
HEALING IN DIGOEL

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There were five of them running from the camp. Some carried 50 kg, others only 25 kg ... Each had a short machete and an ax at the belt; a blanket, a shirt, trousers, and shoes; rice, dried fish, chili peppers, matches and tobacco; flashlight *Everyday*, a set of stacked containers for transporting food and a box for storing plates and dishes. Most importantly, they carried quinine pills, five bottles of them ... In the camp, they had to take it every day, said the doctor.

— Abdoe'IXarim²

In the fall of 1926 and the spring of 1927, small groups of Indonesian rebels attempted a communist revolution; of course, a silly thing to do. The revolt was suppressed, and those who committed some crime during the attempt had been promptly punished. Some were executed according to the colonial law. Those against whom nothing could be proved, but who were considered a potential threat, were sent away—with their families, if the families wished so—to a hastily made clearing in the middle of the primeval forest on the upper reaches of the River Digoel in New Guinea. Through the rest of the 1920s and until 1943, Indonesian Islamists and nationalists were being added to the original group—all kinds of “leftists, radicals, nihilists, us-against-them parties ... nihilists,” as a colonial document of the time put it.³

Since the early months of the camp's existence, there had been a hospital for the internees, with a red-tile roof, concrete floor, and white walls of stone and cement, in

¹ This essay is to Jim Siegel. The book on camps I am writing for him—on Boven Digoel in the Colonial Indies and Terezín in Nazi Bohemia—is (slowly) coming.

² Abdoe'IXarim, *Pandoe Anak Boeangan* (Medan: Aneka, 1933), p. 37.

³ Verbaal December, 10, 1928 V21: Mailrapport 992x/28 Digoel Rapport A. van den Assikos t/b J. Blok, September 1928, p. 7, Depot Ministerie van Kolonien Geheim Archief.

cute colonial style, Wilhelmina Ziekenhuis, “The [Queen] Wilhelmina Hospital.” The hospital included two halls for in-bed patients, one for men, one for women and children, a hall for infectious diseases, an ambulance, a laboratory, and a pharmacy. Both the authorities and the internees agreed and emphasized then and later that the hospital was equipped and staffed as well as the few, best medical institutions in the colony, including those for the colonial Whites.

The Dutch do not take the needs of the internees lightly and it is proved by the royal way, in which the hospital is set up.⁴

According to a Danish journalist (one of very rare visitors),

The doctor’s office looks like a real medical battlefield. Medical books and journals, stacks of prescriptions, folders with notes, test tubes, specimens, a microscope—all stand in position, ready for action.⁵

To all appearances, the best medical care of the time and of the colony was being provided to the potentially dangerous internees. If caring for the other equals conscience and qualifies as being with the other—so ethics teaches us—then the camp, where people were locked without much hope for a release, was the true place of being together and of conscience.

1. Dr. Schoonheydt

There was always at least one doctor in residence during the camp’s existence, usually on a two-year tour of duty, which had been a norm for the colonial higher-ranking officials. Without an exception, it seems, good or extraordinarily good physicians were being sent to the camp. Dr. Kalthofen, who helped to establish the camp, was Austrian. He served the Habsburg monarchy as a military doctor at the front during the First World War and, later on, already in the service of the Dutch government, he practiced medicine among the Dayaks in the interior of Borneo.⁶ Not just experienced doctors, but specialists—primarily specialists on malaria, but also on other maladies, especially tropical and venereal diseases—worked in or at least visited the camp on study tours and for consultations. Doctors with Boven Digoel experience reported back on their findings in the camp and not merely to medical journals. These people were respected, as doctors are, and, without a doubt, their reports had a disproportionately large effect on building up the image of New Guinea and the New Guinea camp among the public as well as politicians throughout the colony and also in Europe.⁷

Dr. Schoonheydt was sent to the camp in 1935. By his own admission, the assignment was, in part, a sort of punishment for a scandal he had caused in Batavia by having an affair with the wife of a German doctor. Still, Schoonheydt evidently did

⁴ Aage Krarup Nielsen, *In het Land van Kannibalen en Paradijsvogels* (Amsterdam: Querido, 1930), p. 114.

⁵ *Ibid.*

⁶ *Ibid.*, p. 107. See also Dr. A. Kalhoven, “De bestrijding van het Venerisch Granuloom onder Kaja-Kaja’s,” *Geneeskundig tijdschrift voor Nederlandsch Indië* 1928: 740–52.

⁷ “Interneeringssoord Boven-Digoel. Voordracht met lichtbeelden door dr. L. J. A. Schoonheydt,” Amsterdam, November 10, 1936, *Archief Schoonheydt* (Leiden: KITLV), File no. 1.

not much mind going. A financial bonus for the service in the remote parts was one attraction.⁸ The doctor was also a big-game hunter, and there were, if nothing else, trophy crocodiles in Digoel. Most importantly, however, Schoonheydt went because of the promise that there would be an extraordinary medical job to were do.



Dr. Schoonheydt in his office in Boven Digoel.
Image code 806f6e3 KITLV, Leiden, used with permission of KITLV.

Luckily for us, Schoonheydt was media savvy. Already before his Boven Digoel stint, he was in the news in Batavia. There was a sensational discovery of a skeleton, possibly of Jan Pieterszoon Coen, the seventeenth-century founder of the Dutch empire. In one of the papers' photographs, a smiling Dr. Schoonheydt is featured, a medical assistant to the project, as "he holds the skull in his hand."⁹ It was soon found out that the bones were not those of Coen, but the aura of a public person remained above Schoonheydt's head. Instantly, after he settled in the camp, he began to send

⁸ Schoonheydt wrote about a "generous bonus." See Louis Johan Alexander Schoonheydt, *Boven-Digoel* (Batavia: De Unie, 1936), p. 271. According to his biography, Schoonheydt "had an excellent salary in Boven Digoel." Anthony van Kampen, *Een kwestie van macht: het bewogen leven van de arts dr. L.J.A. Schoonheydt in het voormalige Nederlandsch-Indië, Nieuw Guinea, Suriname en Nederland* (Bussum: Van Holkema en Warendorf), p. 137.

⁹ See, for example, "Onderzoek naar Coen's Gebeerte," *De Telegraaf*, June 21, 1934, in *Archief Schoonheydt*, KITLV, File no. 7.

stories, illustrated with his own photographs (another hobby of his), to newspapers and magazines in the colony as well as in the Netherlands.

After his tour of duty in Boven Digoel ended in 1936, Dr. Schoonheydt published a book on the camp as he saw it, with the crocodiles, the wild people in the forest around the camp (*der achterlijkste volken der aarde*, “the most backward people on the earth”¹⁰), the internees, the hunting parties, and, of course, most of all, medical matters. Dr. Schoonheydt’s book became a bestseller in the Indies and in the Netherlands as well. Its second and “improved” edition was published in 1940, and it also sold well. Eddy du Perron, probably the most influential Dutch and Dutch-Indies novelist and social critic of the time, reading the book, called Schoonheydt a “colonial bandit” and, in the same breath, “a victim of [his] time.”¹¹

As soon as the camp was established, it became known throughout the colony as a modern “Mekka” for Indonesian freedom fighters—or rather, martyrs. Equally so, at the same time, the camp became famous—also almost mythically—for its mosquitoes. Malaria, killing the martyrs, became as significant a part of the political discourse as it became significant medically. Dr. Schoonheydt had studied malaria before he went to Boven Digoel. He spent most of his time in the camp on malaria, and, after he came back to Java from New Guinea, based on the merits of his camp experience, he was appointed to the possibly most important malaria eradication job in the colony. He became the chief doctor in Tandjoeng Priok, the harbor of Batavia, which was economically and strategically, as well as medically (*viz.* malaria), the strongpoint (and the underbelly) of the Dutch empire in the East.¹²

In the camp, Dr. Schoonheydt continued with the work of his predecessors. The fundamental method of his care for the Boven Digoel internees, and the first principle of his medical conscience, was to keep the camp and the camp people *clean*. Clean, or more properly, aseptic, was a notion, and imperative, that appeared in the documents from the camp. If one single notion was a code for the camp medicine, this is the notion. Another notion that came to function as a method and principle was complementary to “clean” and “aseptic.” It was *isolation*. Not by an accident, one of the names used to identify the camp was “camp of isolation.” “Cleanliness” and “isolation” signified healthy life in the camp.

The best care was taken of the internees so that they would become and remain as clean as possible, clean of infection, that is, as aseptic, separated, isolated from infection as possible. In the description offered by Dr. Schoonheydt in his book,

The permanent malaria-eradication team in the camp consisted of nine persons. The officer for malaria [*mantri-malaria*] was an employee of the governmental Service of the People’s Health, the remaining eight were all internees ... Two of the internees in the team worked as “quinine distributors.” They traced cases of

¹⁰ See, for example, a report by Captain Becking, the first commandant of the camp: L. Th. Becking, “Reisverslag Gezaghebber van Boven Digoel op zijn tournee van de Digoel-rivier naar de Ok Terrie (Alicerivier) van 3 tot en met 30 Juni j.l., Tanah Merah, July 16, 1927,” typescript, page 2, in *Collectie F. H. Peters*, KITLV no. 1992.4.

¹¹ Van Kampen, *Een kwestie van macht*, p. 145. See also Charles Edgar du Perron, “Boven-Digoel door L. J. A. Schoonheydt” (1936), unpublished manuscript, *Nederlands Letterkundig Museum*, The Hague, n.p.

¹² See, for example, *Special Collection*, Imagecode 13859, KITLV, Leiden.

malaria in the camp, took blood samples from the persons suspected of the disease, and brought the samples to the hospital laboratory for an analysis ... These two internees also controlled whether the mosquito nets were properly used and whether the ditches and canals were maintained in good condition. As often as needed, but almost every day, the two internees also visited internees' homes and distributed prophylactics to the internees' children under the age of three. The remaining six members of the malaria-eradication team were being sent outside the camp, for what in English is called *fieldwork*. They were larvae catchers. As their title suggests, they were ordered to look particularly along the riverbanks, for the breeding grounds of the anopheles mosquitoes ... They collected the larvae and, most intensively at the time of rains, they sprayed the breeding grounds. We used "Paris Green," a kind of arsenic, as a larva poison. The same six gentlemen ["gentlemen": a colonial irony by the doctor] ... were also called mudders [sic: *blubberaars*] ... All the mosquito breeding grounds, actual or potential, in the radius of about one-and-a-half kilometers around the camp, were covered by them with a thick layer of *blubber*, a brown-black thick petroleum residue.¹³

The camp was at the center, and from it, in widening circles "about a kilometer and a half in radius," cleanliness spread, and intensive care, so that isolation from infection would not be compromised. In the widening circles, the land was being deracinated to become aseptic, categorically and flagrantly, in sharp colors—"Paris green," "brown-black," or "clay white." A doctor's approval was required every time an internee might want to clear a patch of new land, open a little garden in the camp or its immediate surroundings, to plant some flowers, vegetables, or a fruit tree. So, on Thursday, May 20, 1935, police agent Soeleman informed internee no. 1318, Walmin Reksosiswojo, "that his request to plant a plot in the camp near the river was denied. Doctor rejected his petition for health reasons."¹⁴

Internees were not physically punished in the camp. There was no physical violence really. In the fifteen years of the camp's existence, only one internee's death was caused directly by the authorities—it happened in a chaotic situation, in a skirmish with the police during an internees' demonstration. Yet, *cleanliness* and *isolation* had to be kept at all costs. Between the homes of the internees, cutting the whole camp geometrically and according to plan, ditches were dug, often covered by plates of zinc, and the toughest measures were taken to keep them clean. Water had to flow, not stagnate, and not fill with rot. The internees had to make sure of it. This was strictly controlled, and to disobey was considered among the most serious criminal acts. In the camp archive, one finds quite a number of cases of an internee being sent to the camp prison—there was a prison in addition to the camp—for days and even weeks, for failing to maintain the ditches as ordered. Few internees actually disobeyed.

¹³ Schoonheydt, *Boven-Digoel*, pp. 85–86. As Danilyn Rutherford put it, "Hygiene was an obsession in white New Guinea: the authorities would even sanitize the terrain." See Danilyn Rutherford, "Trekking to New Guinea: Dutch Colonial Fantasies of a Virgin Land, 1900–1942," in *Domesticating the Empire: Race, Gender, and Family Life in French and Dutch Colonialism*, ed. Julia Calncy-Smith and Frances Gouda (Charlottesville, VA: University Press of Virginia, 1998), p. 266.

¹⁴ "Thursday, May 20, 1935, 1:55 PM," *Dagboek v/d Politie i/h Interneeringskamp. v.a 4 Mei 1935 t/m 21 Juli 1935*, in Arsip Nasional RI, Jakarta: Archief Boven Digoel, no. 211.

Most of them accepted the logic—the medical logic—and many of them even took pains to embellish the ditches with ornamental bushes and flowers. Carnations and roses (indeed!) are the flowers recalled most often when I ask the survivors.¹⁵

The camp was bright. In fact, it was sun beaten. It was exemplarily aseptic, with the cleanliness sharply distinguishing it, separating it, isolating it from the forest that was all around (in the above-mentioned radius). The camp was at the sharp edge of the empire—the forest, the untamed, the wild in all aspects, was beyond. The knowledge of the beyond among the people of the camp—as among the people of the empire—was meager and fragmented. If there was some system in the knowledge, it was crafted into a systemic fear and suspicion. The medical knowledge of the beyond, namely, was being crafted into a systemic fear of infection. Infection was feared—infection of body and, inevitably, infection of soul as well.

Some contact between the camp and the forest was inevitable, and even desirable, as this was the edge of the empire. Any such contact, however, had to be activated in the most careful and controlled, clinical way—as in the small doses of intravenous feeding.

During the later years, under doctor Schoonheydt's successors, new openings were made to the Papua tribes in the forest ... Especially after the success of the *neosalvarsan* injections used against *frambesia tropica*, the people of the forest started to visit the camp hospital. Thanks to this therapeutics and later also to *tartras emeticus* newly used by our doctors ... the coming closer [*toenadering*] between cannibals and colonists [*colonisators*] was beginning to happen.¹⁶

Occasionally, a Papua mother brought her sick baby from the forest to the camp to be seen by the doctor.

In general the health of infants and toddlers of the internees in the camp can be described as reasonably good. Soon after birth, the little ones were given *euchinine* prophylaxis, and it almost always worked. We also made sure that the babies were always, before it got dark, placed under the mosquito nets, so that the dangerous anopheles would be kept away from them. Indeed, the children of the internees as well as those of the soldiers grew in the camp like mushrooms after the rain! The contrast with the Papua babies—which meant those we could see as they were sometimes brought to us from the forest—was simply stunning!¹⁷

In the camp in the middle of the forest, medicine worked at its purest and most intense. The camp was made and kept anxiously clean and isolated and, true to the same principles and logic, it was made and kept crystal-like *transparent* and hardcore *orderly*. Every second day or so, always in the late afternoon, all the internees, individually and as families, gathered in front of the camp hospital.

¹⁵ For instance, in an interview with Siti Rachmatun-Zakaria, Jakarta, May 10, 2011.

¹⁶ I. F. M. Salim, *Vijftien jaar Boven-Digoel: Concentratiekamp in Nieuw-Guinea* (second revised edition) (Hengelo: Smit, 1980), p. 179.

¹⁷ *Ibid.*, verbatim from Schoonheydt, *Boven-Digoel*, p. 91.

Queuing up for quinine pills ... Uncle Patty [an internee working as a hospital orderly] called out the names in alphabetical order, from A to Z. At last, the name of Sardjono was called—then Soetaslekan—and then Soeromidjojo, the name of my father. Quickly our whole family stepped forward, and we stood in line, waiting for the pills. Most of the time, adults received three pills and children two—all made in Bandung, *pill BK* we called it, made in *Bandoengse Kinine Fabrik*, “Bandung Quinine Factory.” We all had to swallow the pills on the spot, watched by Uncle Patty. We could not just take the pills with us home.¹⁸

It was a healing as much as the most efficient way to check the numbers, to discover who among the internees might be missing, hiding, lying sick at home, or perhaps trying to run away from the camp.

The camp was not a place for merely ordinary medicine. The camp was a place of a *concentrated* medicine. Quinine, the medication for which the camp became so well known, had been known in Europe as well, and there, also, it was used commonly and often generously—for stomach ailments and for diarrhea, among other things. But the camp memories of Boven Digoel describe “quinine people,” whose faces were yellow, and the whites of whose eyes were yellow, after they had been exposed to just a few months of the camp care. Quinine in the tropics, in general, was most often connected with malaria. The doses were usually large, and everybody using the medication sooner or later experienced a “hum of the quinine in [the] ears.”¹⁹ In the Boven Digoel camp, however, in the place of concentrated medicine, people spoke of *kinine-dooftheid*, a “quinine deafness.”²⁰

Meticulous medical records were kept in the Boven Digoel camp throughout its existence, and they have survived in the archive now kept in Jakarta. As I read through them, it became frightening how thoroughly they were put together, often daily, how many pills of what medication were administered, the person’s name and camp number, sex, age, height, weight, and origin—Sumatra, Java, Makassar. There are minute records of all the people who died in the camp, with the medical cause of death.

Of course, there are no data on the health or illnesses of those who survived. Hardcore and isolated also in time, all ends with the end of the camp. The father of Mr. Bangun Topo, for example, was an internee of Boven Digoel. He survived the camp, he was transported to Australia like all the remaining internees in 1943, when the camp was dismantled, but he died after just three months of freedom. “They found a big swelling in his liver in the Mackay hospital,” Mr. Bangun Topo told me, “they opened

¹⁸ Notes and reminiscences by Mr. Soeromidjojo (Trikoyo), a survivor of Boven Digoel, personal communication. Further quoted as Trikojo, “Cerita Digul Cerita Buru,” Tangerang, Minggu Kliwon, 28 Januari 2007, n.p., personal communication. According to a slightly different version by a Danish journalist: “Each Thursday and Friday, everybody, from the commandant to the soldiers’ children, the communists and the common criminals [there was also a prison for common criminals close to, but separated from, the internment camp], had to take his dose of quinine. For the adults it was one gram. Everybody also received his [or her] own mosquito nets, and it can be seen in a wooden frame above each bed.” Nielsen, *In het Land van Kannibalen*, p. 112.

¹⁹ Louis-Ferdinand Céline, *Journey to the End of the Night* (New York, NY: New Directions Books, [1934] 2006), p. 139.

²⁰ Nielsen, *In het Land van Kannibalen*, p. 122.

him and closed him again." "Could it be the quinine pills?" I asked. Mr. Bangun Topo does not know.

* * *

Martin Heidegger, a philosopher who did not want to know too much about the camps, believed that humans could become true to themselves only as mortals, through their awareness of being-toward-death. The Boven Digoel camp, under the rule of the camp medicine especially, seemed rather a community-toward-cleanliness. On that journey, of course, the colonial camp did not reach yet the ultimate—the ultimate of the Nazi camps, where “toward-death” and “toward-cleanliness” became one and the same thing. This is an entry by an internee, a Dutch Jew, in a diary from the Nazi camp in Westerbork, the Netherlands, a camp from which the people were directly sent to Theresienstadt, Bergen-Belsen, and Auschwitz:

It was ordered that, because flies carried infectious diseases, every internee had to catch fifty flies per day and to deliver them, wrapped in a piece of paper, to the camp Quarantine Station.²¹

Boven Digoel was a Dutch colonial camp, with a concentrated medicine, but civilized and enlightened. Catching bugs in Boven Digoel did not ever reach the level of the ultimate. Catching bugs was a job for experts. Schoonheydt was *aseptic*, but he was no Mengele of Auschwitz, not even a quarantine worker in Westerbork. He was not directly connected to murders and certainly he was no sadist—that is to say, if one does not accept Raul Hilberg’s definition of sadism as an *extreme fear of being infected*.²²

Dr. Schoonheydt’s medicine, on the other hand, was a camp medicine, and its aim was isolation. His ethics was built up by fear of contamination, of body and soul. Schoonheydt’s and Boven Digoel’s medicine of keeping clean and antiseptic was the apex of the colonial fantasy of separation, but still it only suggested the possible next, the uncontrolled obsession with the unclean, un-isolated, wild, and un-medicated, an all-absorbing obsession that would lead to an acute fear to touch, even “a fear of one’s own curiosity,” and, thus, “the very absence of desire,” except for the desire to destroy the other.²³ Dr. Schoonheydt’s and Boven Digoel’s medicine merely pointed in that direction.²⁴

* * *

Medical practitioners everywhere, especially in slums and other dark places, and of course in the modern camps, at the roots of their conscience and profession, are “charity doctors.”²⁵ They are trained to do the good. If it were not for their mission, so

²¹ Philip Mechanicus, *Waiting for Death: A Diary* (London: Calder and Boyars, 1968), p. 100.

²² This is from Raul Hilberg writing on the Nazi camps: “With regard to sadism, it must be kept in mind that the bureaucracy was concerned not so much with the suffering of the victims as with the contamination of the perpetrators.” Raul Hilberg, *The Destruction of the European Jews*, vol. 3, 3rd edit. (New Haven, CT: Yale University Press, 2003), pp. 969–70.

²³ A. David Napier, *The Age of Immunology: Conceiving a Future in an Alternating World* (Chicago, IL: University of Chicago Press, 2003), p. 272.

²⁴ See note 38 on “concentration camp.”

²⁵ Jacob A. Riis, *How the Other Half Lives* (London: Penguin Books, [1890] 1997), p. 126. Riis also talks about “... experiment ... in the way of a charity.” *Ibid.*, p. 72.

they are trained to believe, the good might disappear and the world might crash. Patience and patient are twin words in this sense. The more charitable a doctor is, the more effectively his or her patients rest inside the sphere of goodness built by the care of the doctor—the greater the charity, the less the possibility of escape.

The patience with which mankind suffers the authority of logic is simply inexhaustible and can be compared only to the imperturbable patience with which it submits to the art of medicine.²⁶

There were Catholic missionaries doing good in and around Boven Digoel even before the camp's beginning. Since the camp came into existence, the Fathers competed with the camp doctors in manner and detail, but together with them they built the power of medicine, one and indivisible—cleanliness, sterility, charity, and goodness. It did not matter essentially in that mission of theirs whether they butchered one diagnosis or another. This is a quote from a mission journal—not Catholic but Evangelic, not from New Guinea but from Java, and from a slightly pre-camp time—that attracted the interest of Franz Kafka in distant Prague:

Much as may justly be urged against the amateur medical activities extensively engaged in by missionaries, it is nevertheless the principal resource of their missionary work and cannot be dispensed with.²⁷

Power was what mattered in medicine. Especially in the dark places, and, of course, in the camps, medicine was more than just a medicine. "Some people collect postage stamps or cloisonné," wrote an American doctor in the Philippines at the time of Schoonheydt, "I started collecting lepers."²⁸ Albert Schweitzer could not find a space more proper than the blackest of Africa for practicing medicine and Bach at the same time and with equal fervor.

Assertively, especially in the dark places, medicine became one with culture, with language, music, and manners, with the ethics-produced fears and hopes. Medicine came (or certainly tried) to define what was or should be inside of everyone, what was or should be healthy and good, and what remained or should remain outside, "of deviance"—sick, marginal, wild, and unclean.²⁹ The immunologists argue that a wish to be healthy equals a wish, biologically speaking, "to be at the center of the colony."³⁰ Medicine that becomes a culture does map a person like the world is mapped: the centers (of the colonies), the margins, what is in, what out, and what is absolutely to be kept so. Like:

²⁶ Hermann Broch, *The Sleepwalkers* (New York, NY: Vintage International, 1996), p. 482.

²⁷ Evangelischen Missionzeitung, July 9, 1912, excerpted in Franz Kafka, *Diaries 1914–1923* (New York, NY: Schocken, 1965), p. 304.

²⁸ Quoted in Warwick Anderson, *Colonial Pathologies: American Tropical Medicine, Race, and Hygiene in the Philippines* (Durham, NC: Duke University Press, 2006), p. 168.

²⁹ "The ideosphere ... is experienced by its users as a universal, natural discourse, one that goes without saying, whose typicality remains unperceived, whose every 'exterior' is demoted to the status of marginality, of deviance." Roland Barthes, *The Neutral: Lecture Course at the Collège de France (1977–1978)* (New York, NY: Columbia University Press, 2005), p. 89.

³⁰ Napier, *The Age of Immunology*, p. 7.

According to the nineteenth-century medical science, the Jew had a special relationship to syphilis (through the agency of the prostitute).³¹

Or, in a Czech book of dreams that my grandmother might have read, stands: "Africa—travel there—disease."³²

Medical wisdom emboldened culture to stand up against nature, the settled places to stand up against the wild ones, and, in our particular case, the camp to stand up against the forest.³³ The isolated and disinfected rebels of the Boven Digoel camp, more than any other community in the colony, typified the "standing against" and the *angst* in the face of the forest that surrounded the camp. A possibility of them being infected was a deadly menace, even scarier, because it was *latent*:

latent, adjective, (of a quality or state) existing but not yet developed or manifest; hidden; concealed

Nothing more precisely than this medical term could express a threat felt under the everyday in the camp. Nothing expressed the energy of the camp life in its completeness as well as the medical term:

Reports on the 4th quarter of 1933 ... for the time being, there is no reason for concern ... Bitek gelar Soetan Tjaniago, the administrative assistant, Boven Digoel.³⁴

2. Salim

Some internees of Boven Digoel were medical practitioners, too. Internee Gondojoewono, for instance, studied for four years (there is no record whether he graduated) at the Batavia school for the "Java doctors," native physicians receiving a Dutch license restricted to the colony. Before he was interned, Gondojoewono, in fact, practiced medicine on the Indonesian island of Ternate.³⁵ Some other internees came from families with a tradition of "Java doctors."³⁶ In addition, all the nurses in the camp hospital, male or female (including the already mentioned Uncle Patty), were recruited from among the internees or members of their families. Few of them learned medicine before they were interned, but most of them did so in the camp.

Chalid Salim was an internee and a medical worker, and he also worked as an assistant to Schoonheydt when the doctor served in the camp. Much about Dr. Schoonheydt at Boven Digoel, in fact, is known from the book of memoirs Salim later published about the camp. (There is no mention of Salim in Schoonheydt's own equally detailed book of recollections.)

³¹ "A French Frontier," in Sander L. Gilman, *Jewish Frontiers: Essays on Bodies, Histories, and Identities* (New York, NY: Palgrave, 2003), p. 116.

³² Hana Svobodová, "Poslední svědectví o zidovském malomeste," *Proměny* 20 (1983): 65, n. 2.

³³ Napier, *The Age of Immunology*, p. 238.

³⁴ Verbaal May 7, 1935 W8, Verslag 4e kwartaal 1933, p. 3.

³⁵ Schoonheydt, *Boven-Digoel*, p. 163.

³⁶ *Ibid.*, p. 164.

Chalid Salim was not merely an ordinary internee. His older brother, Hadji Agoes Salim, was a prominent freedom fighter, “the grand old man” of Indonesian nationalism; in 1945, he became the first foreign minister of independent Indonesia. Chalid Salim was also a first cousin of Soetan Sjahrir, also an internee in Boven Digoel for one year, who in 1945 became independent Indonesia’s first prime minister. Chalid Salim himself was sent to the camp because of his record as a communist.³⁷ No crime was ever proved to have been committed by him, and the colonial authorities acknowledged it. Nevertheless, Salim was made to spend “the full load” in Boven Digoel, from the camp’s earliest months to its liquidation in mid-1943. The title of his memoirs says so much: *Vijftien jaar Boven-Digoel: concentratiekamp in Nieuw-Guinea*, “Fifteen Years in Boven Digoel: Concentration Camp in New Guinea.”³⁸

The first period of his internment Chalid Salim spent under a regime even tougher than most of the other internees—in the camp’s special section, for *onverzoenlijken*, the “irreconcilable,” called *Tanah Tinggi*.³⁹ This was an even smaller clearing in the jungle, yet another four hours journey by motorboat up the River Digoel, isolated even from the main section of the camp, *Tanah Merah*. Then good fortune intervened—which was medicine. Salim contracted the most feared and usually fatal kind of malaria, “black fever.” They sent him to a military hospital in Ambon, a few days’ sea trip from New Guinea, where only the most serious cases were permitted to go. Salim did not die and came back to Boven Digoel. He was allowed to remain in the milder *Tanah Merah* section of the camp, where the camp hospital was located.

For health reasons probably, Salim was left to stay near the hospital, and it might have been Dr. Schoonheydt, actually, who assigned him to his fine team of larva searchers. Salim, the rebel, the captive, the man with an ardent feeling for everything progressive—and a convalescent patient, in addition—found an immense joy in the medical work. He fell for the work. He felt his life was now being fully realized by the work. The memoir he later wrote of the camp—however ambiguous it might be about most other matters—is filled with a deep and unblemished respect for doctors and for medicine, for camp doctors and camp medicine, that is. Salim’s was an unreserved falling in with the medical profession, its reason, language, ethics, and power. He became fully convinced that these were the ways to do good for the camp as for the

³⁷ Chalid Salim, as a young man, had lived for some time *in de kost* (as a paying guest) in Surabaya with Aliarcham, the top communist leader, who later died in the Boven Digoel camp. See Koesalah Soebagyo Toer, *Tanah Merah Yang Merah: Sebuah Catatan Sejarah* (Bandung: Ultimus, 2010), p. 43. In the Indonesian paper *Moestika* in May 1933, several photographs of the Boven Digoel exiles were published, among them a few of Chalid Salim. One of the photographs, according to its caption, was taken on the occasion of Salim’s transport to Ambon “as he suffers from black fever.” “On this photograph one can also see a Papua man in a complete state of nature.” According to the paper, “this is to represent a primeval forest, which is now the home of the exiles.” *Overzicht van de Inlandsche en Maleisch-Chineesche Pers* (Weltevreden: Kantoor voor de Volkslectuur, 1933), in *Moestika* 3, May 6, 1933.

³⁸ Salim in his book repeated several times that Boven Digoel was not truly a concentration camp. Yet he left the term “Boven Digoel concentration camp” in the book’s subtitle. In fact, in Dutch official interdepartmental communications, the term “concentration camp” had been used, until 1940, when the new Nazi model finally made the Dutch officials uncomfortable about the term. In May 1940, the Dutch minister of colonies, in a special note, advised all the officials in the colony not to use the term *het concentratie-kamp Boven Digoel* anymore. See *Notitie van de minister van koloniën* (Welter), May 6, 1940, in *De Ontwikkeling van de Nationalistische Beweging in Nederlandsch-Indië; Aug 1931–1942*, no. 164, vol. 4, ed. R. C. Kwantes (Groningen: Wolters-Noordhoff/Bouma’s Boekhuis, 1982), p. 744.

³⁹ *Tanah Tinggi* was sometimes also called *Digoel Kedoea*, the “Second Digoel.”

world. Medicine reigns supreme in Salim's memoir, and Dr. Schoonheydt, throughout the narrative, is either close to or at the top of Salim's scale.

Healing in the camp, let me repeat, was more than just a healing. There was nothing illogical (however strongly we might wish it to be) in Chalid Salim, the rebel, the revolutionary, and the captive, praising the camp doctor. Medicine, especially in the dark places, was powerful enough to absorb the modern in its entirety, including the progressive and including the revolutionary. In Lenin's Russia, too, one could naturally exclaim about the upcoming overthrow of an established order:

What *splendid surgery!* You take a knife and with one masterful stroke you cut all the old stinking ulcers.⁴⁰

* * *

However good the Boven Digoel camp hospital had been, Chalid Salim was not really healed in the end. He survived the camp and, after it was dissolved in 1943, he was transported to Australia with the remaining internees. When Indonesia gained its independence after the war, Salim chose to resettle in the Netherlands. The recurring attacks of the malaria that he had contracted in the camp—a *latent* illness par excellence⁴¹—forced him to look for help. In Scheveningen, a sea resort near The Hague, by chance he encountered Dr. Schoonheydt, who had opened a medical practice there. Schoonheydt became Salim's physician again.

A circle closed, if it had ever been broken. The two men found themselves again—if they had ever been anywhere since the camp but together—together inside the "ritual space" of medicine that was everything. They were medical practitioners first of all, in spite of, and above everything, and the rest was medicine, too. Fully, including his fiercely kept revolutionary principles, Salim belonged to Dr. Schoonheydt. Fully, including his fiercely kept colonial principles, Dr. Schoonheydt belonged to Salim. Together they allowed for nothing more. Theirs was a medical and concentrated-medical togetherness.

3. Citizen Pandoe

"Salim" in Indonesian means "Healthy." There is an immense amount, indeed, in Salim's book of details and reflections on health, on hygiene in particular—on prophylaxis, sanitation, and prevention. Equally so, there is strikingly nothing (immensely nothing) about what people like Heidegger might describe as the essence of humanity, of man physical as well as spiritual—the capacity of being-toward-death. Salim became Christian in the camp (under the influence of the missionaries and possibly Dr. Schoonheydt), yet there is nothing in Salim's writing on the camp, for instance, of Jesus' sermon from Mark 7:

⁴⁰ Boris Pasternak, *Doctor Zhivago* (New York, NY: Pantheon Books, 1958), p. 194.

⁴¹ Still in 1935, the camp police records listed Chalid Salim as "invalid." See, for example, "We asked A. C. Salim (invalid) whether he would like to become a teacher [in the governmental camp school] instead of [internee] Najooan." *Dagboek v/d Politie*, Tuesday, June 4, 1935, 3:35 PM.

Listen to me, all of you, and understand. Nothing that goes into a man from outside can make him unclean; it is the things that come out of a man that make him unclean. ... Can you not see that whatever goes into a man from outside cannot make him unclean, because it does not go into his heart, but through his stomach and passes out into the sewer?⁴²

Pontius Pilate, in contrast, with his all-signifying and self-important hands washing, would make an exemplary clinician (or patient) in Salim's book.

Schoonheydt means "Beauty" in Dutch. In Schoonheydt's case, this would be a particular kind of beauty, something like "pretty," "neat," "cute," or, most of all, "clean."⁴³ There are a number of photographs taken of the doctor inside or in the vicinity of the camp, photographs commissioned to others or shot by himself. All of them in multiple variations show him in a white uniform, or at least wearing white trousers, white shirts, white shoes, white cap, white face, of course, and, as one thinks of this whiteness, pale eyes as well.⁴⁴ There is not the slightest suggestion of a stain, sweat stain, stain of dirt or blood. Nothing at all that might indicate a leaking body. The doctor is cute, neat, and clean, and in this way he is *blasé*. Many of the internees, Salim including, mistook Schoonheydt's blasé attitude that he liked to show to them—an outgoing person, not brutish, not a sadist—for friendship. They got a shock when the doctor's book on Digoel was published and when some copies arrived at the camp.⁴⁵ Schoonheydt wrote about the internees as pathological cases, mentally sick people, all of them. He turned out not to be friendly, but cute and charitable—*immune* as both his colonial and medical creed prescribed. *Immunis* in Latin means "a release from reciprocal social obligation."⁴⁶

A mouse is said to "repeatedly wash itself when confronted by a cat."⁴⁷ It is remarkable how anxiously stains of dirt, sweat, or blood are avoided, open and decaying bodies—bodies of the masters, that is—how rarely such stains and bodies are present in the colonial imagery of the time. The Schoonheydts do not leak. It takes an

⁴² Mark 7:14–18.

⁴³ According to my MacBook dictionary, *neat* means: "arranged in an orderly, tidy way, well groomed, or well organized, done with or demonstrating skill or efficiency, not diluted or mixed with anything else, clean, free from impurities, from *nitere* 'to shine' ... from *nitere* 'to shine'; also "bright (now obsolete)."

⁴⁴ See, for example, Schoonheydt as a medical Royal Netherlands East Indies Army medical officer, shortly before his departure for the Netherlands East Indies. *KITLV Special Collection*, Imagecode 18996.

⁴⁵ "To a question whether Boven Digoel fulfills its purpose as an internment camp as it is, in its present form, the answer is affirmative and without any reservation. This is based on the following reasons: 1: excellent location and layout of the camp; 2: reasonably good climate; 3: since 1930 certainly, satisfactory state of health on the location; 4: great difficulty to escape; 5: sparse and backward Papua population that for the time being is not susceptible to the communist and nationalist propaganda ... There are some people, of course, who wish a mountain climate for the rebels, something like in Davos, perhaps, with the communists comfortably established in houses built of stone, with views of green and lush pastures." Schoonheydt, *Boven-Digoel*, pp. 96–97. As for Salim's reaction: "We have ordered fifty copies [of Schoonheydt's book] for the camp ... It has arrived on one rainy evening, and I decided to have a quiet hour in my little hut in the camp ... I opened the book. If the author were present at the moment, I would jump at his throat! This night I could not sleep at all ... Some of other internees burned the book and some others threw it in the river. In the morning, the book still lay on the floor where I threw it as if it were a snake. It took several days before I picked up the book again. I cleaned it from the dirt, and put it on my bookshelf. Then I read it, and since then, I have reread it many times." Salim, *Vijftien jaar*, p. 384.

⁴⁶ Napier, *The Age of Immunology*, p. 24.

⁴⁷ *Ibid.*, pp. 6–7.

outcast, writer or doctor, but also a misfit, to show the bellies of the masters as they are. Louis-Ferdinand Céline, in a raw and rare novel published in the 1930s, describes the French colonial officials as they return from Europe to their colony in West Africa:

The mosquitoes had worked them over, sucking their blood and pumping their veins full of poison that would never go away—Treponemas were filling away their arteries—Alcohol was corroding their livers—The sun was cracking their kidneys—Crab lice were clinging to their pubic hair and eczema to the skin of their bellies—The searing light would scorch their retinas! In not so long a time what would be left of them? A bit of brain—To do what with, I ask you?⁴⁸

* * *

Arahmaiani Feisal, a contemporary Indonesian painter and dancer, has a particular performance in her repertoire. As she begins, she invites whoever in the audience feels like it to come up to her on the podium. Then she offers each of them one of the several highlighters she has ready, and asks them to write on her body: somewhere, wherever and whatever they might think important at the moment, in whatever language they feel like writing at the moment. Of course, many hesitate and are confused at first. Still, they write—first, on Arahmaiani's arms and her hands, then on her calves as she raises the hem of her long skirt, and then on her shoulders as she takes off her blouse and remains only in her bra. I heard that sometimes, when there is no more space to write on, she strips naked, and the possibility had heavily been there all the time and was increasingly so, also in the performance I saw.

On the occasion I saw, people wrote proper and good words at first—*Love, Trust, or Peace*. With the passing minutes and heightened awareness of what was going on, however, as people wrote on Arahmaiani's underarm, on the bottom of her feet, on her belly, and her cheeks, other words appeared, not simply good, like *Thank You, Help Me, or Fuck you*.⁴⁹ The writing, and there could be no other way to put it, *ravaged her body*.

What Arahmaiani does is an act of proving that there is a power in a body that is written on, touched, wounded, or ravaged—a power of a body in itself, indeed a power of *healing*. There were others before like Arahmaiani, and especially in the dark places. In the Boven Digoel camp, in a school that the internees were permitted to open for their children, an internee-teacher is remembered to have acted to prove the same thing:

Uncle Zainal Abidin was a young man from Silungkang [in Sumatra]. At the time of the uprising in 1926, he was wounded in the stomach by a saber of a Dutch soldier. There was still a deep scar, and he would show the scar to the pupils

⁴⁸ Céline, *Journey to the End of the Night*, p. 98.

⁴⁹ As Ronell may say, Arahmaiani performs a body "still capable of being sacrificed ... [and only] this body retains and persists in making sense." Ronell Avital, *Stupidity* (Urbana and Chicago, IL: University of Illinois Press, 2002), p. 188. Even death of such a body may become "raising or uprising ('insurrection' is also a possible meaning of the Greek term)." Jean-Luc Nancy, *Noli me Tangere: On the Raising of the Body* (New York, NY: Fordham University Press, 2008), p. 18.

during the class as he was telling them stories about Dutch brutality in Silungkang and in other places.⁵⁰

By the same act, the people like Arahmaiani or Zainal Abidin might be trying to show us that there is something incapacitating and “frightening” in people “with nothing wrong with them.” Louis-Ferdinand Céline, again, described his friend Robinson, a disabled veteran of the European Great War, as he came to him with an unexpected wish to become his medical assistant:

“Sick people smell of piss, don’t they?” he said.

“Yes, and sweat—”

“All the same,” he said slowly after thinking it over, “I’d have liked to be a hospital orderly.”

“Why?”

“I’ll tell you—because people with nothing wrong with them, you can’t get around it, are frightening—Especially since the war— ... but when they’re sick, no two ways, they’re not so frightening— ... Don’t you see it that way?”

“Yes,” I had to say.⁵¹

* * *

Neither Dr. Schoonheydt nor Salim are heroes to me. Arahmaiani, Zainal Abidin, and Robinson are. Pandoe and his friends are as well.⁵² Pandoe and his friends are internees of Boven Digoel and fictional figures in two novels from the camp time, rambling and take-no-prisoners novels, “drugstore reading” or “gutter literature,” one might easily say from the look of them. Yet they remind me, say, of Céline’s writings, for they are also consummate, powerful, and almost not literature at all.

To all evidence, former internees wrote both of the two novels.⁵³ One author is known from other sources. His name was Abdoe’IXarim, and he was remembered as the spirit of the camp’s life when he was there, most of all as the founder of the Digoel jazz orchestra, *Digoel Sneert* (Digoel Jeer).⁵⁴ Abdoe’IXarim was released from the camp after a few years of internment, and then he evidently wrote his *Pandoe Anak Boeangan* (Pandoe the Exile). The author of the second novel did not sign his or her name (it might be Abdoe’IXarim, too). *Minggat dari Digoel* (Running from Digoel), the second novel, was written at about the same time as the first one, around the middle or late 1930s.⁵⁵ Both novels describe an escape from the Boven Digoel camp—or, rather, an

⁵⁰ Trikoyo, “Cerita Digul Cerita Buru,” *Wage*, 8 Desember, 2006, n.p.

⁵¹ Céline, *Journey to the End of the Night*, p. 264.

⁵² “Pandoe” is a common Indonesian name and also means “guide.”

⁵³ The author of one of the novels insists (as was, of course, usual for the popular literature of the time) that all in the novel “really happened,” and that he or she “heard about it from friends who had witnessed the events.” n.a., *Minggat dari Digoel*, vol. 1 (Solo: Awas, n.d.), p. I.

⁵⁴ Salim, *Vijftien jaar*, p. 239.

⁵⁵ “When I still sat in the elementary school, the Instituut Boedi Oetomo in Blora, I enjoyed photographs in a book, *Minggat dari Digoel*, that was published in several thin volumes. Some photographs showed figures

effort to escape. There is nothing else in the novels, in fact, but the escape, or the effort to escape—nothing else, that is, except medicine.

An escape from the Boven Digoel camp, an attempt to escape, was a surreal theme to choose. Running away was in itself a surreal idea. Only an extremely small number of prisoners ever attempted it, and, if we believe the camp records, none of them succeeded. The line between courage, madness, and suicidal impulse was thin in each attempt. Escapees were hunted down, some turned around themselves after days, weeks, or months of wandering. Sick, hungry, and exhausted, they asked to be taken back. Others, who attempted to escape, disappeared without a trace. People of the camp thought of them as being killed by animals or by the people of the forest—killed and eaten, as the camp authorities liked to put it, and as most of the internees actually believed it. If the escapees evaded both the animals and the cannibals, it was assumed, they were killed by one of the plethora of diseases of the dark place around the camp.

An attempt to escape, of course, at the same time, was the most robust act of courage one could imagine. The very few who dared to do it ran away not only from the camp site, but also ran against the basic tenets of the camp and, in fact, against the tenets of modern society, of which the camp was the farthest extension and the most categorical articulation. There was hardly any argument of enlightened and civilized reason on the escapees' side. Theirs certainly was an attempt at freedom, but it was next to impossible, in the world as given, to locate the space of freedom toward which they were so stubbornly moving. That space, if any, was beyond enlightened and civilized reason and also imagination, emotion, and pathos—this in spite of a fact that a vague sense of that very space and some eagerness to reach it might have been present in each and every one of the captive people who stayed in the camp. The escapees' was a pioneer mentality:

... pioneer mentality that induces us to abandon those parts of self we can no longer sustain, [and] to run off in search of something new because we can no longer tolerate the place that should be "home."⁵⁶

Those who dared to run were "liminal people," and theirs was "liminal wandering"⁵⁷—"for every one of them who becomes transformer of life there are thousands who die anonymously ..."⁵⁸

To enter the New Guinea forest from the camp, even from a merely technical point of view, was the most daring adventure. It indeed was stepping into outer space. The soldiers from the camp occasionally entered the forest, in search of the escapees, to explore the surroundings of the camp, or to punish the people of the forest (for alleged

of inhabitants of Digul: men, women, and children. They had dark skin, kinky hair, and they all were almost entirely naked. There was also a photograph of a panorama of a broad river and jungle, and also a photograph of the body of a man whose head was cut off. The captions to the photographs were in Malay, which left less of an impression on me, because I did not yet understand Malay at the time." Pramoedya Ananta Toer's introduction to his edition of *Cerita dari Digul* (Jakarta: Gramedia, 2001), p. vii.

⁵⁶ Napier, *The Age of Immunology*, p. 11.

⁵⁷ *Ibid.*, p. 242.

⁵⁸ *Ibid.*, p. 38. Abdu 'lXarim gave his own definition of the liminal people, in a little poem he inserted in the novel: "Those who feel they already are dead. / Dead forever, dead and buried in marshes and in forest. / Those who feel they build a new motherland—" Abdoe'lXarim, *Pandoe Anak Boeangan*, pp. 4–5, 84.

headhunting, most of the time). They went just for a few days and always in large and well-equipped groups. But they still so resembled astronauts, with their compasses, with their NASA-like food, and, *this especially*, their supplies of medications, antiseptics and pills, quinine, first of all.

Our cargo consisted of necessities each patrol had to have—rice, mung beans against beriberi, dry fish. The mung beans were later replaced by the tablets of vitamin-B1, which were lighter to carry.⁵⁹

The heroes of *Running from Digoel*, one of the novels, entered the forest, three of them.⁶⁰ They were strong, young, and healthy. They entered the liminal space and moved toward freedom. They gave all their strength and thoughts to the running, and yet, after many days and nights of moving, they still remained the people of the camp. Their inability to cut themselves off from the camp is as great a part of the drama as the running itself. Here, in fact, is the drama of the novel—and it happens almost entirely in a space and as a moment of medicine.

One day, Sontani, one of the escapees, almost drowns as they cross a tributary of the Digoel River that is in their way. One instant from death, at the crucial moment, Saleh, one of the Sontani's comrades, recalls a life-saving exercise that was part of the camp's first-aid training.

Saleh now applied artificial respiration—it means raising the patient's arms high, up to a right angle with the body laying horizontally on the ground, and then moving both hands down and up, and down and up again. Sontani took a breath and regained consciousness.⁶¹

Kunstmatig ademhaling ("artificial respiration") is left in Dutch, as it was clearly taught in the camp, and it sticks out in the text otherwise Indonesian.

The three friends continue on their journey, persist, lose their way, and they are exhausted. Freedom is clearly ahead, but—as they get tired and then sick and then very sick, one after the other, the forest is deadly and the camp remains present. Both the freedom and the camp—and both with an equally increasing intensity—are being imagined. Medically imagined!

Their clothes were sopping wet and there was no fire at which they could dry them. Most important, their supply of quinine was running out.⁶²

As Sontani suffers another sudden and terribly strong attack of malaria, in spite of all their resolve, they begin to think about stopping and turning back.⁶³

⁵⁹ Salim, *Vijftien jaar*, p. 309.

⁶⁰ One of the escapees is described in the novel as "well-built and strong like Tom Heeney, a former *zwaargewichtkampioen* [heavy-weight champion]" Another of the escapees: "Is a young man with a body strong and vigorous like Jack Dempsey." *Minggat dari Digoel*, vol. 1, p. 1. (Tom Heeney, alias Tommy gun Heeney, lost a fight for the world heavyweight boxing championship in 1928. Jack Dempsey became a world champion, in boxing, when he defeated Georges Carpentier in 1921.)

⁶¹ n.a., *Minggat dari Digoel*, vol. 3 (Solo: Awas, n.d.), p. 51.

⁶² Abdoe'IXarim, *Pandoe Anak Boeangan*, p. 43.

⁶³ *Minggat dari Digoel*, vol. 3, p. 48.

As the three men's bodies get increasingly bruised, dirty, and sick—ravished—the possibility of turning back increasingly resembles a medical decision. Resigning the will to be free increasingly resembles the camp hospital, Dr. Schoonheydt, and internee Salim.

It cannot be repeated too often that this was an attempt at freedom. Because this was a freedom quest, this running away from the camp had also inevitably to be a robust and courageous attempt at answering some of the fundamental questions of modern time.

In his *Philosophy of Right*, Hegel conceives of the “rabble” (*Pöbel*) as a necessary product of the modern society: a nonintegrated segment in the legal order, prevented from partaking of its benefits, and for this very reason delivered from any responsibilities toward it—a necessary structural surplus excluded from the closed circuit of social edifice.⁶⁴

Julia Kristeva (among others), after Hegel and more clearly than Hegel, sensed energy in the *Pöbel*. She recognized hope and indeed a possibility of freedom in rabble, in what was left out, and what was excreted from the body, the body social as well as a carnal body. Kristeva perceived power “in the remainder”:

... the remainder appears to be coextensive with the entire architecture of nontotalizing thought. [It is] ... a residue in every system ... ashes for instance. ... [The remainder is] challenge to our mono-theistic and mono-logical universe ... [There is a connection between] ... defilement and genesis. That is why the poet of the *Atharva Veda* extols the defiling and regenerating remainder (*uchista*) as precondition for all forms: “Upon remainder the name and the forms are founded, upon remainder the world is founded ... Being and non-being, both are the remainder, death, vigor.”⁶⁵

If there is energy and vigor as well as death, like in a ravaged body, there also may be a healing power in the remainder.

Kant, before Hegel, seems to be writing both for Kristeva and for the Boven Digoel escapees:

With Kant, what is evacuated and left empty is the locus of the Supreme God: every positive object destined to occupy this place is by definition “pathological” ...⁶⁶

Kant's “philosophical formalism,” his particular effort at purity—and what else is a quest for freedom—can be understood as “the emptying of the ‘pathological’ content.”⁶⁷ Which brings us back to the novel and to the big shit, in which *Running from Digoel*, indeed, culminates—big shit, the power of the remainder, and question of healing.

⁶⁴ Slavoj Žižek, *Tarrying with the Negative: Kant, Hegel, and the Critique of Ideology* (Durham, NC: Duke University Press, 1993), p. 224.

⁶⁵ Julia Kristeva, *Powers of Horror: An Essay on Abjection* (New York, NY: Columbia University Press, 1982), pp. 76–77.

⁶⁶ Žižek, *Tarrying with the Negative*, p. 221.

⁶⁷ *Ibid.*, p. 222.

Shit, according to the dictionary “was a word originally neutral and used without vulgar connotation.” In Indonesian, “to shit” is *boeang air besar*; *boeang* is “to evacuate,” and *air besar* is something like “flood.” To give some other examples, *boeang moeloet* (*moeloet* = mouth) is “speaking sincerely,” *boeang obat* (*obat* = medication or potion) is to “fire or shoot wildly.” *Boeangan* means “exile” or “outcast.” *Pemboeangan* means “exile” or “banishment.”

After weeks of struggle through the forest, in the end it was not malaria but dysentery that threatened to stop the progress of the escapees once and for all.

“Ah darn it, Leh [Saleh],” Sontani exclaimed as he made another step. “It looks like I got dysentery. This morning when I did my number two I felt it, and when I made light with a match, I saw blood.”⁶⁸

So they still have some matches from the camp. They are still liminal, far from free and not yet cut off from the camp—and it is again, first of all, a memory of medicine, the culture of medicine, that they carry in themselves, that pulls them away from the open and back to the cage. “As I know,” Sontani recalls in his increasing weakness,

When a friend was admitted [*diopname*] to the Digoel hospital and was diagnosed with dysentery, they did not allow him to eat anything, only milk and biscuits, and he became healthy again.⁶⁹

Still, another step and another day, against all odds, they are heroes, without milk and biscuits, they move on, forward, into the open and away from the camp. This time, it is the turn of the next member of the group, and the next attack of the sickness, most serious of all.

They moved on. But they walked slower and slower, as they all had to stop and defecate so often. This was the dysentery. Even when they stopped at a place to have a rest for the night, they did not sleep at all. The whole night, till the morning, they shat blood.⁷⁰

Thus they stumbled, heroes—or, to say with Heidegger, mortals, in fullness of the human that the philosopher could only imagine—toward freedom and toward death. Toward escaping, really. It seemed that they had gotten as far as they could ever get, as anyone can ever get.

It was getting dark in the forest and the men lay down and smoked. All of a sudden two figures, *Kajakaja*, the people of the forest, appeared, grew bigger—and stopped in front of them.⁷¹

What happened next, as far as I know, is unique in the whole body of writing on Boven Digoel, scholarly, documentary, fictional, and in the whole body of writing on the colonial empire at the time as well. There, on the page of the novel, are two full lines in a language (supposedly this is the language) of the people of the forest,

⁶⁸ *Minggat dari Digoel*, vol. 2 (Solo: Awas, n.d.), p. 37.

⁶⁹ *Ibid.* The word for “admitted,” *diopname*, is a liminal word fitting the liminal space. Indonesian here helps to make a passive verb from the Dutch noun *opname* (“admittance”) by adding the prefix *di-*.

⁷⁰ *Ibid.*

⁷¹ *Ibid.*, p. 25. The novel uses various terms, like *orang2 hutan*, “people of the forest,” or *bangsanja kopensneller*, “nation of head cutters.” *Minggat dari Digoel*, vol. 1, p. 2.

savages, cannibals, humans beyond the pale and limits of civilization. They are there, talking to the three men, to the camp people, to people “like us,” almost. The Kajakaja of those two lines are confident, they know that their words will be understood and that they will be answered back. There is at least a possibility of dialogue! Not waving of arms, not shrieking:

“nDa, nda, bapa Komine Tanahmerah! bapa Komine kaimo! owok ndaaa! Kajakaja kaimo!” so they said.⁷²

Something even more extraordinary happened next—more than just words being spoken. A touch happened. Carnally, limits were pushed against—limits as given to the empire and the camp, of manners, culture, and particularly of medicine. Something happened, as unhygienic as it could be—in fact downright dirty. What happened next, in that bizarre, yet *touching* moment, as the savages stopped in front of the camp escapee—was a kiss!

No Brezhnev kiss—but wet lips against wet lips. It could not be otherwise in that hot and humid forest—no escape from it, exchange of fluids! Admittedly, of course, the people of the forest never kissed that way; ethnographers tell us so.⁷³ But we are still in the realm of the Kantian (and the novel’s) sublime.

Sontani was nervous. He shook his head and made a gesture with his hand as if he tried still to say something. But then, suddenly, he made a step forward to the Kajakaja, who also reached to him, and, straightaway, they embraced and kissed. Sontani even paid no attention to the bad smell of the other. He relaxed, seeing how the Kajakaja became happy, and they both broke out in laughter.⁷⁴

There is something equally revolutionary and revolting (this is how revolutions probably feel), as they—the escapees, the savages, the author, and the reader—reach a point so far from the camp and, it would seem, so close to freedom. This is also a point, and not merely medically speaking, as close to death as it is to healing.

It is now Doelrachman, the third member of the group, who is ill. He lies on the leaves and branches on the ground. The Kajakaja who has just kissed Sontani returns with his friends to the forest. But after a few hours they come back.

The Kajakaja men returned ... and they brought with them another Kajakaja, a man already quite past his prime ... One of the Kajakaja explained that the old man’s name was Kajun and that he was a healer.⁷⁵

The old man bends over the sick Doelrachman on the ground. Then, with the other savages, he leaves.

⁷² *Minggat dari Digoel*, vol. 2, p. 28.

⁷³ It gives me a great pleasure to juxtapose this scene with a scene photographed a few years later somewhere in that area—the picture of an “anthropologist-doctor” in a most awkward position at an act of “nose-kissing” a savage. The Papua man appears to be having much more difficulty with the acting than the anthropologist, but he more than makes up for it by his fabulous headdress made of the plumage of the birds of paradise. See Jan H. Boelaars, *Papoea’s aun Mappi* (Utrecht: De Fontein, 1957), p. 144.

⁷⁴ *Minggat dari Digoel*, vol. 2, p. 26.

⁷⁵ *Minggat dari Digoel*, vol. 4 (Solo: Awas, n.d.), p. 74.

Not long after Kajun left, all of a sudden, Doelrachman shat, and so much excrement and of such an extraordinary stench spreading through the whole area that his friends in the greatest hurry had to move and find a place to stay overnight at quite a distance. After the big shit, and just like that, Doelrachman was fine.⁷⁶

4. The Birth of the Nation

Sontani and his friends, the Boven Digoel fictional heroes, ran for freedom. They got as far as to enter into a dialogue with the savages and in the language of the savages. They touched the savages and were touched by them. One of the Boven Digoel heroes, at least, at the edge of freedom, was healed. All that happened in a space as wild and as dirty as the worst of medical nightmares would have it. Were the escapees to succeed to the end, were they to get free and healthy this way, would not the antiseptic medical wisdom—Western, colonial, and camp wisdom—crash down? Would not this wisdom—clinical and modern—at least become a little less overwhelming? Were the escapees to reach freedom entirely their way, might it not open some real new beginning, as savage, inevitably, as the passage through the forest, as smeared with blood and other bodily waste, and as vulnerable—let us say—as a newborn baby?

* * *

Pandoe is the name of the hero of the second novel about the camp, *Pandoe Anak Boeangan* ... Pandoe the Exile. Pandoe was also a Boven Digoel internee who attempted to escape. Like Sontani and his friends, Pandoe came close to the edge, and also, at the same ultimate moment, he got lost. He started on with a group of five, was separated from them, and then remained alone.⁷⁷ Also, in front of him, as he lay exhausted and ill, at the end of his strength, the people of the forest appeared. He was neither killed nor eaten. His story, in fact, moved beyond the lightning encounter with the forest people experienced by Sontani and his friends. Pandoe remained in the savages' care! He was given a place to stay in a hut (a nest, rather) built high in a tree, as it was the Kajakaja custom.

Pandoe recovered, in a community of the wild people, in a small clearing in the forest, only a few days' distance from the camp. After he gained back his health, the people of the forest, following their code of good manners, brought him one of their young women, Okini, and had Pandoe marry her.

⁷⁶ Ibid., p. 75.

⁷⁷ The five keep together until, one day, a snake bites Pandoe, inflicting a wound that the escapees believe to be almost certainly fatal. "Pandoe's body became emaciated with every day and completely white, while the wound got bigger and bigger. It was not possible for the others to stay with him and wait. ... 'We agreed that, if one of us would become ill and could not go, so that he would endanger our progress, the rest of the group would have to leave him.' ... They all said goodbye and without a word anymore, without looking back at Pandoe, the four of them left. As if nothing at all was happening behind their backs." Abdoe'IXarim, *Pandoe Anak Boeangan*, p. 46.

It was already a year since Boeng ["Comrade" or "Citizen"⁷⁸] Pandoe ran away from the camp, and it was already half a year since he got married among the Kajakaja ... His wife's love grew stronger with each day, but Pandoe's love was willy-nilly. Okini did not understand, why Pandoe's feelings were so lukewarm, but she concluded that this was the way it was among the Communists when they married.⁷⁹

Still, Pandoe lived in a twilight zone. The camp was not really there, but it was in the air, the smell of it, and, indeed, it was coming (and who knows how much Pandoe secretly wished that it would). During one of the regular military patrols on lookout for escapees from the camp, a troop of soldiers entered the clearing.

It is not enough just to say that now Boeng Pandoe's face was white. It was like that of a corpse, when there is no more blood in human body. Pandoe curled up in his place up on the tree and stayed only breathing. He did not move, not even a finger.⁸⁰

After a search that did not discover anything special, the patrol was about to leave. But its zealous commandant decided to give it one more shot.

Oh—what a misfortune! One of the soldiers notices a Papua man but with hair that is not kinky ...

"Look here, guys, a Kajakaja who has hair like we people."

... Quickly, the commandant approaches:

"Zoo—Modern Kajakaja, hé—?"

Boeng Pandoe has to [get down and] step forward, and he answers:

"It is true, sir. I am a Communist Kajakaja."

The soldiers hold their bellies, they are laughing so hard ... True—when anything like that has ever happened! Too bad that Simun, the camp photographer, is not here ...

Interrogation is finished, a rope is tied around Boeng Pandoe's neck and twisted around Boeng Pandoe's body, arms, and legs. As a captured escapee, Boeng Pandoe will now be brought back to the camp.⁸¹

Not yet:

⁷⁸ *Citizen* Pandoe seems to me to be the best way to translate *boeng*. Indonesian *boeng* means literally "elder brother." It became widely used in another meaning only years after the time of Digoel. During an attempt at another revolution, in 1945–48, the Indonesian freedom fighters began to address each other almost exclusively as *Boeng*, meaning "Comrade," "Brother," or "Citizen." Trikooyo, who grew up as a child of an internee in Boven Digoel and who was then interned in the Buru camp by the Indonesian regime of Suharto in 1966, recalls the further history of *boeng*: "We in the [Buru] camp stopped soon using 'boeng,' because it smelled of struggle [*berbau perjuangan*], and this was not to the liking of the authorities. 'Boeng' was substituted by 'mas' [young man] or 'pak' [father]." Trikooyo, "Cerita Digul Cerita Buru," *Senin Wage*, 13 November 2006, n.p.

⁷⁹ Abdoe'lXarim, *Pandoe Anak Boeangan*, p. 62

⁸⁰ *Ibid.*, p. 63

⁸¹ *Ibid.*

There was a scream, sharp, and touching the heart of all who could hear it. Okini is here, kissing Boeng Pandoe and crying.⁸²

Once more it comes to touching—beyond the limit of the civilization as it is given, touching neither clean nor soft and in all probability infectious. Certainly infectious. Even the soldiers, who are already holding Pandoe on the rope, are getting close to catching the bug.

The soldiers, who just before had been roaring with laughter, all of the sudden get silent when they see this Kajakaja woman kissing Boeng Pandoe, and as they notice the other Kajakaja people who gathered around to behave as if they were about to move forward.⁸³

The situation is getting dangerously close to something truly serious happening, something truly serious being transmitted, people getting dangerously close to each other. Appropriate measures have to be taken without a delay.

Quickly, the patrol commandant gives his soldiers an order—to get ready and to point their rifles at the Kajakaja people ... Boeng Pandoe explains to the commandant that this woman is his wife, and he does not conceal anything anymore. The commandant is even more amazed ... Yet, what could be done ... they cannot take a wife with Boeng Pandoe because their orders are to catch and bring escapees from the camp, nothing more.⁸⁴

Okini is crying, and she implores the commandant to release her husband because she loves him. "She loves him, with a true love, not the love that remains on lips only."⁸⁵ Which, of course, does not help. Boeng Pandoe would have to go, and Okini would have to stay.

Once again, Okini tries to get close to the commandant. She raises three fingers on her left hand, while her right hand points to the moon. This is a sign meaning that she is "three months pregnant."⁸⁶

Okini screams, she kisses her husband on the neck, she kisses him all over his body, and she does not want to stop.⁸⁷

The reader is made to feel that something in the forest still might happen, that in the twilight zone between the camp and freedom something truly new still might be born. Okini, at least, is pregnant.

All the soldiers are now filled with compassion. They can see Okini as she is, and that what they do is taking her husband away ... This woman cries tears of blood.⁸⁸

⁸² Ibid.

⁸³ Ibid., p. 64. According to a report by the Dutch journalist M. van Blankenstein, "Next to the internment camp is a military camp that is surrounded by barbed wire. One makes efforts to prevent any contact between the two camps out of a fear of infection [*bmesetting*] to the soldiers." Dr. M. van Blankenstein, "Het verbanningsoord aan den Boven Digoel, III," *Avondblad N.R.Crt.*, Tuesday, September 11, 1928.

⁸⁴ Abdoe'IXarim, *Pandoe Anak Boeangan*, p. 64.

⁸⁵ Ibid.

⁸⁶ Ibid.

⁸⁷ Ibid., p. 65.

Even this last sentence does not feel now like one of the maudlin, often disgusting, phrases that stuffed the Indies colonial romances of the same time.

All Kajakaja have tears in their eyes, too, as they watch what is happening to Boeng Pandoe ... Boeng Pandoe, whom they already consider a member of their family, of the same blood, of the same nation, and of the same country [*se-da-rah sedaging, sebangsa dan setanah air*]. But what be said! Boeng Pandoe is taken away—⁸⁹

“Of the same blood, of the same nation, and of the same country,” Kajakaja feel. This fits perfectly with calling Pandoe a *Boeng*, a “Comrade,” or a “Citizen.”

Okini is left behind. She rolls on the ground, and she curls upon the spot on the ground where the footprints of her beloved might still be ...

For many days, the place remained desolate—like all the battlefields of the world remain desolate after the war is over.⁹⁰

* * *

This particular war had been over before it began. Whatever happened in the Kajakaja clearing in the forest after the soldiers’ departure, the camp—and the colony and the world beyond—remained unaffected and uninfected. The escapes failed. The way that Pandoe and his friends traveled did not lead to freedom. Soldiers did not catch the bug, and Pandoe was tied and returned to the camp. He was punished with a month in the camp prison (which appears lenient, as the usual sentence for attempted escape was three months).⁹¹ There is no mention, also, of Pandoe being mishandled. Rather—at least this was the rule in the camp—the doctor checked the returnee for possible diseases he might have brought from the forest to the camp.

To tell the whole truth of the novel, Okini’s love for Pandoe was not reciprocated. For one thing, as has been mentioned already, the people of the forest were dirty. They smelled, too, their women were utterly ugly, and Okini, as the novel tells us, was no exception.⁹² Being of the camp, an authority, a guard, or an internee—being of the

⁸⁸ Ibid.

⁸⁹ Ibid.

⁹⁰ Ibid.

⁹¹ Ibid. The internees who have attempted an escape [*ontvluchting*] were “guilty of an offense according to article 230 of the Criminal Law.” *Verbaal November 1 1930 K 24/Volksraad zittingjaar 1930-1931, Onderwerp 1. Begroting van Nederlandsche-Indië voor 1931*, p. 26. But there was a constant discussion, throughout the camp’s existence, about how exactly to apply the law and whether the criminal law was applicable for the internment camp (which was not a penal colony) at all. Sometimes, the escapees served an even longer time after they were caught. See “Goesti Djohan alias Idroes, about twenty-five years old, no. 210 ... attempted to escape ... was punished with nine months of prison. He has finished his sentence today.” *Proces-Verbaal Wedana*, December 6, 1932, Archief Boven Digoel, no. 202.

⁹² The postcolonial era can be even more crude than the colonial one. It appears that, since Digoel, the Papuan women do not smell so badly to the crowds of males now arriving on the island from the rest of Indonesia and beyond, judging, that is, from the data (medical data again!) on the spread of the HIV/AIDS in the region. Papua became recently number two (after Jakarta) in the number of HIV/AIDS cases. A risk of infection in the Indonesian Province of Papua, in fact, is even higher than in metropolitan Jakarta—much higher. The *case rate* of infection in Papua, reached a decade ago 60.93 for 100,000 persons

civilized—one truly would not wish to be healed the way the savages healed. One would not wish so, not even if a life might be saved—or born—in the process. Neither would one wish to gather medical knowledge the way this people did.

The Jaqai tribe [one of the Kajakaja of the area] understands well the stages in which the fruit develops in the mother's womb. I asked how they attain such a good knowledge, and straightaway they gave me an answer ... "On our headhunting expeditions, we slaughter [*geslachen*] many pregnant women, too, so that's how we learn."⁹³

Just at the time of the camps, new Asian nations were born, the Indonesian nation at the time of Boven Digoel among them. At the same time, at the same historical moment, the child was also born—to Pandoe and Okini—and this is how the novel on the camp comes to its end. Pandoe, the escapee, is back in the camp, out of the camp prison, too, and he does not acknowledge the child. He does not accept what happened:

Eighteen months passed by and Okini reappeared ... a Kajakaja woman appeared at the gate and asked to be let in the camp ... "This concerns a Communist called Pandoe." ...

She told her story: she is looking for her husband, who is the father of her child. The child was about two months old ... She indeed carried the child ... She was turned back. ...

What kind of a human being must this Boeng Pandoe be?⁹⁴

Okini's child, we learn, was a boy—a child as *Indonesian* as a child could be, with a mother from Papua and father from Sumatra—but we do not know much more, not even his name. Okini died soon after she was turned away at the camp gate. She died back in the forest, "of a broken heart." There is a Kajakaja word used in the novel for "died," then translated into Indonesian:

Okini *Kimun* (*kimun* means died) ... Such was the fate of the Papua Goddess.

She fell a victim of a civilized man.⁹⁵

The Indonesian son of Okini and Pandoe died, too, soon after his mother passed on. He was three months old, there was no mother's milk available to him, and, of course, no doctor was consulted in that dark place. Pandoe remained in the camp and went on living in captivity. Rather than thinking (even thinking) of freedom, he was

which was 15.39 times more than in Jakarta, with the *case rate* of "only" 3.96 per 100,000 persons." Yuniarti, Fandri, ed., *Ekspedisi Tanah Papua. Laporan Jurnalistik Kompas. Terasing di Tanah Sendiri* (Jakarta: Penerbit Buku Kompas, 2008), p. 249.

⁹³ Boelaars, *Papoea's aan de Mappi*, p. 51. If this needs to be pursued even further, then, another statement from the same source, "When a woman is pregnant, the fruit is cut out of the mother's womb, because, especially if it is a baby-boy, the skull has no lesser value than the skull of an adult." *Ibid.*, p. 100.

⁹⁴ Abdoe'IXarim, *Pandoe Anak Boeangan*, pp. 67–68.

⁹⁵ "This novel," Abdoe'IXarim notes in his introduction, "was originally to have a title 'The Fate of the Papua Goddess' [*Nasibnya Dewi Papua*]." *Ibid.*, p. 1.

ashamed: "He was ashamed of having married a woman of the forest ... He worried that his friends would never stop making jokes about it."⁹⁶

Unlike Okini and her and Pandoe's son, and like Boeng Pandoe, the Indonesian nation that was born at the time of the camps has not died. There have been many good doctors around to keep it alive.

After a while, after several months, what happened lost all importance in Boeng Pandoe's view of life and in his sense of what living among other human beings might mean—the other human beings, that is, those who are considered the civilized ones. The story was forgotten.⁹⁷

⁹⁶ Ibid., p. 66.

⁹⁷ Ibid., p. 69.