

SOMATIC SHOCKINGS ACROSS AILMENT NARRATIVES:  
LESSONS FROM THE SACRED GEOGRAPHIES OF AN  
INDIGENOUS SPIRIT-WORLD

LUKE KERNAN AND JORGE ANGEL-MIRA

ABSTRACT

Aboriginal Australian stories captivate listeners and express a unique worldview—each narrative manifests the applied wisdom of traditional understandings of illness embedded within local land and biology in confronting ailment *Dreamings*. These experiences warn adherents about how cultural illnesses infect the living land as they translate and signify through currencies of human suffering. This paper will explore how these ailment *Dreamings* can be further situated within cross-cultural dialogues, to responsibly temper understandings between anthropological theory and community-lead observances by implementing a combination of preliminary fieldwork data, auto-ethnographic reflection, and sources from the Wadeye region (NT, Australia).

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## AN INTRODUCTION: THE *DREAMTIME* OF ABORIGINAL AUSTRALIA

The Wadeye region in the Northern Territory is inhabited today by a diverse and resilient Aboriginal Australian demographic and it is one of the largest indigenous townships in the country. Recent estimates have cited a population of 2111, about 91 per cent of whom are Aboriginal (Australian Bureau of Statistics 2011a). The town lies ecologically within the limits of the coastal mangroves between Darwin and the Kimberley<sup>1</sup> and it is only accessible by road during the dry seasons. It is a central hub for many of the outstations, both near and far, within the township. The infrastructure of this key locality offers services such as food, transportation, medical, as well as governmental, administrative and recreational outlets to the local inhabitants. The area has a rich history of *Dreaming* story-work—that is to say, the extractive (colonial) practice to later revitalization efforts of fieldworkers, anthropologists, and linguists collecting traditional narratives in the field—traced back to long-standing community traditions, W. E. H. Stanner’s fieldwork (1979), and the local Kanamkek-Yile Ngala museum. Ailment narratives—which themselves are a type of localized, land-based story wherein illness strikes and becomes a central component to its narration—have been selectively documented throughout each as a facet of bush-life and culture. They reveal ecological knowledge relating the regions and sites that they describe. Holdaway and Allen confirm this in tandem with the dissemination of knowledge of stories by arguing that the issue of Aboriginal knowledge transfer—how it might theoretically work—between and within a land-centered spirituality and one’s practical experience of the world as interconnecting and relatable domains in the purchase of wisdom and ecological adaptability (2012: 81).

The Northern Territory has a strong Aboriginal Australian presence—26.8 per cent of the population identifies as Aboriginal (Australian Bureau of Statistics 2011b). Revisiting older stories of the *Dreaming*—a traditional cosmology based in Aboriginal Australian thought that speaks then and now of “a sacred, heroic time long ago when man and nature came to be as they are” (Stanner 1979:23)—provides a cultural connection to the land by clarifying people’s association to it through their clan repertoires. The *Dreaming* is a mythic charter, a worldview, a creation story, wherein

these stories, according to Malinowski, symbolically define the *present* in terms of how each cultural territory practices its ritual, on-site (creative) connection with the land as a sacred geography (1922). This focus on ailment narratives is then a natural extension of that worldview and spiritual-physical ecology. So, being based in Australia, these materials and formations of identity through narrative are indicative of how communities explore their intermeshed capacity to generate their ecological awareness of themselves on the land.

One of my greatest surprises working with the archival database of *Dreaming* stories at the Kanamkek-Yile Ngala museum in the Northern Territory of Wadeye was to learn that these accounts included encounters with illness. And that, these components of storytelling themselves were not only motifs, but vital aspects of local cultural representation and belief. Their details—the visceral, artistic, and verbal presentation of how illness strikes within one’s country—became much more salient, arresting even, as human suffering surfaces character-by-character. Each account gives a space for reflection, to become auto-ethnographically immersed and perhaps incorporated and subsumed into the land’s storytelling, Aboriginal Australian culture, and the *Dreamtime*. I wanted to know how ailments were related to *Dreaming* sites and the stories that used them as part of their pedagogy and stitch-work in a fabric of collective reality<sup>2</sup> (see Simeon 1980; McKnight 1981, 1982, and 2005; Reid 1983; Martin 2008; Schwarz 2010). The literature that I had surveyed on the North American continent was not as rich in either clueing me into these phenomena or giving field reports of ailment narratives—that is, cultural accounts of how illness becomes intermeshed within *Dreaming* sites and shifts one’s mobility and experience within these setting was not clear. Stories too are guarded and hard to come by as recorded texts—at least in a more exhaustive and formalized sense of a comparative canon and type. After that jolt wore off, I noticed, slowly, the clever design within the *Dreamtime* as what some anthropologists would identify as a cosmological totality that becomes creatively re-iterated by these case-specific assemblages (Mauss 2001:45-49; Tonkinson 1991:19; Ingold and Hallam 2007). As such, I tease out possible analytics for seeing how illness and its narration might be used to create reflexivity and an awareness of *a* reality. Ailments, from this collaborative framework, can be powerful tools of enculturation. These (tentative and ongoing)

interpretive lines can thereafter be discussed and verified by Aboriginal Australian interlocutors in developing an accountable praxis.

The approach in this ethnographic and creative article leans initially towards threading an interpretivist paradigm<sup>3</sup> that moves toward the possibility of external, emic validation from which cultural translation and community-based research takes place. Sustaining a community of practice around both indigenous and non-indigenous encounters with ailment *Dreamings* can suss out the lived richness of how meaning is constructed through illness and one's relation to the present living land. I endeavour to link with contemporary (neuro-phenomenological) theory and practice in socio-cultural anthropology, when dealing with initial interpretive workings of the source texts and field experiences. These insights are then not so much definitive-s, but rather placeholders in larger intercultural debates. This article describes my story-tracking efforts during my narrative fieldwork in Wadeye as an illustration of how living mythology, or *mythogenesis*<sup>4</sup>, operates, effectively validating the inclusion of symbolic interfaces in daily life and its ongoing struggles: humanity's search for meaning (Leenhardt 1979; Young 1983; Van Heekeren; Slotkin 2000). The underlying research question that fuels this literary and social analysis centers on the desire to know how both Aboriginal Australian and (outsider) fieldworker ailment narratives as living mythologies can at once illicit a need for, construct, and perform a fixed reality. I want to analytically follow how the concept of ailment narratives travels in these contexts by disseminating traditional knowledge and establishing a compositional framework for a reality, or a worldview, that assembles as ubiquitous and total<sup>5</sup> through these connections. Or even alternatively uncover how these interpretive lines can be problematic, disruptive.

I will briefly delve into existing ethnographic literature on ailment narratives and my own scholarly practice of creative and fieldwork methods to further situate this paper. Then, the first substantive section of the article will establish ailment narratives as pedagogical tools in Aboriginal Australian culture, emphasizing linguist Lys Ford's 2008 recording of an elder's Muwun 'Sore' story from the Kanamkek-Yile Ngala museum as a key example. The second will take Berndt and Berndt's Gunwinggu 'Cough' story from their

anthology, *The Speaking Land* (1994), in showing how this tool encodes and transmits insights about disease and cosmology, scrutinizing the manifest content of ailment narratives. Then I will bring both of these aspects together in exploring how ailment narratives might work as a living mythology by focusing on my auto-ethnographic ‘Midge’ story to illustrate how an embodied-subjective self internalizes reality during these break moments—when sickness as a socio-physiological disruption shifts one away from a naïve adherence of their surroundings and self-in-world relationality. I would too contend that ailment narratives shock self-awareness into human beings through these moments of lived suffering and alter their perception of a solidified existence, re-negotiating the parameters and peripheries of their worldview.

## LITERATURE REVIEW, A BRIEF HISTORY OF MYTH AND ILLNESS

The *Dreaming* or the *Dreamtime* describe basic conceptions of Aboriginal Australian belief; the term as it indicates is practiced, at times, via dreams and dreaming to connect communities with their ancestors and traditional lands—it has to do with telling a story about the “ongoing creation of the world and all that it contains” and how that reality translates and perpetuates into modern life (Morton 2005: 197). The stories of the *Dreamings* highlight an indigenous worldview, one concerning ancestral spirit beings and the formation of geological sites (see Hume 2004 for an etymology and overview of the *Dreaming* and its complex history as an ‘imperfect’ neologism). The *Dreaming* narrates a sacred, heroic time when both nature and humanity became created and practiced as they are—yet, it is beyond what Westerners think of as time and history, as it is and was an *everywhen*, an all-encompassing phenomenon (Stanner 1979). Tonkinson writes that these *Dreamings* are aboriginal cosmologies, which not only account for and present an origin of land, spiritual beings, and the vitality of life but constitute it as a totality of these bonds maintained through one’s embodiment and ritual in the daily order of life (1991:19).

These conceptions of the *Dreaming* speak of coming to terms with a living narrative, a world system at play, which should be foremost understood as the *Law*—in relation to how each *Dreaming* directs behaviour, relatedness, and enduring protocols for constituting life

within people's lands and family estates. Above all, the *Law*<sup>6</sup> is said to take precedence in one's daily (ongoing) experience, wherein each *Dreaming*, through series of shared stories, instills a specific set of laws and rituals to be practiced by regional Aboriginal Australian clans. These communities then formulate their ideas through symbols that translate into a living mythology that works its way into the patterns of life through myth and transforms the sets of practices that dictate personal and communal behaviour (Malinowski 1954:100). Myths can then be thought of as an element of narrative, a story, which comes to define, perhaps in part, the worldview of a people—guiding material and felt images that center meaning within the facts of life and instill an awareness of human capability and purpose in the universe (Murray 1968:355-356).

Myths work within images that are poetic and sensory; elders teach valuable lessons to future generations about how the world works through creative devices and, as such, the traditions of myth transmit the patterns of enculturation that underpin society, that of *the Dreamings* and *the Law* (Morphy 2005). These configurations of ailment narratives describe the ongoing relationship that Aboriginal Australians have with the natural world as well as their fears and anxieties that are attached to native conceptualizations of illness and disease from successive accounts of sickness on the Australian continent (Devanesen and Maher 2003, 2008; McKnight 1981, 1982). Myths of human suffering themselves are tools for understanding the complex configuration of health—and are of great interest to healers, physicians, and researchers with the goal of understanding lived experience and benefiting from the resulting empathy and self-reflexivity attached to persevering through pain.

Medical anthropologists of all theoretical schools are also concerned with both the causes and effects of human sickness. Illness and its relation with disease has been conceptualised in medical anthropology in various paradigmatic ways. Initially, illness, the subjective experience, was understood as separate from disease, the biological signs. However, within the interpretative theoretical framework of medical anthropology, illness and disease are themselves not mutually exclusive and therefore cannot be understood outside their cultural context. Illness is culturally constructed in how it is perceived, experienced, and treated; it is based on subjective explanations from specific cultural frameworks

and the meanings attributed to lived events within these systems. Disease, on the other hand, has been regarded by Singer and Baer as the biological objective signs of sickness (2007:65). Neither illness nor disease should be regarded as singular, disconnected entities. Both concepts are explanatory models arising from complex interrelated social and cultural frames of meaning (Kleinman 1978:252). Therefore, ailment narratives experienced by indigenous peoples of Wadeye and the Northern Territory become internalized through lived suffering, manifest into the spiritual-physical plane of reality, and ultimately alter the worldview of those who partake in the experience. As an explanatory model within medical anthropology, these ailment *Dreamings* are physically embodied as illness and conceptually formulated as disease (Singer and Baer 2007:86).

Within the interpretive theoretical orientation, there is a more fluid view of phenomena—letting emerge the perspective of psychosomatic<sup>7</sup> experiences. Illness as the subjective experience is present in both the mind and body as socio-cultural beliefs are learnt and shared between people. Gathering places are, furthermore, ritual sites where these beliefs are transferred and ingrained in the mindset(s) of those who gather to participate in the collective corroboree of sharing what is known about the observable world. Joint ecological wisdom is translated into story and myth to illustrate how disruptive moments of one's symptomology and senses can lead the body and mind to express illness and disease in individuals within these ailment narratives, or even anyone who might disregard their warnings therein by transgressing the Creative *Lawtime*.<sup>8</sup>

A consensus on disease can be difficult, even among professionals. According to Baer (1997), interpretive medical anthropology has documented various biomedical physicians reaching different conclusions about the same clinical condition. These interpretations of the cause of the disease can only be understood within the socio-cultural context of the sufferer. For this reason, cultural beliefs and symbols are relevant to understanding “how meaning and interpretive practices interact with social, psychological, and physiological processes to produce distinctive forms of illness and illness trajectories” (Good 1994:54).

The interpretative theoretical orientation suggests that disease is only knowable by sufferers and healers through a distinctive set of interpretative activities. These activities involve an interaction of biology, social practices, and culturally constituted frames of meaning (Kleinman, 1978:252). It is vital to acknowledge that the role of healers is to offer a meaningful explanation for illness and respond to individual, familial, and community-based issues surrounding illness—something that biomedical practitioners often tend to forego in the treatment of disease for profit and advancement. As this paper progresses, it will shed light on the lived manifestation of ailment *Dreamings* within the Wadeye region and the North. These narratives and local *Dreamings* become sound evidence for how the symbols of living mythologies manifest into the phenomenology of daily life as they internalize psychosomatic illnesses and diseases. If healers and doctors alike fail to distinguish and deal with the cultural domain of both illness and disease, they will likely have difficulty appropriately managing the disease and perhaps place their charge in peril for being ill equipped to provide an effective treatment.

#### A QUICK FORAY INTO (AUTO-ETHNOGRAPHIC) METHODS AND FIELDWORK

I was initially drawn to the Wadeye region for its distinct Aboriginal Australian population, its history of ethnographic research dating back to W. E. H. Stanner in 1932, and its research-archival infrastructure through the Kanamkek-Yile Ngala museum. All of these indicate socio-cultural resilience—traditional bush life and its belief systems of the North persisted and permuted to meet the demands of modern life, re-ascribing the patterns of living mythology. I began my ethnographic endeavour in furthering literary anthropology, ethno-poetry, and story revitalization by documenting how local cultural poetics permeated into expressions of daily life through the power of myth (see Robinson 1966; Rothenberg 1985). I began to see connections as I immersed myself in the phenomenology and experience of the land—eating up the details as I wrote my notes and field poetry, letting it seep in and alter my lived perception and being. I asked myself, “How can the visceral, animate streams of sensory detail and cultural poetics within the Wadeye region be channeled for story revitalization?” I wanted to know how myth operated as a living force in directing expressions of culture.



Wadeye's dry season provided a more accessible time and environment to conduct my preliminary fieldwork for four months in 2013, July to September, recording and documenting stories from elders and traditional owners with the Kanamkek-Yile Ngala museum and Mark Crocombe, its Cultural Coordinator. I tried my best to make myself a valued, dedicated asset to the community by volunteering my time and skills to the museum, the language centre, the school's literature and media production centre, and one of the regional authorities, Thamarrurr Regional Aboriginal Advisory Council (TRAAC). I was able to gain initial trust within the community as I worked alongside well-established community members. I conducted qualitative ethnographic research—placing myself within the participant-observant paradigm and journaling whatever seemed relevant to the field or topic.<sup>9</sup> The aim of this research was to clarify how people connected with *Dreaming* sites and stories, to remember and (re)create the oral histories that make this region rich. We joined Wadeye and Daly River clan members as they accessed lands and told stories to one another at these sites. Mark Crocombe and I had an extensive network of documented story locations as well through the work of Roland Robinson and other fieldworkers, and we planned to visit these sites to document how locals were reconstructing near-lost stories by tapping into the cultural poetics, sensory details, and geography of the area to reconstruct old stories—or tell new ones.

This article benefits from my fieldwork in the Northern Territory of Australia—helping me explore aspects of the ailment narrative experience. I am also not aware of many other publications that deal with illness and ailment narratives (as a type) in terms of its potential to disrupt and shock—certainly they are documented as texts that describe sickness all across the continent, but I am interested in further developing the creative bridgework into how the living, conscious agent of culture, the Aboriginal Australian, might internally process suffering. I am interested in primary experience and how the subjective-embodied self is transformed through the break moment(s), or rather the shock of suffering an ailment. I intend to contextualize, interpret, and theorize aspects of these narratives from the field and the Northern Territory with respect to myth and mythopoeic thought and critical medical anthropology. I want to use personal experiences of illness<sup>10</sup> to gain an in-depth picture of how

ailments affect the development and surety of reality by shocking its totality into the forefront of the human mind.

## SICKNESS WANDERS THROUGH LIVING DREAMS: THE PSYCHOSOMATIC CYCLE OF COSMOLOGY

### *The Tutelage of Suffering*

The elders, or clever men (*kirmarn*<sup>11</sup>), employ ailment narratives to instruct younger generations in the deep philosophical concepts and the phenomenology of the land handed down to them from their travels and descent, as well as from the original story-bearers, the Ancestor Beings of the *Dreamtime*. This system of belief in Wadeye and the North is a metaphysical construct that moves from its set continuity to the present in directing/assigning the world with values and destinies when orchestrating both social categorization and socialization/enculturation processes. The world setting and its stage is (re)cast according to these ideologies of the *Law*, the longstanding sequences of living mythology that course through embodied-subjective selves to coalesce and re-interpret the present moment of life and its artefacts. The stories and their associated ailment *Dreamings* instruct people within a particular worldview (one that is linked to Aboriginal Australian patterns of socialization and/or the event of trauma), but these narratives also begin to re-ascribe—even transform—people from a mundane/profane status to that of the sacred/taboo through restricted knowledge (Morphy 2005). The ideal time for this measure of tutelage is during one's upbringing and initiation into adulthood and eldership: the initiation rituals are similar to those conducted in the 1950s when they were first being documented by anthropologists (Stanner 1959, 1960a-b, 1961a-b, 1963, and 1979; Ivory 2009:129). These secret ceremonies have themselves included ritual scarification along with the lessons of pain, suffering, and difficulty to effectively encode the collective memory of the clan into the flesh and consciousness of the initiate. These events act in accordance with the directives of *mimesis*, *metonymy*, and *mnemonics*; that is, the symbolic framework of suffering experienced and taught through these stories (re)creates an inner microcosm of the *Dreamtime* through a likeness, substitution, and memory of the cultural relations that animate the moment and the scar.

Elders maintain strict control over narratives in Wadeye and the North given that they denote ownership, rights, and clan affiliation. The education of others becomes realized in instances where stories as cultural frameworks and interpretive rubrics become intelligible—where the embodied-subjective self translates lived struggle into purpose. These ailment narratives compress and encrypt the abstract in testing people’s awareness and connection with sacred geographies of the region; a multiplicity of meanings, embedded knowledge, is encoded into them so that their condensed abstract forms only become highly productive to those who have been culturally granted the cypher and its secret knowledge and sorcery (Morphy 2005:162-163; McKnight 2005:207-211). This secrecy is necessary. A spirit or an assassin will make short work of knowledge for ill effect on an unsuspecting victim by bending the *Law* within their *Dreaming* country: the presence of a *dillybag* with the right essence can cause all kinds of havoc from boils, sores, sicknesses that will not fade, to outright death (Reid 1983:41-44). Moreover, both sickness and suffering as storied events can make the world less abstract and more productive by revealing the codes present in the ailment *Dreamings* that render a greater understanding of the *Law* and provide practical knowledge about that area’s sacred geography. These interludes shock both empathy and perceptiveness by taking the embodied-subjective self out of reality to experience *communitas* with death, or rather confront decay, when shot in the thick of sickness (Turner 1974). The re-entry into wellbeing, I have intuited from the literature and my own story-work, strengthens the whole of reality as a totality and humanity’s socio-biological need for its continuance, and grants an individual the self-reflexive gift of contemplating his or her existence outside of its clutches as a non-entity, only held together by the sensation of agony. The lived perspective granted from an ailment narrative and the traumatic event of illness thus, according to Laughlin and Throop, unlocks the hidden aspects of reality and renders its subsequent parts truer in light of this revelation (2001:711).

The psychosomatic cycle of cosmology as a theory is an adaptation of Laughlin and Throop’s eidetic cosmological model (2001:722). They propose that stories and events as symbolic expressions have the power to change cosmic structures by (re)negotiating a lived reality that conforms to a totality and is myth-bound. I further these claims by examining how ailment narratives as a genre of myth

become entrenched within the North's ethos through recognized socio-cultural frameworks and the psychosomatization of illness. This highly generative and interpretative theory finds its caveat for how meaning is sowed from one domain to the next and completes the cycle of meaning; namely, that the lived experience of illness and suffering shocks the embodied-subjective self into accepting the definition and limitations of reality. This key mechanism illustrates why suffering is an exquisite teacher and engenders swift change. Traumatic memory bonds itself onto consciousness. Floyd Lirwi's 'Sore' *Dreaming* story in the Marri Tjevin language of the Wadeye region, recorded by Lys Ford, shows how powerful ailment narratives, as a tool of enculturation, are entrusted with safeguarding the *neurognosis*<sup>12</sup> of the *Law* into perpetuity. Here is the public and recorded version of this story from the Kanamkek-Yile Ngala museum that I retrieved in 2013:

This "Sore" 'Dreaming' belongs to brothers, Dumu, Wirirma and Manhdharrangu. The name of the place where he lives is really Natji. "Sore" 'Dreaming' used to live over there at Wudi Sjirridi. That Black Cockatoo lives at Wudi Sjirridi now, he chased "Sore" away from there. 'Hey!' Black Cockatoo said to him. In the old days, men used to go there. Two of my fathers used to camp there. "Sore" said to Black Cockatoo: 'We can't live together here.' 'This belongs to me now, it's my country!' Black Cockatoo told him. 'Get going! Clear off!' Black Cockatoo told him. Alright, "Sore" moved away. 'Ah! The creek!' said "Sore." The creek totem kept running high. "Sore" 'Dreaming' kept walking to the creek. This "Sore" 'Dreaming' kept walking to it. Alright, the rain kept pouring down. Manhdharrangu, my relation, kept walking but it was useless. He was covered with sores. He's here at the creek. He sat down and washed the blood off him. 'Ah! Sickness is weighing me down!' he said. 'I'll sit down at this 'Dreaming.'" He saw a good place. He stood up and then looked back at this creek. "Sore" said: 'It's finished, sickness is weighing me down now. I'll lie down here now.' He camped at Natji. This 'Dreaming,' "Sore" 'Dreaming' is still living there—one with the land itself. My fathers, Dumu and Manhdharrangu didn't go near him then. 'Ah!' my father told them both. 'Don't go over there, in case you get it. In case sore grabs you and never stops. I alone of the three brothers can feel him on your behalf. 'I'll make sweat for

you to protect you. It will go away without me doing anything.’ But I wasn’t born then, and I can go to the “Sore” ‘Dreaming’ completely safe. The thing lives at Natji. That’s the whole story.  
(Story retrieved in 2013, originally recorded by Lys Ford on the 8<sup>th</sup> August 2008)

The ‘Sore’ *Dreaming* recounts the mythic, troubled journey of Manhdharrangu in creating a songline from Wudi Sjirridi to Natji, settling at a creek site. The sores become a manifestation of sickness and later a bodily scar that demarcates the microcosm of the *Dreaming* site. The wound acts as a living text, one that becomes slowly imbued into existence by his all-too-human suffering, which forms an associative complex that re-iterates the symbolic precepts of the *Law*. This stitch-work triggers Manhdharrangu’s being as his sore-induced trauma activates his deep assemblages of culture. He remembers at that moment, his essence unites with the sacred geography of Natji—he lives there. The *mimesis* (the likeness of that expression to become, or the living performance of suffering), *metonymy* (the substitution, or stand-in, for how that ailment becomes a scar), and *mnemonics* (the memory of how that event transforms the sufferer) all work to connect Manhdharrangu with the microcosm in bringing him closer to the ‘Sore’ *Dreaming* at the creek. The shock of illness caused by thick and bloody sores (the physical manifestation of the effects of these ailment narratives) enables him to accept his fate and reality as an Ancestor Being, to join the land once again. The Natji ailment narrative stands as a powerful tool in teaching how land and biology interact in rendering the spiritual borders of territories<sup>13</sup>. Each opens in accordance to the sacred geographies and psychoscapes of the region—defining the ecological borders of the real and the tabooed. Further depth, ritual, and ceremony is added as well to the site over time in re-enacting the drama of illness.

#### *Illumination—Illness and Insight Manifest as One*

These experiences of “the sacred” encoded as ailment narratives and *Dreamings* across Aboriginal Australia express deep philosophical concepts (Malinowski 1954:100; Young 1983:14; Tonkinson 1991:19). These narratives work as symbols and relations<sup>14</sup> in unison with humanity’s cognitive architecture—and these texts-as-simulations tap into the access points of enculturation in rendering

insight into the world from the dense cosmological framework of the *Dreamtime* (see Marett 2000, 2005 on the integral process of ancestral illumination/inspiration and the accumulation of spiritual power). These patterns of thought become internalized from lived interactions into the *neurognosis*, etching lessons of the living land and illness as one flow of traditional wisdom; the sensory details of cultural poetics become animate, heightened—more generative, perceptible, and totalizing—at this given juncture in animating the present living mythology. The symbolic mapping of place via myth and ailment narratives is so powerful that the environment becomes radicalized, remythologized: the land itself no longer resembles an outsider's empirical, one-to-one experience of space and place (Langon 2005). Place does not simply exist as place, but rather as *a belonging* and *a psychoscape* upon which all the activities and the identities of the *Dreamtime* play out in perpetuity. By recognizing this interchange and heeding the warnings of their elders, Aboriginal Australians are able to render a wealth of knowledge about their surroundings (the vast system of local resources too) and their own selves in navigating sites and ailment *Dreamings* through dedicated, timeless lore alone. This connection provides a necessary wherewithal and corresponding map to navigate the socio-geographic identity of the North and its topical environments; each story connects story-bearers and initiates with the moral universe, further elucidating existing knowledge of the region compressed as cyphers inside known narratives within the greater cannon and ritual-complex of the *Dreaming* during ceremonies. And, although respecting the *Law* within each country and its territorial estate<sup>15</sup> may often come with ease, instances of illness only ever illustrate the mounting need to obey the wishes of the Ancestor Beings according to the inherent, indivisible logic by which they shaped and now guard Australia as a sanctuary and living entity<sup>16</sup>. Each traumatic event of suffering brings forth the world picture of the *Dreaming* story to explicate the phenomenon at present and soothe the pain-bearer with a semblance of peace and a call to purpose—to manifest myth as a mode of consciousness.

The thick, red dust of reality settles with its layers of manifest, socio-cultural content imbuing its cosmological structures as each telling of a story fills in what is perceptible and true in marking the character and depth of Aboriginal Australian life. The perplexity and paradigm here is that illness only makes sense in terms of a given cultural

framework (Kleinman 1978; Good 1994). As each mind interacts with the *Law* and physics differently, the experience of living myth and its resulting phenomenology vary in agreement with that interaction and its limitations. Reality becomes performed through these assembled totalities as they manifest the singularity of consciousness in terms of an allowable physics (Laughlin and Throop 2001:727-728)<sup>17</sup>. In short, cultural frameworks and their contents that are programmed into the neural network of an embodied-subjective self, influence—even co-create through *poesis*<sup>18</sup>—definition and causation in the world and ultimately, the lived experience filtered and directed by one’s worldview. Illumination locks in psychosomatic illness. Enculturation and ailment narratives co-create phenomena, manifest from the interactivity between environment, one’s consciousness, and the quantum sea, that produce perceptible shifts or changes in reality and, subsequently, shock its acceptance *as such* upon the event horizon of suffering. This specificity gives immense power to traditional sorcerers and healers, *kirrmarn*, as they understand the context of culture and likely the cure for illness and its unique socio-cultural manifestations. The literature often notes their control over their *Dreamings* with the power to cause and cure illness linked to their authority as story-bearers and lore-keepers (McKnight 2005:208-209). Direct knowledge of sickness and its cause, whether social or biological, is imperative in providing a feasible course of action as well as a positive prognosis; illumination and insight come with a connection of embodied-subjective self to sacred geography and its power to shift reality.

Nawararang’s ‘Cough’ *Dreaming*, as recorded by the Berndts from Western Arnhem Land in the Gunwinggu language, recounts the songline from ‘Bottle Rock’ to Mangaral-rindji (Berndt and Berndt 1994:61-62). The ailment narrative focuses on Manada, his sons (the Waranoidjagu), and his brothers. Their journey is perilous, and the son’s death-transformations populate the land with ‘Cough’ *Dreaming* sites. The singing of the Waranoidjagu cycle at Mangarangi possibly marks a ritual-complex and a large multi-clan initiation ceremony by the elders and song-men. These enculturation events immerse Aboriginal Australians into the lived totality of *Dreamtime* cosmology. These ritual activities create exchanges of *energy* that bind initiates and *kirrmarn* to the quantum sea and power, the currency of *the Dreamtime*, wherein internalized stories

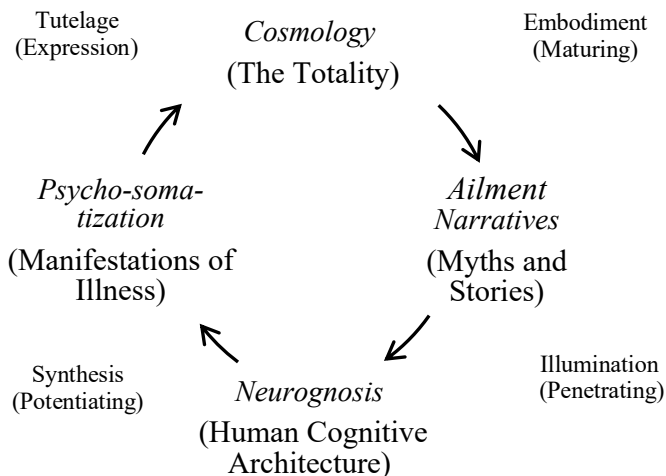
and art manipulate bio-states (Hume 2002:77-84). No doubt, the storied, poetic, and ritual narrations of Maung, Udjurulg, and Mandibin at initiation solidify the feverous conviction of the potency of ailment *Dreamings* as the Waranoidjagu become sick, and later become agents of that sickness and of contagious magic as facets of the living, speaking land. The result of tutelage, and later illumination, is an increased knowledge of sacred geography and how this unique etiology of disease becomes connected to the land at these sites; all of this direct wisdom traces back to a deep understanding of the science of bush-craft and life. This knowledge and its poetic re-telling became itself dangerous as illumination/insight manifests illness in the people of Mangarangi, and that illness resulted in a change in reality, that is, their acceptance of the *Law* in becoming hills and jungle trees in returning to the *Dreamtime* and instructive wards to trespassers<sup>19</sup>.

### *The Songlines of Sickness, Sweating Reality into Existence*

The intensity, magic, and mysticism of ailment narratives and *Dreamings* occurs with the subjective, phenomenological experience of suffering; and, in order to get a deeper register of that experience, I have had to explore my own consciousness as a theoretical model for how illness itself affects the cycling of culture and self-awareness. Part of this paradigm has been laid out by Laughlin and Throop (2001). My adaptation creatively utilizes the socio-cultural context of illness and its poetic narration to provide stronger, grounded mechanisms to describe and further the functionality and processes at work in rendering myth into a single reality, a word into a world. I propose that my fieldwork experiences are adequate in giving a glimpse into this phenomenon, and that this socio-cultural bridgework through auto-ethnography and field poetry will be generative in flushing out appropriate cross-cultural theories of illness. Figure 1 is a brief diagrammatic representation of how ailment narratives as stories (re)work cosmology according to the present living mythology and experiences of the embodied-subjective self. The continuity of the *Dreamtime*, or the *everywhen*, is maintained within this negative-feedback loop; the participation in culture results in real-life experiences being interpreted via a set cosmology, and thus this practice instantiates the cosmology in lived experiences to ratify the truth of people's systematic knowledge and worldview (Ricoeur 1962, 1968). Positive feedback is possible as the



direct experience of experts and clever men, *kirmarn*, create alterations and permutations within the ritual-mythopoetic construct of the *Dreamtime*.



*Figure 1: The Psychosomatic Cycle of Cosmology.* A culture’s cosmology, or total phenomenon of consciousness, is embedded in the narrative framework that gives rise to individual experiences and worldview formations. Stories and mythopoetic acts express a given cosmology as they tacitly penetrate the human cognitive architecture with insights and directives that illuminate the renderings and polyglossic simulations of consciousness. Neurognosis and deep thought, positive ruminations, develop the symbolic content and relations within ailment narratives by influencing the mind-body connection upon the event horizon of illness and subsequently reinforcing manifestations of illness with socio-cultural dimensions to a disease’s biological specificity, namely its etiology and prognosis. Through the course of a lifetime and the ongoing traumatic shock of suffering, the psyche and its constellation of neurognostic structures appropriate to the culture and environment as the embodied-subjective self internalizes the worldview formulation that provides it with self-reflexivity and self-awareness in understanding reality *as such*.

The receptivity of these cosmological systems—albeit conservative in orientation—should not be forgotten as the primary world-metaphor used to describe it is that of “life” and “living,” and the power of these systems to grow and adapt as living beings with the settings and circumstances of modernity shows great resilience and efforts of cultural revitalization in sustaining one of humanity’s

oldest belief systems and worldviews (Bowler et al. 2003; Tonkinson 1991). One can only assume that ailment narratives as a facet of socio-biological life have been a common—if not primary—driver in the formation of culture and the acceptance of a world-system, a reality *as such*, for as long as the phenomenology of illness has been at play in shocking, challenging the embodied-subjective self to have a spiritual reckoning with the indelible fact of its own existence.

One of my most intense ailment narratives from the field was my experience with midges, or sandflies, in the dry warmth of July. I was invited on a boating expedition by Mark Crocombe to Mairmull Creek to visit Cowboy's encampment, one of the elder's sites. I was not aware then that we would be passing sandfly *Dreaming* country (McCauley 2008:25). The little devils must have caught me for traversing along Sandfly Creek to Docherty Island without proper protection or *kirmarn* to ward them off. Contact with the site was enough for the contagious magic to work its potency on my flesh:

The warm crashing winds of Wadeye's sea-destined waters fell upon me, unaware of these invading angels as torrents of winged sandflies enveloped my sun-burnt skin. The enchanting mystery of the boat being hurled across the creek's surface like a seamless spear stabbing its mark. The silent prick and ravenous feeding, painless upon impact—a perfect crime, or punishment divine. Their butchery flawless. The sickness within my skin waiting to erupt. Night falls fast. The blight-blemishes awoke in waves across my skin fired with fever. The livid itch—oh, that itch—sending wicked screams through my nerves. That itch, that itch, that itch, *that* itch... What horrors haunted my restless 3-am turning, torment split into bloody fires and the searing cry of the land speaking to me. The insomnia breaking me and the borders of reality. A moment's respite in the sharp scraping of raw rosy scabies, pouring a yellowish puss. The trunks of my legs appeared as trees bleeding exquisite sap, living resin, streaming from every open pore. I wept for relief inside, perplexed and riddled with agony fired at the bottom of my spirit. I crashed, exhausted in the sadistic rapture of post-midnight suffering, sorrow-swept by a single conviction. Defeated then—death, its caustic spirit, my friend did wander through my living dreams. I bitterly clung to thoughts of a lover distant, without embrace,

until the storm of sickness past, and each night I was re-born into the soothing warmth of reality—more self-aware of my own need for its nurturing presence as I sweat it back into focus, fo(u)nd grounding.  
(Field poetry composition from fieldnotes, July 21<sup>st</sup> of 2013)<sup>20</sup>

Both indigenous and non-indigenous sympathized with my affliction<sup>21</sup>, and it is something that locals have become accustomed to in habituating within the tropical, Australian coastal regions. The body shock from the bites, sweltering inflammation, and bleeding amid the fever was enough to result in a noticeable change in my phenomenological experience of Wadeye. The ‘Midge’ ailment narrative as my own lived suffering created an imprint on my consciousness, a microcosm of the physical-psychological wounding event. The interplay between *mimesis*, *metonymy*, and *mnemonics* has effectively fused the lived trauma upon my psyche, so that every blemish visible on my flesh triggers a deep memory of the sandflies and their spurring of my own acceptance of reality by single-handedly breaking the feverish grip of insomnia—and finding rest. In fact, the increased empathy and sensitivity from my own suffering heightened my receptivity to sensory detail and the poetics of the land. A greater dialogue became present. Ailment narratives, myths, creativity, imagination—and dreams as well—are powerful tools in connecting one to the *Dreamtime* as a living cosmos, giving it birth, shape, and expression in the ethnomethodologically everyday and motions of life (Pentony 1961; Price-Williams and Gaines 1994). Dream and story cycles are ways of managing ongoing relationships with the symbolic orders of one’s worldview.

Indeed, and most gratefully, I garnered a greater acceptance for how both indigenous and non-indigenous people might form and establish connections to their existing geographies, one’s deeply symbolic and otherwise—especially the indwelling potential and liminality for synergy and syncretism to happen, explode even, in our grating ruptures of understanding, a bridging and blending between co-present worldviews. Granted, there is a vast difference between what one might deem as my ‘ecstatic’ field experiences and a fuller reckoning with Aboriginal ailment *Dreaming* practices—but perhaps not one that can be easily stricken as incommensurable to a more sustained inter-cultural exchange. The way I felt, became malleable

through sickness and stress, presented a budding affinity, an opening, and eagerness to absorb wisdom—to think differently about what I was experiencing through the teachings of indigenous and clan-based schemas for how one might rectify these living myths within me and others. I have so much to learn, that is clear. Years to sit and listen to how the Aboriginal inhabitants might guide me in these thoughts—to understand and intuit how they might feel, know their lands, beyond an interpretation. My fieldwork exposed me to a growing ecological consciousness within me and from my biological interactions with the living land of Australia—in the midges that bit me, the water I drank, and the bush tucker that I consumed as a guest to the Wadeye region. I had one surety, throughout, that I was happy to be present in existence and grateful for having recovered, reality-embracing and self-reflexive in that one act. Ailment narratives or *Dreamings*, I would propose, are primal forces not to be lightly reckoned with as they spur a stark acknowledgement of death, or its possibility beyond the impossible, and so, in reverse, affirm reality and existence. I can only fathom to continue this preliminary line of research, to see in what way Aboriginal philosophies can corroborate these claims, twist them, or fill in the messy blanks—offer insight to this ongoing inter-cultural dialogue of how only the living can face death. And that sometimes confrontations with death and suffering are necessary if we are ever to truly accept that we are real, embodied. If anything, anthropology confirms how we live with courage, achingly so.

## CONCLUSION

This ‘ever-in-progress’ article presents a (largely outsider) set of anthropological and auto-ethnographic interpretations of *Dreaming* ailment narratives which I collected in Wadeye and encountered throughout Aboriginal Australian literatures from the Northern Territory. I have thus implemented a cultural and neurophenomenological reading only—and only so much as—to initiate further discussion points with community members. The goal has always been to develop and hone my own inter-cultural insights here, so that I might become more prepared to engage and speak with local Wadeye and surrounding residents about their ailment narrative traditions within a subsequent research period. This article does not, in fact, try to render a ‘definitive’ or ‘axiomatic’ account about anyone’s ethnographic reality. The breadth of my first fieldwork visit was not capable of addressing this concern. Yet, I would encourage

more interdisciplinary, collaborative work on this topic in the near future<sup>22</sup>. John Mansfield, a socio-linguist, has done recent ethnographic research in Wadeye on Metal Mobs (2013), and in personal correspondences, we have talked about ailment narratives and sorcery in the township. Mansfield confirms that there are clear connections between ailments and cosmology in Wadeye and the North: “People interpret a lot of illnesses as being caused by black magic—others can be caused by totemic transgressions, but I hear that mentioned far less often. And people who have rights to certain totems have special abilities to cure related maladies” (personal communication, November 25, 2013). All the facets of life within Wadeye are coalescing to re-ground reality and of the consequences of illness within an inter-cultural and equally modern mosaic of thought. Also, as everything develops, and globalization increases in the area, generating an influx of non-indigenous people working in the township and the Northern Territory, there is definitely an important tangent to explore with how local Aboriginal inhabitants have been for some time incorporating and carefully tuning those practices into their assessment of ailment *Dreamings* (Steffensen and Colker 1982; Oliver 2013; Devanesen and Maher 2003, 2008). Sadly, that discussion was beyond the scope of this current article. And as the whole of these communities becomes more interconnected with their traditions and cultural improvisations, it is essential to keep in mind these ideologies and their epistemological understandings of the causes and effects of illnesses provide culturally relevant and safe methods of treatment. If not, even when aptly administering correct biomedical treatment for a given disease, these interventions may not cure it because the etiology of the disease, i.e. the ailment *Dreamings*, has not been addressed (Helman 2007:294-295). A great reverence for local culture is warranted here. There is a plethora of knowledge on the topic yet to be published, but the greater issue is respecting the cultural source and maintaining ethical, long-term relationships with our hosts and the living, speaking land that sustains us all. I cannot thank Mark Crocombe enough for getting me out on the land to soak in its cultural poetics and allowing me to meet the wonderful elders of Wadeye.

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<sup>1</sup> The Kimberley is a northernmost region of Western Australia by the Indian Ocean and the Timor Sea.

<sup>2</sup> The world-system of contemporary Aboriginal Australian communities including Wadeye is syncretic, combining both indigenous and non-

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indigenous thought, medicine, and practice when dealing with socio-biological manifestations of illness. (Oliver 2013)

<sup>3</sup> The interpretative approach for medical anthropology deals with finding a middle ground in explaining health and illness that is shaped by societal forces and emic viewpoints. In short, the interpretive model looks at how a sickness can be constituted (in part) as a social production. I explore then the possible social dimensions for how these narratives, through their depictions of illness, shock one into a reflection of their current moment and connection to the land (reality).

<sup>4</sup> Mythogenesis may be further unpacked as *mytho-* or “myth” and *-genesis* “creation,” to signify the artistic act of storytelling, along with the sets of meanings or cognitive patterns of expressive thought that animate live mythological and cultural worldviews. These creative acts, emanating from the human mindset of myth-making and mythogenesis, animate the social realities of living mythology present in people’s lives and create charters of being (Malinowski 1992:326).

<sup>5</sup> The idea that *Dreamtime* can be a total phenomenon (as in provide a complete explanation and map for daily and ritual life) does not exclude it from syncretic interaction and integration with other worldview sets—i.e. that of Western bio-medical science or Christianity. In fact, it is often the case that local perspectives rely on polyglossic immersion to interpret events.

<sup>6</sup> The *Law* or *Creative Lawtime* is often used as a synonym for the *Dreamtime* by some authors like Erich Kolig in *Dreamtime Politics: Religion, World View, and Utopian Thought in Australian Aboriginal Society* (1989). Here, I mean to emphasize that the practice of each *Dreaming* has a grander set of laws defined by a practicing socio-cultural area, or territory, and then specific cultural protocol for each *Dreaming* site.

<sup>7</sup> This paper looks at illness as being influenced by one’s cultural and psychological interaction with the body emplaced in a living ecology. The term “psychosomatic” then relates to the interaction of the mind and body and these elements in a greater set of relations within one’s physical setting—such that there are multiple agencies for how illness might manifest.

<sup>8</sup> The *Creative Lawtime* is synonymous to the *Dreaming* or the *Dreamtime*, which is the system of traditional belief in Aboriginal Australian society that centres on the connection to Ancestor Beings and the formation of the world according to that cosmology. The *Creative Lawtime* is also shortened to the *Law*, which governs all of creation and without it nothing would exist. Each *Dreaming* is ruled by the *Law* or sets of metaphysical rules for how the universe operates. Each Aboriginal Australian language may have a unique way of referring to these sets of concepts.

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<sup>9</sup> I was able to produce 106 pages of detailed, thick descriptions in small and dense handwriting, and I obtained almost a terabyte of digital data from the museum as well. I participated in many informal story recordings and interviews—even conducted some of my own set up through my network and connections. I supplemented my work with photography and media to fill in the context and jog memory of places and people.

<sup>10</sup> I have decided to include my own auto-ethnographic experience for this exploration of ailment narratives in order to empathetically theorize from an introspective standpoint as well as have greater access to a subjective-embodied self's experience of consciousness in the throes of sickness.

<sup>11</sup> *Kirrman* or *kirmarn* in Murrinh-Patha, the lingua franca for the Wadey township, translates as “thinking man,” “man who finds out,” or “clever man.” This term is understood as anyone who qualifies as a leader of the ceremony, or a knowledgeable person of *Law*.

<sup>12</sup> *Neurognosis* refers to the insight of the human cognitive architecture created in terms of the images, senses, and meanings that amalgamate from pre-cognitive awareness and experience to consciousness.

<sup>13</sup> Various ethnographic sources on sorcery and illness have noted that trespassing into another territory or *Dreaming* can have detrimental effects to one's health—the breaking of a taboo places one at risk from physical retribution, or payback, from both the profane and spirit worlds (Reid 1983; McKnight 1981, 1982, 2005; Martin 2008).

<sup>14</sup> Relations are identifiable clusters of information—organized from the simplest units of sensory data, images, feelings, and meaning—that are then rendered into the building blocks of thought, consciousness, and worldview. A relation would be ‘self-to-world’ and the content that fills that expression's identity as a relation in being a functional unit in the cognitive apparatus of a given worldview. Relations build both symbols and *mythemes*, the essential kernels of myth, in the human mind processing the world and lived experience. A *mytheme*, in other words, represents the smallest contrastive unit which may bring about a change of meaning in a myth, and clusters of *mythemes* combine together in forming the surface representations of a myth.

<sup>15</sup> An estate is a tract of land representing a traditional area owned by an Aboriginal Australian clan—often populated with various *Dreaming* sites important to that clan and family.

<sup>16</sup> The Australian continent is often depicted as a living entity in Aboriginal Australian thought and cosmology (see Mowaljarlai 2005). The artwork *Corpus Australis* illustrates this (Dussart, and H. Morphy 2005). It would also follow that if land is living—as a fused-extension of the Ancestor Beings and their sacred essence(s)—then it would also reason that these entities can become sick. In fact, many of the geographies become contagious with illness and spread it to the living.

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<sup>17</sup> This textual reference is referring to how neurocognitive processes and consciousness interact with and influence each other—that human sociobiology affects the nature of reality and physics, especially in relation to the term, *quantum sea*, as the underlying structure of “zero-point” energy that permeates the universe—a quantum sea, as it were, and a point of fluctuation for physics that is manipulated by perceptual and cultural constructs (Puthoff 1990).

<sup>18</sup> The term *poesis* is the Greek word for the skill of art (essentially, poetry), and it literally means to “make” or to “formulate.” *Poesis* also comprises the substantive materials of art—both the experience and the sustenance, poetic details—that enables a myth, or *mythos*-as-world, to last in the mind of an embodied-subjective self simulating Aboriginal Australian cosmology.

<sup>19</sup> Only the two brothers of Manada survive to ardently prevent others from coming in contact with the trees of the dead and their sickness. The brothers become transformed themselves spirit-guardians of the ailment *Dreaming*, whom shocked by empathy and the deep register of suffering in others as an impetus to accept their worldview and role as key *Dreamtime* figures.

<sup>20</sup> The analogy here to trees is deliberate and apt. It is possible as sickness transfigures the body that Aboriginal Australians saw this part of the human body’s way of returning to the living land as an Ancestor Being fused with the landscape and sacred geography at a *Dreaming* site.

<sup>21</sup> Western biomedicine was not all that effective in quelling the affliction. In fact, I found local advice to be more reassuring and helpful in dealing with this temporary yet intense condition.

<sup>22</sup> There is much that needs to be filled in, saturated and documented, in terms of a more exhaustive, grounded exploration of myth and ailment narratives, especially as culture continues to shift in terms of its models of medicine and cosmology in Aboriginal Australian communities (see Baer 1996; Devanesen and Maher 2003, 2008; Oliver 2013). Researchers, organizations, and stakeholders might then benefit in the North if they all band together in sharing data sets and resources to (re)work budding theoretical pictures as they develop and to navigate the phenomenology of myth in understanding core culture. True to this ethos, cross-disciplinary research collaboratives often form together in the region—such as the Murriny Patha Song Project, or even the Wadeye Aboriginal Languages Centre—to complete specific tasks or further long-term goals. I have met many academic contacts in the region, and I would be glad to combine efforts in documenting Aboriginal Australian histories.



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