wife I recognized as one of the people who had come to me for aspirins. He told me that he specialized in curing crazy (*gila*) people, people with soul sickness (*sakit jiwa*), and invited me to come back in about two weeks when he expected to treat some interesting cases.

Pak Long's wife stopped at my house one afternoon to inform me that her husband was expecting me later. Night falls suddenly near the equator. The sun takes only minutes to set, and when the moon is full it seems much larger and feels much closer to earth than it does in the temperate zone. That night, however, was dark of the moon. My assistant, Yusof, and I started up the hill to Padang Pauh, our way lit by flashlight. I should have checked the batteries before we started out, because as we neared the graveyard, the light grew dimmer and disappeared. I couldn't see ahead of me in the blackness. The air seemed denser in the absence of light, and the scent of jasmine more intense. Yusof took my hand and told me not to worry—he could find his way around the kampung with his eyes shut. We climbed slowly up the hill until we reached the path that ended in a stile. As we approached Pak Long's house, the sounds of drum and gong, fiddle and song grew louder.

The house was lit by flickering oil lamps. A crowd of people sat on

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floor mats woven of strips of pandanus leaves dyed in pinks and purples, the men sitting cross-legged and the women with their legs bent to the side, invisible under their sarongs. Some of the children were still awake while others slept soundly on the mats, despite the loud percussive sounds of the little band. One man beat a hand drum decorated with three stars and a crescent moon. A woman hit an overturned pot with sticks. Another man sang as he drew a bow in the shape of a feathered arrow across the strings of an intricately carved spike fiddle painted red, green, and silver. Smoke rose from a dish of incense; in another dish jasmine blossoms floated in water. Pak Long danced slowly to the music, taking small steps, gesturing gracefully with his arms, and shaking his head from side to side.

I was still a recent enough arrival in the village to cause a sensation when I walked in the door. The women exclaimed at the whiteness of my skin and the fact that I was dressed in a sarong, as they were; they asked to try on my ring and my earrings. Some of the children tentatively smiled; others hid their faces in their mother's laps. Everyone's attention seemed to turn toward me, except for Pak Long, the musicians, and a middle-aged man who sat before them, his face immobile. After a while the music stopped. It was only then that the man's stony expression left his face. He turned toward his neighbor and asked, "Who's she?"

I found out later that he had been one of the patients that Pak Long spoke of, a person suffering from soul sickness. In order to cure the patient, Pak Long said, it was necessary to put him into a state of "not remembering" (*tak ingat*); his immobility and apparent lack of interest in his surroundings was due to his being in trance.

The treatment, I was told, was called Main 'teri—the ceremony I had read about in English accounts of Malay ritual life at the turn of the century. It was the oldest kind of medicine there was, said Pak Long, in fact it dated back to the time of Adam and Eve:

In the time of the Prophet Adam [he said], Eve was sick. Adam looked for medicine, he looked and he looked but he couldn't find any. Then he looked for a bomoh, and he found one. Then he asked the bomoh, "Do you have medicine to treat Eve?" This is what Tok Kumar Hakim [the bomoh] said: "I have medicine for everything!" He brought over a

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gebana [hand drum]; he had a rebab [spike fiddle]. Adam asked what those things were. "This is a bowl for medicine," he said, pointing to the gebana. "This is a medicinal herb," he said, pointing to the rebab. Then he treated his patient—he played [main]. He played and he played Main 'teri. After Main 'teri, Eve was cured of her sickness. When she was cured, then God said, "I can't afford to keep this Datuk Kumar Hakim around. It would be better if I sent him to a cave. I'll tell him to go into that cave. If I don't tell him to go into the cave," he said, "no one will ever die," he said, "none of the followers of Muhammad." So he entered the cave, and he is still living there.

Its name is even older than that [said Pak Long]. When God made Adam he was just a lifeless image. God called Gabriel and breathed into his hands. He told Gabriel to fly over to Adam's image and put the breath up his nostrils. Adam sneezed, and the breath traveled all over his body. His body was too weak for the breath, and it broke into little pieces. God told Gabriel to weld (pateri) it back together, to make it whole. That's why it's called Main 'teri. When we do it, we weld people together, we make sick people well.

I had heard from one of my professors at Columbia, Clive Kessler, that the healing ceremony was still being performed in Kelantan, the state to the north, but was assured by my colleagues in Kuala Lumpur that it had died out long ago in Trengganu, so I had not expected to see it in Merchang. I was fascinated by Main 'teri. I attended the seances whenever and wherever I could, and, although I became acquainted with many other bomoh, I soon joined Pak Long's entourage and became his student, and, later, his "daughter." Tok Daud, the man who had played the rebab on the first night I witnessed Main 'teri, took my education in hand as well. In the second year of my research, I also attended an impromptu school for shamans that flourished briefly in Merchang. Like so many foreigners before me, I had become entranced by the work of the Malay shaman.

A History of Western Accounts of Malay Shamanism

Malay shamanism has attracted the attention of foreign writers and researchers for more than a hundred years. The spirit-raising seance

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(variations on a theme known in different states of the Malay peninsula as *berhantu*, *berjin*, *main bagih*, *main gebiah*, *main mok pek*, *main belian*, *main peteri*, *puteri*, or *'teri*)² first appeared in Western literature as “demon worship [whose] very existence is scarcely known [since] there are not probably many Englishmen who have witnessed the frantic dances of the *Pawang*, or listened to the chant and drum of the *Bidu* [bomoh] beside the bed of some sick or dying person” (W. E. Maxwell 1881:12). Maxwell, who referred to all Malay indigenous treatments, other than bone-setting and simple herbal remedies, as “the black art,” described a seance held for a sick young woman in Perak, in which the spirits were exorcised but the patient died (W. E. Maxwell 1883). Blagden was more charitable when he said that the shaman’s familiar spirits were “by no means necessarily evil” (1896:4), but his characterization of Malay beliefs as “quaint notions” (1896:11) was perhaps even more condescending than Maxwell’s “downright heathenism” (1883:222).

Skeat (1898, 1972 [1900]), and Annandale (1903*a*, 1903*b*, 1904*a*, 1904*b*), following the inspiration of Tylor and Frazer, discussed such rituals as “superstitions found among the lower races.” Skeat declared himself devoted to collecting “every jot or tittle of information” on the folklore and “popular religion” of the Malays; Annandale was equally meticulous as a collector of data. The temper of the times, however, was not conducive to the analysis of the material they had collected. English students of Malay culture believed that “it is evident . . . that these ideas do not form a system, being rather a jumble of confused and sometimes incongruous superstition” (Annandale and Robinson 1904:33). Wilkinson (1908:64) compared Malay culture to “a sort of museum of ancient customs—an ill-kept and ill-designed museum in which no exhibit is dated, labelled or explained.” Under the circumstances, it seemed a

2. Although the seance was almost invariably referred to as Main Teri by the ritual practitioners and their patients, its usual reference in the literature has been Main Peteri or Main Puteri. I prefer Main Peteri (Main *'teri* for short) because of its multiple resonances: *peteri* as princess (*tuan 'teri*), as shaman (*tok 'teri*), and in closeness of sound, to *pateri* (to weld). The Malay shaman does not send his soul on a journey, but I do not believe that this must be the primary criterion for employing the term “shaman”. In fact, the original Tungus word, *saman*, from which this term derives does not specify a spiritual journey, but, rather, means “one who is excited, moved, raised.” This definition brings it close in content to the Malay role of the *tok 'teri* (one whose Inner Winds are excited, moved, raised—see chapter 4).

thankless job to try to make systematic sense out of these irrational beliefs. More recent scholars must, however, appreciate the wealth of information amassed by these earlier investigators and respect their modest goals: to confine themselves “almost entirely to describing things as they are, without attempting either conjecture or comparison” (Skeat 1898:1).

Early accounts of Malay seances show that they occurred in many parts of the Peninsula, although even at the turn of the century we are cautioned that they were “very seldom undertaken” (Annandale 1903a:102). Annandale described a shamanistic ceremony performed for a little girl in Perak and discussed many beliefs connected with Malay theory and practice of curing spirit-inflicted problems in Perak and Patani. Zainal-Abidin described a similar ritual in Negri Sembilan (1922), Kloss (1908) spoke of the pawang’s activities in Johore, and Gimlette (1913) wrote of shamanism in Pahang and Kelantan. Skeat recorded an eyewitness account of a seance held in Selangor in which the Tiger Spirit was invoked for the benefit of a sick man, and described a *berhantu*, conducted by a female pawang, which cured the Sultan of Perak of a grievous illness (1972 [1900]:436–449).

A description of this Perak seance had appeared previously in one of Sir Frank Swettenham’s *Malay Sketches* (1895). Sir Frank’s stories, particularly “Ber-hantu” and “Malay Superstitions,” and those of Sir George Maxwell (1907), particularly “The Pinjih Rhino” and “A Deer Drive,” brought the rituals of the Malay shaman to the English reading public, who eagerly devoured these colorful tales of colonial exotica.

Winstedt, writing later in this century (1951 [1925]), attempted to tease Hindu and Sufi elements out of the shaman’s seance, as well as those that he ascribed to an indigenous religion practiced by Malays before their conversion, first to Hinduism and later to Islam. Although he mentioned in passing the microcosm/macrocosm relation of man and the universe found in the symbolism of the Kelantan shaman’s exorcism (1951 [1925]:85–86), he found no system or unity in Malay beliefs, which he compared to a cultural “lumber-room,” full of “gracious and beautiful” items perhaps, but nevertheless carrying the distinct connotation of useless objects piled helter-skelter in no particular order. Winstedt warned his English readers not to expect anything better of Malays since their “primitive minds” could not grasp theories and systems that

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required abstract thinking: “Although, for example, the Malay, like many other races, arrived at what has been termed animatism or the idea of a vital force in stone and plant and beast and man, it would be absurd to suggest that he proceeded to postulate uniformity in nature, an idea too abstract for the Malay language even today” (1951 [1925]:14).

Although Winstedt’s dictionary, even in its fourth edition (1966), contains no Malay gloss for “uniformity,” perhaps because he had convinced himself there could be none, earlier English-Malay dictionaries (e.g., Shellabear 1916) found no problem in locating an equivalent.

Later scholars were less interested in separating the strands of historical influences in the shaman’s seance than they were in analyzing its form and content. Cuisinier (1936), who has provided the most extensive treatment to date, concentrated on its dramatic and symbolic aspects, finding order in the parallelisms the Malay shaman makes between the universal macrocosm and the human microcosm. Her later book (1951) discussed the abstract idea of uniformity in nature that Winstedt believed was beyond the capabilities of Malay minds: the essence that binds the universe together in totality is *semangat*, the vital force that permeates all creation—fire and rock as well as plant and animal. Endicott (1970), using both the descriptive essays of earlier writers and the more analytical writings of Cuisinier, claimed that the basic content of Malay magic was the manipulation and maintenance of boundaries between spirit and matter.

Social and cultural anthropologists of the 1960s and 1970s were more concerned with relations between human and human than between human and spirit. They described the ways in which the shaman’s ritual reveals the structure of the social interactions and the thoughts, beliefs, and values salient to Malay society. Mohd. Taib Osman (1972) placed the institution of the bomoh within its social context and the beliefs surrounding his practice within the traditional Malay world view. Raybeck (1974) and Kessler (1977) discussed the Main Peteri as a response to social stresses and gender hostility in Kelantanese village life; and Kessler (1977) brilliantly analyzed the political content of the ceremony.

Anthropologists working in other Malaysian states have provided insights into related phenomena in traditional Malay healing, for ex-

ample, Banks's illuminating discussion of shamanism in Kedah (1976), Provencher's provocative comments on the prevalence of orality in the symbolism of Malay healers (1979), and Benjamin's comparisons of Malay and aboriginal animism (1979).

Firth discussed Main Peteri as sheer entertainment as well as social drama (1967), continuing Cuisinier's perceptive linkage of the seance with *Mak Yong* (a dramatic performance with music, song, and dance) and *wayang kulit* (the shadow play). Sheppard (1972) extended this linkage by his inclusion of Main Peteri as one of the many Malay traditional arts and pastimes. Ghulam-Sarwar Yousof (1976) described the fusion of Mak Yong and Main Peteri in a healing genre of Kelantan that promotes an identification of patients suffering from depression and other mental disturbances with the characters of Mak Yong stories. This genre appears to be the type of healing ceremony used in the case studies analyzed by Kessler (1977).

Firth's treatment of Main Peteri as entertainment takes on the flavor of dramatic criticism rather than social anthropology when he complains that "the language is stereotyped and follows conventional formulae" and suggests that what is "needed to convert this ritual performance into dramatic art [is] a sense of general statement about human experience and the human condition; and more deliberate focus on the development and unity of the form of statement" (1967:203). These criticisms fall very wide of the mark, since the heart of the Main Peteri is precisely its statement about human experience and the human condition.

The Main Peteri, although it takes the form of a dramatic performance and can be used for a variety of purposes (including inducing a straying spouse to return home, breaking contracts between spirit and mortal, and giving a supernatural nudge to recalcitrant tenants who refuse to be evicted), is essentially a healing ceremony that has interested physicians as well as ethnographers, from Gimlette, writing in 1913, to Chen in 1979. Gimlette's *Malay Poisons and Charm Cures*, which first appeared in 1915, includes several short excerpts and a description of a performance. His discussion of shamanic cures (which he attributes to "suggestion") assumes a purely demoniac theory of causation as the basis for the seance and exorcism as its only means of treatment, an

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assumption that Gimlette held in common with Malayanists of all persuasions.

More recent research has focused on the seance's psychotherapeutic implications. In the mid-1960s, the Hooper Foundation of the University of California, San Francisco, in cooperation with the Malaysian Ministry of Health, supported the investigations of two psychiatrists, Gerald Resner and Joseph Hartog, and a graduate student specializing in medical anthropology, Brett Hart Kramer, into aspects of traditional Malay treatments of mental disorders. Hartog and Resner, who had undertaken a two-year study to compare Malay folk treatment concepts and practices with Western counterparts (Hartog and Resner 1972), spent only a few paragraphs in a general article on Malay folk treatments discussing Main Peteri, which they characterized as psychodrama. They enthusiastically supported Kramer's investigation of Main Peteri³ with a view to considering its psychotherapeutic effectiveness within its cultural context, since they believed that such a study would enhance understanding of the relationships between culture and traditional psychiatric practice. The short-term, highly focused nature of Kramer's investigations, however, and his lack of fluency in the language limit the usefulness of his observations. These investigations were cut short by the deaths of Resner in 1969 and Kramer in 1971.

Paul Chen, a physician trained in hospital-based medicine who formerly taught at the University of Malaya, observed Main Peteri in Kelantan. He commented that it was highly successful in treating psychoneuroses and depression, since the ritual "draws the sick individual out of his state of morbid self-absorption and heightens his feelings of self-worth" (1979). A vital element in this treatment, he felt, was the involvement of the patient's family and friends in the ritual, which enhances group solidarity and reintegrates the patient into his social group.

This evolution of opinion about the Main Peteri, from "devil worship" and "the black art," through a view of it as a ritual that cures by

3. Kramer spent a total of ten weeks in Kelantan. His observations exist only as a few pages contained within an unpublished paper written for a course; a short, unpublished mimeographed report; and a summary of the latter in the *Transcultural Psychiatric Research Review* 7(1970):149-150).

faith alone, to a consideration of the psychotherapeutic elements to be found in an essentially magical enterprise, reflects the changing attitudes of representatives of Western culture in general, over the course of this century, toward traditional forms of healing.

“Primitive” Psychotherapy

From the early days of this century, psychiatrists and psychoanalysts have recognized that some types of “primitive” healing methods must be classed as examples of psychotherapy, since, as Freud (1924:250) put it, in order to effect a cure, a “condition of ‘expectant’ faith was induced in sick persons, the same condition which answers a similar purpose for us today.” Scholars from the fields of medicine and psychology writing later in the century, such as Kiev (1964, 1972), Kim and Rhi (cited in Kendall 1985), Devereux (1956), and Frank (1974), while conceding that shamanistic rituals can be effective, believed that their psychotherapeutic elements were primarily by-products of magical activity, reinforced by the moral support that patients receive from the community. The greater efficacy of Western methods was proclaimed, primarily on the ground that shamans provide merely symptomatic relief rather than the true cure provided by Western psychotherapists. The shaman’s patients experience “remission without insight,” whereas patients in psychotherapy are expected to undergo a basic learning experience. The insights that patients achieve in the course of this learning experience are assumed to help them form a more workable self-image, and, as a result, improve the way they function in daily life (Frank 1974).

Kiev exemplifies the mid-century medical viewpoint: “Although primitive therapies are fundamentally magical, that is non-rational attempts to deal with non-rational forces, they often contain elements of rational therapy” (1964:10). According to Kiev, the assistance that healers might provide to their patients occurs in spite of, rather than because of, the healer’s theories regarding the cause and treatment of disease.

Many anthropologists (and some sociologists, e.g., Rogler and Hollingshead 1961), rather than considering the shaman’s role a pale shadow of its Western counterpart, have viewed it as more important within its cultural context, since its practice includes a wider range of

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illnesses and misfortunes than that of the psychiatrist, and it obliges the shaman to be a master of the unseen world as well as a healer. Psychiatrists and psychologists of considerable anthropological sophistication (for example, Torrey 1972; Katz 1982; and Kleinman 1980, who combines psychiatric and anthropological expertise) have joined contemporary anthropologists in searching for the logic inherent in the shaman's ministrations and in finding similarities in, as well as differences between, biomedical and nonbiomedical healing methods. Lévi-Strauss points out that the purpose of the treatment, in both cases, is to bring repressed material to a conscious level, resulting in an abreaction. The difference between psychoanalysis and shamanism, he believes, concerns the origin of the myth employed in the healing process. Patients under psychoanalysis present their individual myths to the healer, while the myth of the shaman is received from collective tradition (Lévi-Strauss 1963:198–204).

The work of the shaman involves the manipulation of symbols that serve as appropriate metaphors for the articulation of the patients' experiences (see, e.g., Crapanzano 1977 for numerous examples). Shamans provide their patients with material from outside their normal experience; in the words of Lévi-Strauss (1963:199), the patient "receives from the outside a social myth which does not correspond to his former personal state." The locus of this symbolic expression of the patient's conflicts may be found in ancestral ghosts, elemental spirits, or other entities. These serve as projective symbols of stressful social relationships, couched in terms common to the healer, the patient, and their social milieu, and conceived of as external to the patient's personality. The trancing shaman becomes a conduit for these embodied symbols, and the patient who achieves trance is considered to have escaped from harsh reality into the world of symbols (e.g., Lewis 1971) (although I believe an equally strong case could be made for considering confrontation with the spirit world an often frightening and demanding means of facing familial and social problems). Analysis of the shamanistic ritual has elucidated the logic and rules of what, in essence, have been viewed as projective systems.

Garrison (1977) has pointed out that many concepts in Puerto Rican *Espiritismo* may be close parallels of psychoanalytic concepts: the superego being equivalent to the protective spirits, the ego to the individ-

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ual spirits, and the id to base or ignorant spirits. But, although parallels may be drawn between many cosmologies and psychoanalytic formulations of the self, Prince believes that the gulf between Western psychotherapies and non-Western therapeutic systems is “of the order of the difference between alchemy and chemistry, or between astrology and astronomy” (Prince 1980:335) due to the superiority of Western theoretical formulations.

Although the Main Peteri contains all the elements of a projective system, the theory of Malay ritual practitioners goes far beyond that of simple possession and exorcism, and, as I shall demonstrate, is comparable to some of the most respected contemporary Western theories regarding personality types, creativity, and frustration, especially as they refer to psychosomatic medicine. Like Western psychotherapies, the Main Peteri can provide patients with insight by locating problems within the patients’ own personality components. This aspect of the Malay ceremony is nonprojective: its metaphors are archetypes of the Self, and its agents are the Inner Winds, an integral part of the patient’s being, rather than disembodied spirits or other external entities.

The concept of the Inner Winds (*angin*) is central to the Malay theory of personality, its expressions, and vissicitudes. The treatment of those ravaged by its inhibitions and frustrations, as exemplified by the Main Peteri, must be understood within the contexts of Malay medical theory and the restraints in rural Malay society that can lead to problems that respond to this indigenous form of conscious psychotherapy.