Warrior Women, the Holy Spirit and HIV/AIDS in Rural Papua New Guinea

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ABSTRACT

This article analyses a group of Gogodala Christian women in the Western Province of Papua New Guinea who are referred to as 'Warrior women' and who pray, sing and call upon the Holy Spirit to cleanse their own bodies and 'turn their eyes', so that they are able to see those who threaten the health and well-being of the wider community. These women have focused primarily on bringing male practitioners of magic - iwai dala - shadowy and powerful men who operate covertly and away from the gaze of others, out into the open. Whilst this has been happening for many years, the spread of HIV and AIDS into the area, fuelled by what many in the area believe is the rise of unrestrained female and male sexuality and the waning of Christian practice and principles, has meant that those perceived to bring harm to the community through their sexual behaviour have become recent targets for Warrior women. HIV/AIDS, referred to in Gogodala as melesene bininapa gite tila gi – the 'sickness without medicine' - is understood as a hidden sickness, one that makes its way through the community without trace until people become visibly ill. Warrior women seek to make both AIDS and those who, through their behaviour, encourage or enable its spread more visible. In the process, however, a small number of them are overcome by the Holy Spirit, so much so that they become *daeledaelenapa* – mad - their behaviour increasingly characterised by childishness and uncontrolled sexuality.

Key words: gender, landscape, Christianity, madness, HIV/AIDS, Papua New Guinea.

INTRODUCTION

In late 2004, early in the morning in Balimo town, Western Province, Papua New Guinea, a group of well-dressed women walked along the main street. They were alternately singing and praying in loud voices, and marching with great purpose. As they neared the entrance to Buila Mission Station, now the property and concern of the Evangelical Church of Papua New Guinea (ECPNG) and populated primarily by teachers, nurses and other health officials of the District, they saw a young woman quietly leaving by one of the gates. She was carrying a small plastic bag in her hand. The group of women, assuming that the girl's bag was filled with rice, tea and sugar from the trade-store, immediately called out to her, demanding that she explain her presence at Buila Station at this time in the morning. The young woman, grasping her plastic bag, ran off in the direction of Balimo village. The group of women, many of whom were much older, took off after her, yelling for her to stop. The girl kept running and was soon out of sight. The group of women, out of breath, responded to the call of one of the most senior women, who told them to leave the girl alone. With much shaking of the head and grumbling, the women regrouped and resumed their march down the main street of Balimo, raising their voices in unison in a Christian hymn of praise.

Although this incident was described to me with much laughter by one of the women present at it, in explanation for noise I heard early one morning whilst staying in a house at Buila in late 2004, its message was serious. The woman, a prominent, educated and much respected member of the Church and the Balimo Health Centre, explained that the women, referred to in English as 'Warrior women', were part of a 'Prayer Warrior Group'. Prayer Warrior Groups have become fairly common among Gogodala communities since the 1980s. They consist of fellowships of women who, touched by the power of the Holy Spirit, are able to 'see' more clearly than those who have not been so touched. In particular, these women have the capacity to identify those who contravene the tenets of the Holy Spirit and a Christian *ela gi* or 'lifestyle'. Prayer Warrior Groups are pan-denominational, and each local Church may have women touched by the Holy Spirit. These groups act in concert to locate persons and forces within the community who pose some kind of threat to the health and well-being of others. They also participate in healing, using prayer and 'laying on hands' during illness or birthing, and have become a common sight in the labour ward of Balimo Health Centre (BHC). As has been noted throughout PNG, divination, healing and the laying on of hands are common activities of those touched by the Holy Spirit (see for example Fergie 1977; Jojoga 1977; Rvan 1969; Robbins 1998, 2004).

Until recently, these women focused largely on the threat of *iwai dala* - men versed in the use and powers of magic and sorcery. Thus they would systematically identify *iwai dala* in the village, naming men as prominent as the Deacon or Pastor of the village Church. More recently, however, with an increasing societal awareness of the spread of HIV and AIDS into the area, Warrior women have began to target those who are seen to bring harm to the community through their sexual behaviour and/or HIV status. AIDS is referred to in Gogodala as *melesene bininapa gite tila gi* or literally, 'the sickness that has no medicine' or, simply, as AIDS in English. There is no distinction drawn between HIV and AIDS in local understandings of this sickness. As Eves (2003:253) argues for the Lelet of New Ireland, Gogodala conceive of HIV and AIDS as one entity. At this stage, despite some, albeit limited, awareness campaigns and work by staff at the Balimo Health Centre and the Department of Health, knowledge about either HIV or AIDS is largely speculative and experiential. Much communal speculation focuses on both the hidden nature of HIV/AIDS. at least until advanced stages of the condition, and the absence of an effective medicine or cure for it. The term used in Gogodala for sickness, gite tila gi, focuses on the moment that ill health becomes apparent to others: people gauge the health of a person by their appearance and actions. HIV then, presents a conundrum, as those infected do not necessarily act or appear transformed in ways characteristic of other sicknesses. In their experience, it is only during the latter stages that AIDS becomes visible, when patients lose weight, become listless and their skin becomes dry and loose.

The very nature of AIDS or *melesene bibinapa gite tila gi*, then, is its ability to deceive: for it is secretive, operating outside the bounds of the visible. If HIV/AIDS is understood this way, so too, increasingly, are those infected with HIV: for they are seen to act outside the moral domain – they generate and spread sickness through illicit sexual behaviour often conducted in a secretive fashion. Thus, like practitioners of *iwai* or magic, and other powerful and shadowy creatures referred to as *ila dala* or 'fire-bottom men', those with HIV are believed to move around at night away from the eyes and ears of the community, or whilst away in other parts of the country while engaged in paid employment. It is not necessarily surprising, then, that Warrior women have come increasingly to patrol the areas of Balimo town and village perceived to be the grounds of those engaging in illicit sexual relationships. Women, in particular, have been targeted as their movements during the night or in the early hours of the morning are, by their very nature, suspicious.

Thus, the young woman sneaking out of Buila Station in the early hours of the morning became an immediate figure of suspicion for the Warrior women patrolling the streets of Balimo. This fellowship group immediately assumed that she was engaging in some kind of surreptitious sexual adventure, that perhaps she was even *pamuku meri* – a sex worker or woman who exchanges sexual services for goods or tradestore foods. That she carried a plastic bag, which these older women assumed to hold rice, tinned fish and maybe tea and sugar, only seemed to confirm her guilt. Thus they sought not only to shame this young woman, and possibly her partner, but also, more importantly, bring such sexual liaisons into the public gaze – and thus make them socially accountable. Warrior women, then, seek to reclaim the night, and its illicit and invisible sexual possibilities from those who by their behaviour are seen to place the rest of the community in danger of contracting HIV/AIDS.

WARRIOR WOMEN

Prayer Warrior Groups have existed in the Gogodala area since the late 1970s and early 1980s, during which time Gogodala men and women began to experience 'revivals' in village Churches (see also Jebens 2005; Robbins 1998, 2004; Tuzin 1997). For the Gogodala, the notion of revival derives from the Biblical section of the Pentecost, which involved the descent of the Holy Spirit, referred to in Gogodala as Kamalite Alaete or Awana Limo, to earth and the transfer of it into human bodies, which resulted in practices like 'speaking in tongues'. This process is referred to in Gogodala as *awana limote paeyana gi* – literally, the 'coming of the Holy Spirit'. Initially, any man or woman in the Church could be entered by the Holy Spirit during these revivals. In many of these cases, the Holy Spirit descended with some violence, resulting in wild dance-like movements, the afflicted thrashing around until they fell down unconscious. For most, this was the point at which the Holy Spirit then left the person's body, having expunged the 'sins' of the recipient.

In one such documented case in 1982 at Wasua station on the Fly River, during a Pastor's convention, the Pastors were called to attend nearby Tete village to help those experiencing a revival. Pat Christon, an APCM missionary wrote:

The clanging of the morning prayer bell woke us before daybreak. Soon a low hum spread through the village. It was the Christians praying in unison as is often their custom. Since the revival started at Easter this has become part of life at Wasua and in those villages where new life has come. The day begins and ends with God...Some people had experienced physical coldness in their feet and spreading up their body till they shivered from head to foot. This was accompanied by an overwhelming conviction of sin. When this was confessed their body returned to normal temperature and joy came with the consciousness of sins forgiven (Christon, September 1982:12).

The revival spread to Wasua and Dede, then up the Fly River to Baidowa, where villagers reported 'visions of a stairway leading up to an open door in heaven from which a light streamed down to earth'. At Wasua, one evening, 'the whole inside of the church roof was lit with stars' (ibid:12).

Joel Robbins (1998:311) has noted similar events among the Urapmin of East Sanduan Province, where there are communally organised 'Holy Spirit discos', which, he argues, are 'group possession dances' held in church buildings. He writes:

[m]ale and female dancers begin by jumping up and down and moving in a circle to the rhythm of Christian songs sung by women. This stage of the proceedings is called 'pulling the [Holy] spirit' (*pulim spirit*). Eventually, in a successful spirit disco, some people will 'get the spirit' (*kisim spirit*) and begin to shake and flail violently, careening around the dance floor without regard for others or the circular pattern of the dancing...After an hour or more of possession, a person will finally lose the spirit and collapse, limp and radiant, on what is left of the Church floor (Robbins 1998:311).

For the Urapmin, dancing with the Holy Spirit makes sinful bodies 'light', rid of the sin that renders them 'heavy' (Robbins 1998:311).

Gogodala refer to the kind of dancing that brings down the Holy Spirit in English as 'Holy Spirit disco'. Holy Spirit disco is not sanctioned in the ECPNG Church, despite its presence in many services. There is some question whether it is actually the Holy Spirit who descends or a 'lying spirit' attracted by the noise and the music, as many ECPNG members argue that the Holy Spirit is 'quiet'. Most feel, however, that Holy Spirit dancing, like *owama gi*, a dance associated with women that revolves around the praise and celebration of their kinfolk, is based on feelings that are impossible to control. One woman suggested that a woman dancing *owama gi* 'can't help herself; she [will] just go out there and do her styles. [It is] just like when you get Holy Spirit revival. She's gone mad, she can't help herself - you've got into that kind of joyous movement.' They may also experience 'Holy Spirit laughter', which is manifest as a loud continuous laugh and is said to be the result of angels 'poking their sides'.

Although many participated in these early revivals, and still do to a more limited extent now in various denominations throughout the Gogodala area, increasingly women have become the focus of these events. Touched by the Holy Spirit, 'their eves turn' and they are transformed and exhibit memories and knowledge of events they could not otherwise have known similar in ways to the knowledge gained by *iwai dala* when communicating with the beings of landscape. When filled with the Holy Spirit, these women become kamalite alaedaena ato - 'women of the Holy Spirit', who can lay their hands on the sick, pray over and thus heal them: importantly, they can also see 'the truth', and other things hidden from the community (cf. Tuzin 1997). In this context, their eyes often turn towards men in the village or community - men referred to as *iwai dala* and *ila dala*; men of magic and great power. These men are often senior members of the community, renowned for their knowledge of ancestral events and significance, names and land claims, as well as respected members of the Church. In some cases, men as prominent as pastors and deacons of village Churches have been identified as iwai dala. Tuzin (1997) traces similar activities between women touched by the Holy Spirit - tok profet - and men amongst the Arapesh-speaking village of Ilahita in East Sepik Province. These female 'prophets' received messages from the Holy Spirit 'which revealed misconduct or breaches of faith and charged the perpetrators, who were nearly always men, to confess their crimes'. Among the Gogodala, particularly in the past, practitioners of magic or sorcery, such as *iwai* or *ila dala*, were men of great power and status; their reputation and knowledge upheld the village community in times of warfare and illness. For these men could communicate with the force that animated the landscape – ugu (Dundon 2002, 2005). Ugu could take many forms – people, crocodiles and other animals, trees and otherwise inanimate objects like canoes as well as ghosts or gubali and other spirit forms. The word iwai derives from the capacity of these men to travel by *limo* 'spirit' to talk to ugu, whether to assist those suffering from illness caused by ugu or to communicate with a village ugu about impending threats of warfare or disease. In those days, *ugu* was everywhere, an implicit part of the local environment. When people disposed of water or food through the window of their house, they would call out wame gale, 'move out of the way' or 'excuse me' to the ugu present under the window. Offences caused to ugu were a major source of illness, and *iwai dala* mediated between these powerful spirits and their human inhabitants, seeking to mitigate the anger of scorned or offended ugu.

Since the arrival of resident, evangelical missionaries from Australia and the United Kingdom in the 1930s, the establishment of several mission stations and a local (and later national) Church in the area, the ECPNG, the veracity of *iwai dala* and *ugu*, amongst other things, has been challenged in many ways. *Ugu* were labeled 'evil or lying spirits' - *sosowena limo* – and thus the men who communicated with them were perceived as threatening, their knowledge derided as secretive and dangerous rather than protective. Nowadays, men do not admit to having the capacity to talk to or see *ugu*. Even those with considerable knowledge of ancestral events and narratives, men known as 'traditional healers', shy away from the term *iwai*. In the present, then, *iwai dala* are shadowy figures, men who, quite literally, travel by night and operate their powers under the cover of darkness or in the bush. The identity of *iwai* are the source of much speculation in the village, particularly during times of drought or illness.

Women touched by the Holy Spirit during revivals are able to see the identities of these *iwai dala.* In one example, in 1998, women in Kini village near Balimo were experiencing a series of revivals; the women touched by the Holy Spirit were laying their hands on the ill and suffering, healing and cleansing the village of threatening forces. A village some distance away was suffering internal wrangling between the Pastor of the ECPNG Church and a very influential man in the village. Some of the Church members from this second village invited the women from Kini to visit their Church and share a service with them. This they did and, during the service, a young Kini woman experienced the touch of the Holy Spirit. Her 'eyes turned' and she began to speak, naming the man whose conflict with the Pastor was causing a strain in the village as *iwai dalagi*. She called upon this man, who was not present at the service, to come to the Church, confess and forgive the Pastor. The man, who was sitting outside the Church on the steps of his house, at first refused to attend the Church but was soon convinced and entered to shake hands with the Pastor. The conflict between them was ended, for some time at least.

Prayer Warrior Groups are called upon in other contexts to pray and lay hands on the sick and suffering. Warrior women may help women in troubled pregnancies and those experiencing difficulties in labour. The ECPNG Fellowship group from the Church nearest the Balimo Health Centre, the site of the antenatal and labour wards, is a group of women who also work in the health centre, some as nursing sisters and health officials. As in many areas in PNG, these women provide both medical and spiritual advice and comfort to their patients. The overwhelming majority of the BHC nursing staff are committed Christians, many of whom were medically trained at a mission nursing school established in Balimo in the 1960s. As I have suggested elsewhere, in Balimo as in many hospitals and health centres around the country, biomedical healing techniques and medicines have been conflated with Christian values and practices (cf. Dundon 2005a). BHC's success in birthing, with a record of few emergency procedures and a general lack of pain relief used by birthing women, has in many ways been attributed to the work of this Warrior group.

Prayer Warrior Groups arise in differing social contexts, either in the village churches or in urbanized centres like Balimo. In the latter, prayer groups may be dominated by educated women, often older and more established in their marriage, clan and perhaps occupation, many of whom are teachers, nursing sisters and matrons, health or education officials and service providers. This is the case for the group of Warrior women mentioned at the beginning of the paper. Village fellowships, however, are usually made up of village women, primarily subsistence cultivators and carers of children and extended families. Prayer Warrior Groups attract women of all ages and at differing stages in their lives: from grandmothers with children and grandchildren to single girls barely out of their teens, all of whom can be touched by the Holy Spirit, once or many times. After the initial euphoria of the revival and the descent of the Holy Spirit, their eyes 'turn' and they can see clearly forces and persons who pose a threat to the community. This clarity is usually short-lived and in the majority of cases, after a period of revival, a woman returns to her normal state and resumes life much as before although, as a woman touched or marked by the Holy Spirit, she is prone to the same kind of experience over and over again. For these women, the power of God and touch of the Holy Spirit is actively sought. Thus such women have taken to practices, referred to as *awana gi*, previously associated with male practitioners of magic and sorcery, iwai dala. In particular, Warrior women often practise sexual abstinence, sometimes over long periods of time, to enable and encourage the flow of the Holy Spirit into their bodies. Such practices have caused deep concern among some prominent missionaries

and Church leaders, so much so that they have counseled these women to desist from such abstinence; one missionary arguing that sexual relations between married persons was central to a Christian lifestyle. A significant number of Warrior women suffer from quite public marital discord and some have become victims of regular domestic violence as a result of following the stringent requirements of *awana gi*.¹ Nonetheless, they continue to be a source of much comfort for many members of the village or town and are called upon to bring the clarity and healing of God to various situations.

AIDS AND THE SMELL OF SEX

Prayer Warrior Groups have recently taken a role in an unofficial campaign against the influx and spread of the relatively recent sickness of HIV and AIDS, *melesene bininapa gite tila gi*, literally 'the sickness without medicine/ cure'. Women touched by the Holy Spirit have begun to turn the clarity of their gaze upon those who hide their sexual behaviour and thus place others in the community at risk. Although this was only beginning to happen in 2003-4 and seems restricted to cases where women or men can be found wandering around at night, it has been initiated in response to a general community-wide concern that this kind of furtive behaviour is responsible for the spread of AIDS throughout the towns and villages of the area.

The Gogodala term for sickness – gite tila gi – is based on the understanding that, 'when you are sick, you are not a normal person. The way you look and things [that you do] are totally different from [a] normal person'. People observe the changes in others, noting their skin tone and hair, behaviour and levels of activity, and pose questions to them like: ae gite tila gi ematata – 'are you sick? The way that you look is different'. Thus sickness is a very public and visible state of being – it is socially recognized through the practices and appearance of the ill person. The determination of which sickness assails the person is also based on their appearance, each having a set of characteristics and effects evident in the appearance of the patient or, in English, 'victim' - gite tiladaenapa lumagi. People fall sick as a result of inappropriate behaviour, the anger of human and non-human agents like ugu or God, sorcery and magic, or the ingestion of bad meat or water. In the past, health waned in an individual, family or community when sickness – likened to a person – came upon them. Sickness could be invited into a village through the careless call of a child or the behaviour of an unthinking adult. Two elderly women, who remembered the coming of the first missionaries and could compare their own experiences with those of their parent's and grandparent's generation, recalled that their 'fathers and mothers used to tell us in those days there used to be a sickness [which] looked like a human being and they have strings attached to their bodies. It [sickness] is like a person, strings attached to heads, bodies, legs [and] arms'. The sickness would then descend upon a village.

You know this village here. So, on that other side [of the village], sickness will come and call out to the people '*luma*' [people]. We knew it when we were growing up [and they pointed out that their parents would not allow them to go to that place as children]. And then, whenever people hear this voice [calling] '*luma*', [people] ladies will gather up all their children and make sure that they are not lying around [they will] hold them. At the same time, nobody is allowed to make any noise – you can't reply. And those people who don't know about the thing [sickness] will make a noise in this village. And this person, this sickness will come straight into the village and everybody is in for a hard time. Or even if someone replied back to that sickness, then that sickness will come straight to that village or that person and go inside that house [longhouse]. So those longhouses were very dangerous at that time.

Although sickness is not always personified now as in the past, it is still believed to arise when a 'rule' or *babala* is broken or ignored whether the result of ignorance or intention. *Babala* mediate the relationship between the beings of the living landscape and human beings, and were established before the coming of the first ancestors or *iniwa luma*. Such rules govern the practices of hunting and gardening, fishing and sago-making, collecting water and firewood. Sickness continues to be understood as a manifestation of a problem between people and the beings of the environment (cf. Dundon 2006). In the old days particularly, before the arrival of the white missionaries and the establishment of Christian missions with attendant health services and facilities, sickness was a punishment meted out to the person, family or village as a result of their ignorance or shame. It was not considered contagious in the way that people now understand the term and did not move from one person to another unless that person had also contravened the rules of the land or water or swamp over which they had moved.

These understandings of sickness, its causes and transmission, are central to Gogodala perceptions of HIV/AIDS - the sickness that has no cure or medicine. The symptoms or signs of HIV/AIDS, gite tila gi aenaemi aenaemi, which literally locate its effects on and in the afflicted body, include a significant loss of weight, sores on the body, the darkening of the skin and loss of hair from the head, as well as chronic diarrhea. These symptoms are followed, inevitably, by death, thus distinguishing AIDS from other forms of sickness – as one person in late 2004 suggested: 'before this type of sickness, they [the patients] would last for a period [and then get better]. [In the case of AIDS], he or she automatically dies'. Gogodala understandings of *melesene bininapa gite tila gi* relate primarily to the onset of AIDS, rather than infection with HIV. For Gogodala, there is no distinction between a virus or pathogen and the sickness that results from or is associated with it. In general terms, then, there is little genuine understanding of the nature of HIV and AIDS or that of transmission routes of those with both HIV and AIDS. Even those in Balimo town who have access to the Health Centre's information and preventative programs and are aware of the sexual transmission of HIV, are confused about their role in preventing the spread of it throughout the community, given that those with HIV are initially physically unchanged by their infection. A Councillor for Balimo, who was one of the organizers of a series of workshops on HIV and women's health in several villages throughout the area in the late 1990s, pointed out that:

The only way is to [have sexual] contact – body contact. That's when you will get the AIDS. But people are really scared and they run away from, you know, when they see that AIDS person, they are running away. Yeah, that's right, talking, then they are talking to each other – [they believe] that is passing it [AIDS] on; kissing it too is passing it, brushing teeth too is passing it; like when you cut your hand and then [we tell them] no. The only way to contract [HIV] is body contact and then you get AIDS. You can avoid it. And that's my understanding, that's what we been explaining to them but still they are really scared because they say that its [death] - [there is] no medicine, its death, straight – no life, that's why they get scared. It's a no medicine, no cure for it and that is why people are scared.

She continued, arguing that the fear of AIDS related specifically to the fact that those with HIV are not visible to others in the community. She pointed out that 'they don't know the person who is having it [HIV or AIDS]. They want to know who is the AIDS carrier. You will not know [who has it], we don't know who has the AIDS'. There is much debate whether AIDS is transmissible through contact with a person's breath, their saliva or sweat, clothes, cups or plates or sorcery (see also Eves 2003; Hammar 1996, 1998; Lemeki 2003). One woman said at a meeting I held in late 2004 that 'people are living in fear of this sickness, scared of talking to that person, drinking in the one cup, sharing clothes, eating from

one plate. We are all frightened of that person'. Others recall being informed by health workers at workshops and information days that 'people could have AIDS but not seem to have it – it is a hidden disease [and] it doesn't show out'. He or she is able to move amongst the other members of the community, potentially infecting them with the disease through daily activities as well as sexual ones. In particular, those who move outside the area to work or study are increasingly seen to represent the greatest threat to the community and their families (Dundon 2005b). AIDS is still a disease associated with outsiders and those who have lived and worked elsewhere in PNG and abroad.

The sexual nature of the transmission of HIV has had a significant impact both on Gogodala notions of AIDS and those infected with HIV. As for the Lelet of New Ireland, HIV/AIDS is associated with 'sexuality, particularly sexual promiscuity, and thus immorality' (Eves 2003:255). As unseen, socially invisible, agents of AIDS, these people pose a considerable threat to the community's well-being. Increasingly, those with HIV are represented as sexually unrestrained, spreading the disease through illicit sexual behaviour and, possibly, more mundane, daily interactions including the sharing of food, plates, cups and toothbrushes. But, perhaps more importantly, they bring this devastating sickness into the community through ignorance of *babala* that govern sexual relationships. A primary source of offence to beings of the local environment, for example, is people engaging in sexual intercourse before planting and harvesting garden foods, hunting and fishing. Sex leaves a transient but overpowering smell on the skin; referred to as kaka sosawedaenapa, literally smelly or bad skin. This kind of smell is known to drive *ugu* creatures mad with disgust and anger, for it is a sign of great disrespect. Careless people, those who ignore the *babala* that protect them and others from the wrath of *ugu* creatures are the source of many sicknesses in this area, but more recently they are being held responsible for the influx and spread of AIDS. Women and men who have sexual relationships outside marriage, whose smelly skin places not only themselves but others in the community at risk, are increasingly understood as the source of this sickness. It has been consistently preached in village Churches of the area since the 1990s that AIDS is God's punishment for 'having sex' - either too often or illicitly. Said one Christian: '[this] makes people feel that once they get it, they will have no hope. In the Church, we [were] told not to associate with boys or girls too much. If [they are] pamuku [sex worker] then [you] will get AIDS'. One person argued that stopping the spread of HIV was only possible if people were encouraged to sustain the idea of 'no sex outside of marriage', another arguing that 'we need to use our bodies properly [to] stop this sickness'. Those who participate in these kinds of sexual unions, then, from adulterous men and women, to young, unmarried people to those women who exchange sexual services for cash or goods, are targeted as potential 'carriers' of AIDS.

Gogodala do not have a local word for a person who exchanges sexual services for money or goods (see Wilde this collection). Instead they refer to the Tok Pisin term *pamuku meri* that is used in many areas of the country, although few will name a person *pamuku* in public as it causes great offence. Many argue that there are no Gogodala 'sex workers' and that these types of women, like in Tari, Southern Highlands Province, are generally 'outsiders' or those who dress and act in certain ways that differentiate them from local women (see Hughes 2002; Wardlow 2002). In the southern Highlands, Wardlow (2002:143) notes that women who turn to sex work, known as pasinja meri or 'passenger women', do so in anger at their frustration in their marriage or kin relationships and their failure to fulfil obligations to them. She argues that Huli women are not driven to prostitution through 'economic desperation'; rather they choose it because of 'the broader commoditization of social relations and the consequent decline of relationally embedded personhood' (Wardlow 2006:23). Pasinja meri are often married women, with or without children, who leave their husbands or natal kin and engage in extramarital sex, often for money (Wardlow 2006:3). These women are mobile and characterised as *bighed* - obstinate and impertinent - they use vulgar language and are said to be 'greedy for money' (Wardlow 2006:4).

Some Gogodala women are known to receive goods, money and other services in exchange for sex. There are several women from Balimo village, for example, who exchange sexual services for goods or money, yet it has only been recently that such women and their clients have come under increasing scrutiny and community censure. Those who have illicit or numerous sexual relationships are referred to in Gogodala as dala ilinapa susaegi – literally, a woman who steals men – or ato ilinapa dalagi – a man who steals women, for they are said to be taking that person from another, whether a husband or wife or parent or in-law. Wardlow (2006:16) similarly notes that a Huli woman 'belongs' to her clan to the extent that should she use her sexuality autonomously, as a pasinja meri for example, it is considered 'theft' of the woman by the male party. Another term for these men and women relates to the numbers of those with whom they have relationships: dala bilibilinapa susaegi – a woman who 'goes around' with many men or ato bilibilinapa dalagi for a man who has numerous sexual relationships with women. Extramarital and premarital relationships are relatively commonplace, although the public perception of fidelity and monogamy within the sanctity of Christian marriage dominates Gogodala discourses about sexuality in general. Wilde's (2005) recent male-only survey conducted in 2004 in Balimo about male sexual practices and knowledge of HIV/AIDS, showed that some twenty three percent of men admitted to having sexual relationships with women other than their wives or girlfriends within the last three years. Many more admitted to sexual relationships that predated this period of time. Twenty eight percent of married men had an affair in that time, and fifty three percent of single men had sexual relationships (Wilde 2005).

Although, then, in practice, such sexual behaviour is relatively common, and understood in many ways to be socially appropriate or at least sanctioned (see Wilde's paper this collection), recent concerns about AIDS have given rise to a discussion about sickness and those who 'break the rules' through either deliberate or careless behaviour.² In this instance, Warrior women have taken it upon themselves to combat this situation with increased surveillance of movement and relationships between men and women and, where necessary, public shaming and accusation. The latter has occurred several times at the BHC, where those suspected of being HIV positive or sick with AIDS have become the subject of conjecture, ridicule and shame. As yet, this has not reached the point of naming persons suspected of having HIV or AIDS in churches or fellowships or other public venues at which many issues are 'brought out to the people', but this may be only a matter of time as the impact of AIDS becomes more immediately apparent to the community. In the villages and towns of the area, Warrior women have taken to going on patrols, often at night or early in the morning, singing and watching the movements of people in and around their houses, gardens and roads of the village or town. As Wilde notes in his paper (this collection), this increased level of surveillance is having an impact on the ways in which people targeted by these Prayer Warrior Groups understand, rationalize and, to a certain extent, modify their behaviour.

LISTENING TO LYING SPIRITS

Warrior women themselves, however, are not immune to the dangers and desires of sexual relationships in their own villages and towns, and as such, their activities are viewed with some ambivalence. The relationship between Warrior women and the Holy Spirit is understood to be a demanding and difficult one. Tuzin (1997: 52-3) notes similar experiences for the women of Ilahita village who were entered by the Holy Spirit during Christian revivals: seeking to maintain the relationship with the Holy Spirit, they took stringent measures to keep themselves sexually abstinent and morally pure. These practices put pressure on already strained marriages between, often, Christian wives and non-Christian husbands. The practices of Gogodala Warrior women seem to generate many of the same kinds of stresses exhibited at Ilahita; their observance of *awana gi*, including prohibitions on sexual activities

for long periods of time, has resulted in much marital discord. But for these women, the dangers of this kind of life lie not only in incidents of spousal anger or domestic violence, which many face, but also the inherent dangers posed by opening themselves to the power of the Holy Spirit. Like *iwai dala*, who communicate with the powerful and sometimes malicious beings of the landscape and face the possibility of being destroyed by their contact with such awesome beings, through a descent into madness, sickness or death, women touched by the Holy Spirit face the possibility that their 'eyes' will be 'turned' in another direction altogether and their bodies will be entered by 'lying spirits'.

Young, inexperienced women, in particular, are prone to the development of a form of madness or *daeladaele* as a result of being touched by the Holy Spirit. These women, whether single or newly married with only one or two children, are referred to as *aminagi* – 'small girls' – and are considered more socially akin to children than adults. They are not generally practised in public denouncement or authority and usually play a limited role in village or inter-village disputes and public discussions. Yet such women, when entered by the Holy Spirit, have become a considerable force behind Prayer Warrior Groups, a phenomenon noted in other areas of PNG (cf. Fergie 1977).³ It is believed that some of these women listen not only to the Holy Spirit, Awana Limo, but to *sosowena limo* – lying spirits. These lying spirits are said to 'turn their faces, change their eyes and they can see their dead people'. Many begin to both see and communicate with those who have died many years before, saying 'Yes, I can see this man, he is just over there that [deceased] person'. It as at this point that those in the Church or village begin to understand that these women have been entered by lying spirits as 'they are [no longer] speaking the truth; they are lying'.

Women touched by lying spirits become childlike in their madness. From moral, sexually abstemious women touched by the power of the Holy Spirit – characterized by its 'pure, blameless and holy' nature – with the ability to heal and see with great clarity, they become increasingly like children in their behaviour – socially irresponsible, unable to work or distinguish between the living and the dead. Like all of those designated mad or daedaelenapa, the primary Gogodala term that encompasses most forms of socially aberrant behaviour in individuals and not simply that of Warrior women, such behaviour is associated with the waxing and waning of the moon. A person touched or overcome by madness, whether through the Holy Spirit or other agents, is affected primarily during the rising of the moon and is most unpredictable when the moon is full. At other times of the month, he or she may resume their usual routine, making sago or gardens, looking after children, fishing or hunting. Gogodala classify all types of behavioural change associated with the moon as daeledaele. Although such behaviour is sometimes referred to in English as 'mad' or in Tok Pisin as *longlong*, the type of behaviour exhibited during these phases of madness more closely resembles what Goddard (1998:63) calls 'crazy behaviour' - 'in the loose, wide, lay sense of that English term' (see also Goddard 1992). A person can be daeledaelenapa momentarily or for a longer period of time, from several hours to a lifetime. It can result from an emotional or physical shock arising out of stress from various social or personal situations, or the loss of a child or spouse, or through conflict with others. It also arises from contact or conflict with non-human agents like ugu or the Holy Spirit. Often it is greeted with humour, mock dismay and much amusement at the antics of the person affected, although there can also be a great deal of shame particularly for close kin. Whilst this behaviour is perceived simply to be 'mad' and has little effect on others, it is tolerated. Once, however, 'material or personal damage ensues' (Goddard 1998:64), tolerance for the person rapidly deteriorates into recriminations and demands to kin to control the activities of the *daeledaelenapa lumagi* – mad or crazy person.

So too with women touched first by the Holy Spirit and then lying spirits; for they begin to exhibit 'different intentions', that is, they turn away from helping and healing others and turn their attention to themselves - *naetinaela* - literally 'see me'. They seek to make themselves the centre of attention, drawing men's eyes in their direction by dancing in

public, laughing and giggling loudly, practices shied away from by most other women. They avoid going to the swamps to make sago, nor do they make gardens, collect firewood or water, or cook for their husbands, fathers and mothers or children. One woman used to fish naked, much to the embarrassment of her husband. Another would play football with her three-year old son, acting like another child rather than the child's mother.⁴ Unlike adult women, they eschew the activities that define them as responsible and moral persons (see Dundon 2004, 2005). They may also become sexually provocative, an implication of the term naetinaela. 'They start floating around' and publicly seek the attention of men, and can become the source of much vitriol and speculation as others see them as 'aftering a husband'. One man suggested that maybe when these women 'go and touch men's bodies [when] healing – maybe it makes them crazy'. Married women who have become daeledaelena may be shamed or beaten by husbands or in-laws, and are often brought back into social milieu of the village relatively quickly. Single women, however, may not be as easily influenced by others - whether parents, siblings or uncles - and may initiate sexual relationships with willing male partners. Others are said to visit graves to collect food and goods passed between Yaebi Saba, the Gogodala name for the Christian space of Heaven – the place of the dead - and the land of the living. For, as these women see their dead, they can also communicate with them. Thus they become increasingly distanced from their families in the village or town; they do not work or maintain kin or marriage relationships; they play like children and, more disturbingly, interact with the dead.⁵

Although for some madness becomes a permanent condition, for the overwhelming majority, life resumes a more normal pattern after only a short period of time, and young girls may marry and have children, while married women return to their families and husbands, begin working again, making gardens, sago and caring for their children. Those afflicted are often objects of ridicule and some scorn, particularly when they perform socially challenging and inappropriate acts in front of others - often their own relatives and families. But it is transitory – these women can quickly resume the mantle of responsible womanhood, and, if this is maintained to the satisfaction of others, nullify the taint of the madness. Others, however, experience their madness for a much longer period of time and may become mothers to one or more illegitimate children. In Balimo and surrounding villages this has happened to about a dozen Holy Spirit women. In one case, a Warrior woman from a village close to Balimo initiated sexual relationships with three men other than her husband after becoming *naetinaela*. When she fell pregnant, her husband's family took her to BHC to have blood tests to confirm the paternity of the child. Once it was established that the woman's husband was not the father of the baby, she was encouraged to name those who might be. The men named responded with claims of innocence, pointing out that the woman was *daeledaele* and therefore could not be trusted. Others in the village then came forward, however, and confirmed that she had been seen with these men at different times. She now lives in the village with her children and husband, and has become a figure of some ambivalence and even disgust. She and others like her are labelled *pamuku* or *walapu lumagi* in Gogodala, a term that refers to the practice of dogs eating in secret in the bush and then showing the results of their shameful feasting in a full belly. A woman who has a pregnancy before she is married or carries one man's child whilst married to another is said to indulge in the same kind of behaviour: they have sex in secret, in the bush or garden, and return to their parents or husband with a full belly. The dangers inherent in becoming women of the Holy Spirit are played out in the experiences of those, like the woman above, whose clarity of perception and powers of healing are overtaken by overt attention-seeking and public sexuality. Women in these Prayer Warrior Groups seek to guard against their own and others descent into this kind of madness through prayer and practices like awana gi, which cleanse their bodies and skins so that only the Holy Spirit will enter. Like the *iwai* of old, however, the process is one that demands a great deal of time and effort, and may still be met with failure.

CONDOMS ON THE STREETS: SOME CONCLUSIONS

The Gogodala community's response to the encroachment of HIV/AIDS into this area says a great deal about their understandings of the sickness itself. Like those of the past that made their way through village longhouse communities with often virulent effect before the advent of the Balimo Health Centre, AIDS brings sickness and death. The disturbing nature of AIDS, though, lies in its ability to deceive even those who carry the virus – at least until their appearance changes and they become ill. Thus AIDS can take the form of anyone – including a spouse or a child. It makes its silent way through the community, utilizing recent practices like the use of condoms, Gogodala working in paid employment elsewhere in PNG, or the madness of the moon and lying spirits. And it is creating a sense of fear that those around you, including family members, may be the ones who put you at most risk.

Many argue that their way of life -ela gi – which is based on certain Christian practices and principles as well as daily interaction with the local landscape and respect of babala, will ultimately protect them from this kind of AIDS. For sickness comes to those who transgress the boundaries of appropriate behaviour; who initiate sexual relations with the 'wrong' person, who hide anger and shame, who steal or are tardy or ignorant of the beings of their environment. Sickness, as in the past, still resonates with the manifestation of wrongdoing – either on the part of the persons themselves or as the victim of someone else's malevolence. The maintenance of health and well-being is thus a way of living. HIV and AIDS, understood as they are at this early stage of the epidemic, represent a breakdown of this lifestyle - ela gi - and, at this stage at least, it seems to be primarily those who move away from it, whether literally, or metaphorically in intention, ignorance or the result of madness for whom it becomes a danger. If in the old times, sickness was understood as the manifestation of transgression, then AIDS has reinforced this perception and helped Gogodala come to terms, for now, with the question as to who is most likely to fall ill with it. Even in 1998, before much community knowledge or discussion about HIV and AIDS, I was told that AIDS was the punishment for the next generation – for breaking the rules of the past. Many older people point to the behaviour of young men and women, the flaunting of the rules of the beings of the land and water and swamp in their haste to marry and initiate inappropriate sexual relationships. Prevention was always possible through closely guarding one's behaviour and respecting the boundaries and beings of the interactive and living landscape and even at this early stage of the epidemic, many Gogodala argue that prevention for HIV should be based on the same principles and practices.

In many ways, Warrior women seek to enact these forms of prevention and, through surveillance, prayer and following the principles of *awana gi*, bring about a level of protection for the community as a whole. They seek to bring to the public gaze activities that, if allowed to continue unchecked, could compromise the continuing health and well-being of this rural community. Thus, increasingly, they use their power to not only challenge more traditional enemies of God – *iwai dala*, for example – but also to face the threat posed by the spread of AIDS into the community. Women, like those patrolling the streets of Balimo in the early hours of the morning in 2004, pose a formidable and very public challenge to sexual practices that break the *babala* of their living landscape and thus give rise to conditions that enable the spread of AIDS throughout Gogodala villages and towns. Ironically, in the same process, women put themselves in danger of contact with lying spirits, becoming *daeledaelena* and thus the subject of their own campaigns.

If prevention is understood in these terms, it is not surprising then that there was a great outcry when in 2002, after a short campaign and promotion of condoms as part of a national program on safe sex and prevention of STIs including HIV, for the first time boxes of condoms were made freely available at the Balimo Health Centre and distributed without restraint. The condoms were given out to interested parties through the Outpatients Department at the health centre, bypassing the usual control held by the nursing sisters at the Dispensary. However, when World AIDS Day was held on the first of December that year, there was a public denouncement of this new system of distributing condoms, after condoms, new and used, were found on the streets of Balimo. Subsequently, the distribution of condoms was placed back in the care of the Sisters operating the Family Planning Clinic at the Centre, and condoms, quite literally, were taken off the streets of Balimo. Condom usage has been linked, in Gogodala conceptions, to the kind of unrestrained sexuality central to the transmission of AIDS. One woman told me that 'some men, when they get hold of these condoms, they are just looking for women all round the place [and] not their own wives'. Another suggested that young men and women were using condoms 'just for fun', rather than thinking through the implications of their actions. Hughes (2002:132) notes that in SHP, even when informed of the mortality rates of HIV/AIDS, women were 'adamant that condoms should not be available for sale'. Huli women 'declared their opposition to condom availability' as 'if men could have sex with any woman at any time they would go "wild" and all women would be "used up" (Hughes 2002:131). The local correlation between condom usage and distribution, and sexuality unmediated by the fear of STIs and unwanted pregnancies, has only served to demonise condoms as well as those who use them or wish to promote their use in the fight against the spread of HIV. It has also only served to underscore a growing community-wide fear that unrestrained sexuality has given rise to this new health crisis, and that, thus, all forms of activities and products seen to promote or enable such sexuality need to be challenged and subverted.

NOTES

- 1. Tuzin (1997: 52) notes that women touched by the Holy Spirit in Ilahita similarly refrain from sexual contact with their husbands in order to encourage the relationship with the Holy Spirit, which results in more frequent cases of 'violet discord' between spouses and a great deal of unhappiness.
- 2. This forms part of a wider debate about the role that the younger generation, in particular, play in the transformation of the local environment, the seasons, numbers of fish and other produce through their careless behaviour and ignorance of the relationship between people and the forces and beings of their landscape.
- 3. Fergie noted in 1977 that, among the Mekeo of Central Province, a young, unmarried woman, a mission worker, called Philo became a significant religious leader and prophet. Fergie (1977:96) reports that one Sister at the mission school wrote that Philo was a 'very quiet girl just a normal village girl'. Another wrote that 'it was strange a young girl it was extraordinary because they never take notice of a young girl you know, they have nothing to say, the young girls of the village' (Fergie 1977:96).
- 4. One such woman was pointed out to me at an ECPNG conference in April 1995. At the conference, fellow-ship groups from each village Church from the District, primarily Gogodala but some neighbouring groups as well, performed a song for those gathered. Whilst one fellowship group got up to sing, a woman from the audience stood up and started to croon and sway from side to side. The women started to whisper and giggle, albeit somewhat uncomfortably. She then moved to the front of the Church, taking up a position amongst the women and began to sing with them, but more loudly than most, dancing with exaggerated movements and expressions. The woman continued to sing and dance with the group, and several others that followed after them, for some time, until, seemingly tired but unfazed by the buzzing in the Church, she simply resumed her seat and continued to participate quietly for the rest of the conference.
- 5. Some men, particularly younger, unmarried men, are also 'revived' and similarly become victims of these lying spirits. They also seek the attention of young women, and initiate relationships, if possible, with them. The shame attached to such behaviour can be more extreme for these young men, however; in one such case, a young man committed suicide after he recovered from the disorientation and emotion of the revival. There is no equivalent role for men, particularly young ones, touched by the Holy Spirit, as for women who become participants in Prayer Warrior Groups. Some play a small role in their village church for a short period of time, but do not generally continue to be revived or necessarily attempt to open themselves to the Holy Spirit in the same fashion as Warrior women.

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