

Chapter IX

Conclusion

Infants live in the center of active social relations. Overall, the presence of the infant is a benevolent presence, giving joy and meaning to all involved. In the Baliem valley, I saw a score of happy, healthy Dani babies all of whom prospered under the nurturing attention of their caretakers. At the market, in gardens and in cookhouses, babies were consistently loved, welcome members of a community.

The nurturing and generous nature demonstrated in most social relations with infants does not mean relationships that involve infants are not complex. Cultural practices of early child care are too easily viewed as mere strategies of socialization or as necessary but benign acts that make up the basics of child care, when indeed such practices are subtle and often highly political in nature. Closing off social analysis until the child under study is older limits our understanding of a score of issues, notably relations of inequality, constructs of gender, and notions of personhood. This dissertation questions whether it is possible to adequately describe infancy by resorting solely to the overall unproblematic terrain of infant socialization and cultural practice. By arguing that we need apply insights derived from theories of power and inequality to the realm of infants, this dissertation shows that a purely cultural focus is of limited value.

Yanagisako & Collier (1987), for example, argue that the study of inequities between men and women need to be understood free of assumptions about women's biological reproductive capacities or inherent qualities of nurturing. While I support attempts to eliminate gender bias in research and analysis, I question whether an exclusively culturally-grounded analysis of infant social relations can either offer gender-neutral analysis or provide an adequate description of an infant's rich life. Thus, I only partially concur with Yanagisako & Collier's (1987:39) argument that "sexual intercourse,

pregnancy, and parturition are cultural facts, whose form, consequences, and meanings are socially constructed in any society, as are mothering, fathering, judging, ruling, and talking with the gods." A culture-only approach denies the vital importance of the body in the interplay between cultural processes and local biologies.

When the body is given its due as part and parcel of cultural practice, as an inseparable component of social life that feeds off and feeds into ways people act and think, the importance of the infant in the life-cycle becomes apparent. Cultural constructions notwithstanding, women in low technology societies do make babies, and women, again in low technology societies, do tend to be the ones who breast-feed and nurture the very young (Scheffler 1991; see also Schneider 1984). Infants offer a wealth of bodily cues that the Dani read, but they read them partially in light of local biological patterns of growth, patterns that are of vital importance both to the Dani and to other Melanesian societies (see Knauft 1994; Strathern 1988; Battaglia 1990). In other words, in Melanesia in general, and with infants in particular, "material embodiment matters; it cannot be reduced to a process of signification" (Knauft 1994:421; see also Haraway 1988; cf. Butler 1993).

Among the Dani, bodies do matter (Knauft 1994:421). The Dani ascribe symbolic meaning to the placenta precisely *because* it is key to regularities found in childbirth. The Dani ascribe politically-charged meanings to infants *because* they are biologically less mature than adults. Women and men may end up by not nurturing a child, but their actions are grounded in part in an awareness of the imperatives and implications of caring for a biologically immature person. The Dani distinguish between what they see as fixed bodily properties of infancy and variable attributes shaped by ancestors, food, netbags and more. The local realities of more infant male deaths, higher infant male morbidity, and overall high death rates describe other local demographic patterns that may have a potentially profound impact on cultural meanings. In short, attempts to view social

worlds as cultural constructions might be effective for the analysis of adults, but for infants, a more inclusive analytic framework is necessary.

The intersection between the life-cycle event of Dani infancy and desired outcomes is a highly-charged arena. Contests pervade the development of personhood among the infant and accompany her transformations into a toddler. Among the Dani, I have suggested that systematic relations of inequality present in adults suffuse the life of the young. In particular, infants are ascribed a gender which affects how mothers, fathers, and kin react towards them, particularly during sickness episodes. The greater susceptibility of male infants to die before the age of one year also appears to have a potentially profound impact on how the Dani understand men and women throughout the life cycle. Dani respond to infant death by linking it to procreation, food, and bodily strength, all highly contested arenas where men seek to confirm their status and seek moreover to make submission of women to their higher status seem natural and inevitable. If, indeed, "systems of kinship and gender are 'about' difference and inequality" (Peletz 1995:360), then the earliest moments at which they get produced, and reproduced, needs more detailed scrutiny. Further research by scholars of inequality in classless societies may find that comparative studies show infancy to be a key time for creating, validating, and challenging existing beliefs about gender difference in other societies. It may also be productive to examine demographic patterns of infant deaths in communities where gender antagonisms are pronounced in order to ascertain in a more detailed way to what extent the two are linked.

Infancy among the Dani is a time of uncertainty. Uncertainty engenders meaning. In this dissertation, I have argued that the infant represents seemingly endless possibilities for encoding meaning about uncertainties: through the specific nature of his body; through the enactment on him of status that the production of a new life entails; and through the abstractions made from the infant to culturally meaningful ideas about sociality, the past, the present, and, most of all, the future. In other words, meaning can

pass "through" the infant in order to get somewhere. Infants validate meanings, partly because they embody ambiguous meanings, and partly because they are passive, small, and fragile. Infants cannot talk back. Infants are thus polysemic symbols par excellence, human recipients of ascribed meanings that cannot be challenged. They may cry or display other traits locally recognized as ones of agency, but in the end it is the person who is watching the child who listens and interprets what the cries mean.

The symbolic potency of the infant makes her a viable tool for promoting political messages. Political leaders can draw upon superstitions to induce change. In using the word superstition, I do not refer, as common usage would, to misguided beliefs of peoples. For example, Pigg (1996:179; see also Good 1994) describes superstition seen by health workers in Nepal as "habit", part of "villagers' belief systems" where "illiteracy, superstition, social evils, and poverty are all listed as...basic health care problems." Rather, I refer to superstition as beliefs about infants, particularly when mortality rates are high and futures uncertain as in the Baliem valley, which are grounded inevitably both in an inability to fully understand what the present is like for the baby and in an inability to fully control the world in which the child lives. Where there is uncertainty, there is speculation; where there is speculation we find superstition.

Superstition about infants proves useful for those who care to create ideologies of authoritative knowledge. The Indonesian nation-state has found that claims to be able to reduce the uncertainties surrounding infant death and growth can work as a strategy of containment. Along with other such nation-making strategies, for example, promoting a unitary language, adherence to state-approved religions, and schooling, the promotion of the idea of the healthy infant holds strong symbolic currency. As Jourdan argues for national symbols in Melanesia, "symbolic displays are discourses that tell members of the society not only what they are, but more importantly, what they could be" (Jourdan 1995:128). *Posyandu*, weigh cards and posters of smiling, plump infants *all* serve to tell Dani people what they could have--low infant mortality, large, growing infants, the

prosperity of future generations. Infants suggest both uncertainty and hope; they inspire dream images of future possibilities. In Indonesia, infants and children are used within nationalist discourse as "summarizing symbols," a phrase Ortner uses to describe the drawing together and catalyzing of emotions in an image: summarizing symbols draw out a "crystallization of commitment" from a group that may have broad social significance (Ortner in Linnekin 1990). Specifically, the state appropriates "normal" infant survival and growth to create a summarizing symbol of future health and well-being, offering certainties in exchange for conformity. Further research on links between symbolic and practical relations between nation-states and their youngest citizens, in nations with different political goals, may help shed light on the relationship between political practice and interpretations of the social reality of uncertain infant growth.

An equally effective way to use infants as a nation-level political battle tool is to manufacture negative prototypes of infant well-being. The extraordinary emphasis in rural Indonesia on weighing, vaccinating, and monitoring infants *seems* to convey rights to participating indigenous peoples; yet, in the process, those peoples' rights are subsumed under the constraints of citizenship. Stannard (1991:383) describes a process of manipulating numbers such as "abnormal" growth; that is, numbers that often survive and thrive without substantiation, as the creation of "political mythology: a tale told. . .to legitimize or discredit a regime." Political mythmaking requires that a population demonstrate "elements of savagery," manifest through poor health and a "basic humanism" which allows that population to respond favorably to new ideas geared to reshaping practice (Thomas 1994). In eastern Indonesia, the myth is simple: the normal health status of indigenous infants is poor, and state medical care can improve it. The discourse from Indonesia reviewed in this dissertation strongly suggests that calling infant growth "abnormal" is anything but disinterested: on the contrary, development officials deliberately use the bland humanitarian mandate of "good health" to enable them to increase governance through the body over indigenous peoples who are both marginal

to the state and a potential political threat to it. When these images are deliberately managed so as to induce political conformity they attain both the status of a political myth and the infant a symbol that masks ideologies as it heightens moral authority.

Consistently, infants are the targets and the tools used to convey messages of national unity. If the outcomes were improved health, then perhaps there would be little to say. But my research shows that the semblance of services in fact masks non-intervention in a community within which one infant dies out of every four born and wherein birth control policies promote reduced birth rates while women do not even produce on average two live children over the course of their lives.

In local practice, not all Dani are involved in government run or sanctioned health care activities. Many women do not go to *posyandu* despite exhortations. Many more caretakers use clinic services prosaically for acute infant illness or to validate ideas they hold about spirits and diseases. They make use of services for their own gain. But in doing so they legitimize an alternate form of healing, one which may not always heal but one in which there is always a political outcome attached to the act of care-seeking. Biomedical models of infant growth are key terms in the "normalizing" discourse of international health (Bibeau 1997). This discourse used in conjunction with Indonesian state goals of controlling reproduction and reorganizing families works to diminish alternate cultural models of childcare and childrearing.

In the end, I leave you with the Dani infant growing up bound not by the traditions of the ancestors but immersed squarely in the middle of Indonesian political realities. Like it or not, the images of Dead Birds (Gardner 1964) and the classic tales from Heider's ethnographies (1970; 1988) are those of another era. As I recall the military barracks, the *surat jalan* (walking papers) I needed to leave the valley, the district mayor's circular driveway and satellite dish, and the image of someone I considered tolerant beating up a Dani youth for a trifle, I am reminded that the Dani live in a persistent climate of fear that colours their world. Children are growing up in the

political reality of Indonesia where they experience racial violence and an acute awareness of military authority. The gold mine in Tembagapura, 200 kilometers to the east, has been a site of unrest for the last two years and in the valley tourist traffic halts, the military presence increases, and small-scale tribal antagonisms are being treated more harshly than even three years ago. As Pemberton (1994) noted, terror becomes culture. Actions on the body of the Dani, as seemingly minimal as infant immunizations, should be seen as part of a broad strategy of containment in which promises of good health play a key political role.

The Dani keep a low profile. Men and women, I wager, will continue to make use of available curative services for their sick children; they will continue to subscribe to long-standing ideas about the kinds of knowledge that can be derived from an infant; and they will continue to engage in making newborns into social persons. They will also be cajoled and coerced into attending infant health programmes. As immigrants continue to pour into the valley, it may be that infants are being immunized for diseases they actually run some risk of catching. Infant mortality may drop, but I am not optimistic about the speed with which this may happen. Whatever happens, I am confident that overwhelmingly Dani adults will continue to hold reproduction as key to their personal and political prosperity. Babies will continue to be loved, wanted, nurtured, cherished, *and* contested, for Dani know in the end that infants are at the heart of the matter.