His mother became medicine: drinking problems, ethical transformation and maternal care in central Uganda

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‘It was a sign of love.’

This unexpected interjection came from our driver, Noah, who until then had been sitting quietly on a plastic chair at a wooden coffee table drinking a tall ceramic mug of smoky sweet milk tea. ‘Other ghosts just keep quiet and kill someone, and you never know the reason why. What she did was a sign of love,’ he continued, trying to help us understand.

‘Since September [2015], Kato has not been drinking,’ Jjajja Nalunkuma said. ‘He is even looking better now. He was like an old man before … His siblings had been collecting money [to take him to a herbalist for treatment] because they were so worried about him; he has children.’

We had come to visit Jjajja Nalunkuma1 in the hope that she would be willing to tell us the story of what had happened to her grandson, Fred Kato, some nine months earlier. Jjajja Nalunkuma had been expecting us and readily agreed to retell the story that my friend Sr. Jane had first told us over Skype in February 2016 and which was the cause of our visit. Sr. Jane was among the siblings who had contributed to the project of saving the money that they would need to visit the local herbalist to buy a commonly used herbal emetic that they planned to put in Kato’s beer. This technique for inducing vomiting and a life-long aversion to the smell of alcohol is frequently employed by families looking to end a loved one’s problematic alcohol use. But, in this case, the situation changed before they reached this step.

Jjajja Nalunkuma continued: ‘Before the time had come to call the herbalist, Kato arrived one night driving his motorcycle. I saw the motorcycle parked here, and then saw him emerging from behind the house. Suddenly, he threw himself down on the ground and cried aloud saying, “I am your daughter [Kato’s mother], I am not Kato. Let me kill him.” Then [his mother] began beating him.’

‘How did she beat him?’ George asked.

He was beating himself. He hit his head on the ground. Then blood oozed from both the nose and ears … I pleaded with her, saying, ‘Please don’t beat him. You are going to kill

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1 All quoted speech in this article is based on recorded interviews transcribed and translated from Luganda by George Mpanga. In Luganda, the word jjajja refers to ancestors, forefathers and one’s parents’ parents and all of their siblings. It can also be used to refer to healers known as basamize. Jjajja Nalunkuma is Kato’s mother’s mother’s sister. All personal names have been changed to protect the confidentiality of those who participated in the study.
At 3 a.m. she finally left him. He fell there on the old sacks and was like a dead person. That is where I slept too. Sometimes I woke to feel his pulse and to check and see that he was still breathing. I cleaned blood off him, and I covered him with my old cloth. At 5 a.m., he woke to ask, ‘Where did I sleep?’ I answered him ‘You slept here.’ He looked down at himself and saw that he was looking filthy. I told him, ‘Your mother beat you and said that if you won’t stop drinking alcohol, she will kill you.’ [After he slept a while longer] I gave him water for bathing and another relative’s trousers and a shirt. After dressing, he packed his dirty clothes in a sack and went.

After four days, he came back with his wife and told me, ‘Jjajja, I cannot eat food. When I try to eat food, I smell a terrible smell. Jjajja, I will not drink alcohol anymore; please tell mother to leave me alone.’ I answered him, ‘I know she is here, listening.’ Then I said, ‘Halima, please leave your child, let him eat food. Please do not tamper with his stomach again. I appeal to you. If he drinks again, bring him [to me] and beat him from here. If you want to kill him, you will kill him here in my home.’ He too knelt down and said, ‘Mama, if you are seeing me or not, I will not drink again, please.’

So, it was his mother who made him to stop. We never invited her. We didn’t bother with the medicine. His late mother became medicine on his side. She moves with him. If he makes a mistake, he can get a problem. We never used the money we had saved for the herbalist.

This story has been a point of reference for us as we have worked to understand the place of spiritual and somatic experiences in the lives and recovery narratives of Ugandans working to leave histories of problematic drinking behind. Many of the stories we have collected since we started collaborating on this project in 2015 turn on moments such as this, moments in which a person is overwhelmed by a force, a sensation, a feeling, a being, which seems to come from outside themselves. Together, these narratives have required us to consider the effects of interventions that come not only from family members or friends, but from others who ‘cannot exist’ (Evans-Pritchard 1937) – the ancestral spirits, the lubaale spirit Kawumpuli and God. In this article, we explore Kato’s story as one of many narratives of self-transformation that ask us to consider the effects of such encounters.

While many anthropologists have written about the importance of collectivities of human and non-human actors in processes of ethical transformation, only a few have included spiritual beings such as Kato’s mother as agents in these collectives. In following Kato, Sr. Jane and Jjajja Nalunkuma in their consideration of Kato’s mother’s spirit as the person responsible for his life transformation, we join scholars including Amira Mittermaier (2011; 2012) and Michael Lambek (2010) in their efforts to attempt to describe processes of ethical transformation where the self is understood to be more porous (Taylor 2007; Tambiah 1990). As we elaborate below, stories such as Kato’s demand that we understand relations with spiritual beings not only as an outcome of efforts at self-transformation (Luhrmann 2012; Cassaniti and Luhrmann 2014) but also as playing a key role in those transformations.

Further, we argue that this particular instance of care allows us to better understand the nature of care and its reception. The forceful and non-consensual nature

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2For a more extensive discussion on this point, see Scherz (2018).
of Kato’s life-transforming encounter with his mother’s spirit illuminates a particular set of challenges that may sometimes be involved in ‘being cared for’ (Borneman 1999). To receive the care of another being, human or otherwise, is to engage with forces that may be ambivalent, overpowering, and even violent. Kato’s story helps us to see the work of discernment involved in the reception of such ambivalent forms of care and the possible fruits of becoming vulnerable to the risks of being cared for in this way. In providing us with an opportunity to think about the frequent, and uncomfortable, twinning of violence and care in Uganda, we hope to open up a space for further anthropological considerations of the ethics, risks and possibilities of violent enactments of care across a range of ethnographic sites.

**Crossing the railway**

This article is part of an ongoing collaborative ethnographic study of the ways in which Ugandans living in the southern suburbs of Kampala are attempting to address drinking problems in their lives, families and communities. We have been actively engaged in this study since 2015 and data collection is ongoing.3 There has been a great deal of writing on alcohol in Africa, but most of this literature is quite separate from the study of addiction.4 While anthropologists are now less exclusively focused on the positive integrative functions of alcohol consumption than they were in the past (Douglas 1987; Heath 1987), most recent works on alcohol in Africa have sought to illuminate the role that alcohol plays in efforts to craft and negotiate identities in relation to categories of class, gender, religion and politics. Anthropologists and historians have also made efforts to explore the effects of the commoditization of alcohol, the role of alcohol as a tool for labour mobilization, and the role of alcohol as an object of political importance (Akyeampong 1997; Ambler 1990; 1991; Bryceson 2002; Carlson 1992; Colson and Scudder 1988; Crush and Ambler 1992; Diduk 1993; Green 1999; Huby 1994; La Hausse 1988; McAllister 1993; 2001; 2004; Suggs 1997; Willis 2002; Wilson 1977; van Wolputte and Fumanti 2010). Yet despite the continued importance of these themes, with only a few exceptions (Huby 1994; Colson and Scudder 1988), these works tell us little about situations

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3Our collaboration began in 2007, when China was just starting her thesis research on orphan support programmes in Uganda, and hired George to work as a translator and research assistant. Through that project, we developed a collaborative relationship that became the basis for our current work on alcohol use and the various strategies Ugandan men and women use in their attempts to resolve problems related to alcohol. Over the past thirty months, we have conducted fieldwork together in Uganda for a total of fifteen weeks. During the remaining periods, George has conducted fieldwork independently on a full-time basis, and we have met over Skype twice a week to discuss fieldnotes and transcripts. Our positions and our bodies are read differently by those involved in our research. Being in these spaces together and separately has allowed a greater diversity of observations and interactions than might otherwise have been the case. In May 2017, we further extended the collaborative nature of the project by reviewing drafts of this article in written English and spoken Luganda with Sr. Jane and Fred Kato. We have incorporated their suggestions and corrections into the current version and thank them for their willingness to work with us throughout the revision process.

4For a recent review of writing on addiction in anthropology, see Garriott and Raikhel (2015).
where drinkers and those around them come to define individual drinking behaviour as a problem, and how people work to address this problem. This absence is particularly striking given the high per capita consumption rates noted below.

Drinking is a relatively common and accepted social practice in Uganda. While commercially produced beers, wines and liquors are consumed by those who can afford them, informally produced fermented and distilled drinks are also available at little cost and are commonly drunk in both urban and rural areas. While approximately 58 per cent of people over the age of fifteen claim that they abstain entirely, the World Health Organization (WHO) estimates that those who do drink have an exceptionally high estimated per capita consumption rate of 23.7 litres of pure alcohol per year. For comparison, the WHO 2014 report estimates the per capita consumption rate among American drinkers at 13.3 litres and Russian drinkers at 22.3 litres (WHO 2014).

Partly in response to a set of erroneous 2004 WHO statistics that listed Uganda as having the highest per capita alcohol consumption rate in the world (WHO 2004), the Ugandan government has begun to frame alcohol abuse as a serious problem and to draft new policies and laws to control the sale and marketing of alcohol. The terms ‘alcoholism’ and ‘addiction’ are also becoming increasingly common in media stories about drinking, and concepts such as addiction, alcoholism and recovery are beginning to emerge as specific ‘ways of being a person’ (Hacking 1986) in Uganda, particularly for university-educated English-speaking people.

While the terms ‘alcoholism’ and ‘addiction’ are still only used by a small minority of the population, problem drinking is readily identified by people from all classes using different sets of idioms and diagnostics. In Luganda, which is the first language of most of those involved in our study, people whose drinking has come to be seen as problematic by their friends, co-workers, spouses and other relatives may be referred to as omutamivu (a drunkard), derided as kanywa mugule (a person who drinks while others buy for him), or gossiped about as ekiwanga okusala leerwe (a person whose head has crossed the railway tracks, metaphorically referring to the tracks as a point of no return). Most notably, given the importance of a relative loss of self-control during the sorts of bodily and spiritual experiences of concern to us in this article and in our broader project, men who drink in ways that are considered problematic

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5For earlier critiques of this problem, see Room (1984) and Marshall (1990). For discussions on the physical and social effects of excessive alcohol consumption in Uganda and sub-Saharan Africa from a medical perspective, see Bajunirwe et al. (2013), Beaglehole and Bonita (2009), Karamagi et al. (2006), Macintyre (2011), Mbulaiteye et al. (2000), Tumwesigye et al. (2012), Wolff et al. (2006) and Zablotska et al. (2006).

6For a detailed discussion of the demographics of alcohol consumption in Uganda, see Obot and Room (2005).

7An official at the Ugandan Ministry of Health suspected that the drop in the WHO estimated per capita consumption rate for all people aged fifteen and over from 19.4 litres of pure alcohol per year in 2004 to 9.8 litres in 2014 was not the result of a change in consumption practices, but a correction of the former inclusion of a lightly fermented porridge, obushera, in the earlier count. We have not been able to confirm this as the basis for the former statistics, but the fact that the 2014 report now lists the 2003–05 estimate as 9.9 litres indicates that the WHO also recognizes an error in the earlier report. As noted in the text, when the per capita consumption rate is limited to drinkers, Uganda’s rate of 23.7 litres still remains exceptionally high.
may be derisively referred to and feminized by others with the saying *omwenge gwamuwasa* (alcohol has taken that man as his wife), implying that the person is now being controlled by alcohol in the same way that a woman might be controlled by her husband and referencing an undesirable loss of self-control and self-rule (*okwefuga*).

Overspending on alcohol for oneself and others, regular morning drinking, violent or quarrelsome behaviour, lack of interest in food and poor hygiene are often taken by friends and relatives to be signs of a problem. These sorts of alcohol-related problems may be attributed to a wide range of causes – difficult life circumstances (stress, unemployment or marital problems), poor upbringing (lack of discipline or corrupting urban environments), the easy availability of alcohol (advertising, limited regulation of sale to minors and informal production), inherited qualities (genetics, blood and ancestral influences), and spiritual problems (satanic influence, curses and the neglect of ancestors and particular *balubaale* spirits).

Where such problems are identified, individual drinkers and those close to them may try to find remedies aimed at changing their drinking behaviour. As with other maladies and misfortunes, individuals and families may seek out more than one of these methods either simultaneously or in sequence (Whyte 1997; Feierman and Janzen 1992; Janzen 1982; Klaits 2010; Geissler and Prince 2010; Langwick 2011), despite the tensions that sometimes exist between the expert practitioners of these different approaches.

Some family members seek care for their relatives in newly established inpatient rehabilitation centres. These centres include a government-funded seventy-bed ninety-day residential programme at the national mental hospital offered to people with alcohol and drug addictions free of charge. There is also a range of private clinics that offer three- to twelve-month residential treatment programmes at a substantial cost. Regardless of cost, formal inpatient treatment programmes are most often used by people with university educations and professional jobs, who come from well-connected or wealthy families. These programmes generally follow the Minnesota Model, applying principles drawn from Alcoholics Anonymous (AA) in an inpatient setting. The weekly schedules also include classes on the effects of alcohol on the body, financial management, communication and occupational therapy. Patients are taught that alcoholism is a life-long disease and are regularly encouraged to avoid spending time with their former drinking companions upon discharge. Some former patients from these centres continue to see each other at a growing number of AA meetings in Kampala, and several have gone on to form their own NGOs dedicated to supporting Ugandans living in recovery.

Others seek help for themselves or their family members in churches. Uganda is approximately 83 per cent Christian (UBOS 2014), and religion features prominently in many aspects of everyday public and private life (Boyd 2015; Scherz 2014). Fifteen per cent of Ugandans practise Islam, and although we have not formally included Islam in the present study, future work in this area would be most welcome. While Catholics and less observant Anglicans drink openly, Pentecostals generally avoid alcohol, and the problems of excessive alcohol

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8See also Vorholter (2017).
consumption are common topics in their church services and other prayer sessions. Our present study includes both Catholic and Pentecostal churches and organizations. Despite some theological differences, both groups emphasize the importance of using prayer and deliverance to uncover, release and avoid ‘bondages’ that they believe allow Satan to bring problems such as alcoholism, poverty and illness into their extended families. Dreams, visions and other moments of direct communication with God are also important across these sites and figure prominently in the stories of people involved in these organizations who have now stopped drinking. Like the story of Kato that we tell here, experiences of the direct intervention of spiritual beings play an important role in the way people understand the change in their lives. In some cases, pastors and other church members have also become important sources of ongoing material and social support and connection, sometimes providing crucial links to jobs and potential marriage partners.

Most of the Catholics and Pentecostals we have come to know through this study have complex, and often adversarial, relationships with practitioners of Uganda’s indigenous healing traditions – particularly when herbal medicines are combined with an engagement with what may be termed ‘powers’ or *empewo* (literally ‘winds’) – but these specialists are also engaged in efforts to address cases of problem drinking. The most common form of indigenous spiritual healing found in the greater Kampala area is drawn from practices of the Kiganda ethnic group, but people from other ethnic groups also visit these healers. These healers, known as *basamize*, address a wide range of misfortunes and approach drinking problems through the use of herbal medicines and engagement with ancestral spirits (singular (s.): *jjajja*; plural (p.): *bajjajja*), the spirits of specific deceased people (s. *muzimu*; p. *mizimu*), spirits who guard other spirits or who are created or acquired to do particular kinds of work (s. *ejjembe*; p. *amayembe*), spirits associated with specific natural places such as trees, rocks or wells (s. *musambwa*; p. *misambwa*), and a pantheon of other named Kiganda spirits (s. *lubaale*; p. *balubaale*). The collective production and reproduction of wellness (Hoesing 2011) through rituals related to these spirits is part of the broader constellation of practices related to mediumship that emerged in the Great Lakes Region sometime between the thirteenth and sixteenth century (Berger 1973; Doyle 2007; Hoesing 2011; Kodesh 2010; Schoenbrun 1998; Tantala 1989). Today, *basamize* and those who visit them often practise either Christianity or Islam as well (Hoesing 2017), and conduct their engagements with indigenous religious practices with greater and lesser degrees of secrecy.

Among the spirits are two in particular – Bamweyana and Kawumpli – who often trouble their hosts by drinking through them in ways that can be excessive or problematic. If consulted, *basamize* may be able to determine that these spirits are the source of the problem and will advise the person to recognize them and engage in a relationship with them by making more or less elaborate offerings on an ongoing basis.

While *basamize* often work through both herbal medicine and engagement with spirits, a few herbalists sharply distinguish their practice from that of the *basamize* and are openly opposed to indigenous spiritual traditions. Whether or not they separate their practice from the work of *basamize* in addressing alcohol-related problems, most herbalists engage in a form of aversion therapy by providing patients with an emetic that can be added to either alcohol or water to induce...
an episode of violent and uncontrollable vomiting. Some people seek out this remedy on their own after being advised by a friend, family member or bar attendant, but sometimes a family member or friend will administer this emetic without the patient’s knowledge or consent. The ingestion of this emetic is also thought to induce a permanent aversion to alcohol by causing the patient to find the smell of alcohol repulsive.9

Yet, as the story of the intervention of Kato’s mother’s spirit in his life makes clear, other less predictable actors may also intervene. Understanding the specific ways in which Kato and his family received and experienced his mother’s involvement in his life as an event that was surprising, but not outside the realm of possibility, requires an understanding of the specific ways in which mizimu are thought to participate in the lives of the living in Uganda. The folk tales, novels, newspaper accounts, ritual practices and personal experiences we describe in the next section all reference a broader understanding of the possible involvement of mizimu in the world as both givers and receivers of care – much of which is provided and received through practices and experiences that are embodied, material and affectively rich. While anthropologists have often written about the place of needy, hungry and vengeful spirits in the lives of their interlocutors, Kato’s story suggests that we also need to understand the effects of spirits who intervene for the sake of the living.10

Njabala

My son-in-law will find me here, Njabala
Women till land like this, Njabala
My son-in-law will find me here, Njabala
They dig and prepare the soil, Njabala
My son-in-law will find me here, Njabala. (Mushengyezi 2013)

*Njabala* is among the most popular Ugandan folk tales, and numerous versions of it can be found in Luganda literature primers in Ugandan schools (Ssewankambo 1998), in English-language collections of Ugandan folk tales (Kizza 2010; Dipio and Sillars 2014; Mushengyezi 2013; Campbell and Wiggins 2013) and in recorded folk songs. The story tells of a young woman named Njabala and the way her mother’s spirit visited her to teach her to farm and keep house.

Njabala was her mother’s pride and joy, having been born after many years of infertility. Her mother favoured her so much that she allowed her to sleep through much of the day, never training her in the household and agricultural skills she

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9 The presence and regular use of such medicines within the Kiganda herbal pharmacopoeia resonates with other accounts of aversion therapy (Rose 2003; Vrecko 2010; Raikhel 2016) and presents opportunities for further comparative work.

10 Recently, a growing number of anthropologists working outside Africa have returned to the classic anthropological concern of what is at stake in the relations between the living, the dead and the more than human by making use of the concept of care (Desjarlais 2016; Garcia 2010; Stevenson 2014; Langford 2013; Todd 2016; Povinelli 2015; Tallbear 2017). While a full review of this literature is beyond the scope of this article, we recommend these works to readers interested in these issues.
would be expected to perform as a wife. Sadly, Njabala’s parents died young, just before Njabala married a wealthy man. Having never worked as a child, Njabala did not know how to cook, wash or dig in the garden. Much to her relief, her mother’s spirit appeared to Njabala in the garden and showed her how to dig. In some versions of this story, Njabala’s husband eventually comes out to the garden to bring Njabala a cool drink of juice, but when he arrives, walking slowly and quietly so as not to spill the full glass, he finds the mother’s spirit doing the work as Njabala sits in the shade looking on. The husband becomes so angry that he beats the spirit of his mother-in-law and sends her away. He then divorces Njabala, and she goes on to live a long and shame-filled life.

This story is often interpreted as a cautionary tale, one that encourages parents to be strict in the instruction of their children and children to listen and learn from their parents while they are still alive. It also can be used to normalize a system of gender relations in which women are expected to do the majority of household and agricultural labour (Mushengyezi 2013), and, given the double meaning of the agricultural tasks named in the song, to learn the sexual skills necessary to satisfy their husbands (Tamale 2005). While not discounting these interpretations, here we want to highlight the ways in which this story speaks of the spirits of the dead as sources of guidance and direction. Having failed in her efforts to teach her daughter in life, the mother returns to teach her daughter after death.

The theme of spirits of the dead providing instruction and guidance appears in more contemporary guises as well. Edward K. N. Kawere’s detective novel *Omuzimu Gwa Kasooba* tells the story of the spirit of an older detective guiding and inspiring the work of a younger detective whom he had known in life (Kawere 1991). The Luganda-language *Bukedde* newspaper includes the popular weekly section *Abafu tebafa* – ‘The dead don’t die’ – which features similar stories of spirits of the dead coming back to care for and guide the living. In these stories, grandparents come back to give sweets to their grandchildren, and daughters dream of their fathers asking them to leave a side door open for them to come and visit. Such extraordinary forms of everyday care are thought to be common enough to be possible, but also exceptional enough to be worth publishing in the newspaper.

Understandings of the possibility of a *muzimu*’s continued presence and action can also be seen through burial practices that acknowledge the continued agency of the dead body. These concerns are visible in the near universal opposition to cremation in Buganda; this is understood to burn the *muzimu* as well as the body, thus preventing the family from benefiting from the guidance of the *muzimu* in the future. With the exception of burials after suicide, mourners may linger at the grave in the hope that the *muzimu* might attach itself to them. The continued attachment of identity to the body after death can also be seen in the ways in which strict patterns of in-law avoidance are maintained after death. The dead maintain the ability to unintentionally afflic their in-laws with *obuko*, a disease characterized by a perpetual shaking of the body that results from physical contact between in-laws, but, being dead, they cannot participate in the ritual sharing of food that can be used to cure the disease. The dead also continue to act on their own behalf to see that they are properly buried with members of their

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lineage. This may take the form of a car that refuses to start, a driver who becomes ill when attempting to transport a dead body to the wrong burial place, or family members visited in dreams long after wartime burials in the bush with instructions on where to find the remains for reinterment.12

*Mizimu* are also thought to be present in the breezes that softly blow across the Ugandan hills. The presence of the dead in the wind is jokingly referenced in the common euphemism ‘*Yafuuka embuyaga ezikaza engoye*’ – ‘He has become the wind that is drying our clothes.’ Despite the half-serious tone of this euphemism, the presence of ancestors in the wind is sincerely hoped for by parents who visit hills near their paternal home so that the wind might quiet the fussing of babies who cry without reason. Other people travel to these same hills seeking to change their luck for the better. Walking with a Ugandan friend and enjoying a cool evening breeze, China remarked that the softness of the wind gave her a different understanding of the possible benevolence contained within that complex word *empewo* (wind, coolness, spirits or powers). In response, this friend recalled a time when he had travelled home to be in the presence of the *empewo* of his paternal ancestors. This particular friend is generally reluctant to engage in practices associated with *basamize*, but this was different. ‘I wouldn’t want to start putting offerings in a basket. Who knows where that could end. But this is different, I just needed to visit them, to be with them. After I did, my things started to go better.’ In seeking these winds, he was not engaging in a series of exchanges – offerings made in exchange for blessings – but rather seeking, and perhaps providing, care through a certain form of ‘being present with’ (Garcia 2010; Stevenson 2014; Taylor 2008).

The possibility that the line between the living and the dead is both thin and crossable provides the groundwork for Kato’s possession by his mother’s spirit. To be clear, such a possession was not considered a common or ordinary event, but it was well within the realm of possibility.

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The day after meeting Jjajja Nalunkuma, we visited Kato at his home in a village near the lake. Sr. Jane had told him that we were coming, and, knowing that China had long been her friend, Kato’s wife and children had spent Sunday morning preparing an elaborate lunch for us. As his family finished the cooking, he spoke easily and at length with us in the dark, stuffy noontime stillness of his sitting room, a room tightly packed with a sofa set, coffee table and stereo system. On the teal blue wall, amid calendars, crosses and family photographs, there was an enlarged framed photograph of his mother, Halima, who converted to Islam shortly before her second marriage, seated stiffly and unsmiling in a light blue *gomesi*.13

Kato said that he had no recollection of the periods where he beat his head against the ground while shouting out in his mother’s voice, but he told us about how he had awoken to find himself covered with vomit and blood at his grandmother’s house. He said:

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12For a stunning literary treatment of this theme, see Makumbi (2017).
13The *gomesi* is a long dress with a square neckline and peaked sleeves fastened by a wide belt tied in the front. Today, it is most often worn by older women and by younger women on traditional formal occasions in the central region of Uganda.
In the morning, I found that I was at Jjajja’s home. But I couldn’t remember that I had been driving a man. Jjajja had already woken up, and she was looking at me with amazement. She broke down in tears… She checked to see if my nose and teeth were broken and said, ‘You bled a lot of blood from the nose and ears.’ But I had no wounds anywhere on my body. I went to bathe because I was very dirty. I borrowed clothes. I also started to cry. Jjajja told me that something had held me, saying that it was my mother’s spirit, that if I drink alcohol again I will die. She was saying all this when I was just keeping quiet… I packed my [dirty] clothes in a sack and came here. I sat on the sofa but felt a running stomach.

‘Had you told your wife about what happened?’ George asked.

He replied:

I had not told her. I also feared to show the clothes to her. And because I had been drinking for many days, I had nowhere to start explaining to her, knowing that she was angry. My stomach was making funny sounds. When I breathed, I only smelled alcohol. When they gave me tea, it was also smelling of alcohol. In my stomach was something hard like a stone. Then, one day I was sleeping and something came [in a dream], in my mother’s voice. The voice said, ‘Go and get one of my clothes, wash it and drink the water in which you washed it. I am the one who is [causing you to feel this way].’ [Finally] I told [my wife], ‘I have been drinking alcohol for all these days, but I got a problem. But I cannot tell you everything, but I want to ask you that we both go to see Jjajja Nalunkuma.’ I remembered that my mother used to give clothes to Jjajja.

We both went to Jjajja and Jjajja told me, ‘Since you know that the voice was of your mother, kneel down and plead. Say “Help me; I will not drink alcohol again.” God passed through your mother to make you stop drinking and it is her that you have to plead to, but speak that knowing that you will not drink again because you may get a problem.’ When I came back home, I did exactly that. I knelt here in my sitting room. I was feeling hungry, but even the food was smelling of alcohol. I knelt down and said, ‘Mama, if God passed through you to make me stop drinking alcohol, I will not drink again but I am asking that the thing in my stomach goes away, that I eat food again.’ When I stood up, I felt dizziness, as if the room was rotating. My stomach loosened at once, and I felt a strong diarrhoea that I wanted to go to the latrine. I had diarrhoea for two days, but in four days I stopped feeling the thing in my stomach and regained my energy. I held my machete and went to go and slash in the forest. But it took a long time before water and food stopped smelling of alcohol.

Since this time, Kato has avoided drinking entirely. He buys waragi and beer for his friends occasionally and still spends time in bars in his village and in town, but he does not drink. When his friends ask him why he does not drink anymore, he tells them that his leg was operated on and that he is taking medicine for that. In this selective, protective silence, it is clear that this is not a story to be shared with everyone. While Kato and his family have become certain about this appearance, it is an intimate certainty and not one to be subjected to the sceptical questioning of friends and neighbours.

While he lives his life in relation to the fear that his mother might respond violently if he drinks again, Kato’s mother has not reappeared in the physically dramatic ways that she did in September 2015, yet she has continued to be present in his life. When George went to visit Kato again in January 2017, Kato came on his motorcycle to pick George up in town. After running a few errands together, George got on the back of Kato’s motorcycle and asked him to drive slowly as they
rode so that they could talk. As they bounced along the road, dry and dusty in the January heat, their conversation was easy, meandering from topic to topic: Kato’s previous life as a fisherman at the lake, his sister’s calling to the religious life. George asked whether he still had dreams of his mother. ‘Yes,’ he said.

Sometimes she doesn’t look like my mother, but I see a woman in my dreams whenever I have a difficult decision to make. For example, the other day a man in my village asked me to find a buyer for his cow and calf. I found two of them but both were not serious buyers. They kept on tossing me around. And I very much wanted to get the commission for selling off the cows. Then one night, in a dream, I saw a woman talking to me. She said, ‘Can’t you buy the cows yourself and replace the ones that you sold when you were drinking?’ In the morning, I thought about it and realized that I could buy them, using some of the money from my rice and a small loan from somebody. I managed to buy them at 1.6 million Ugandan shillings [approximately US$425]. If it were not for my mother, I would not believe that I could buy them for myself. But she never comes in a cruel way anymore … When she comes, I first cry but the voice which comes out of me is of my mother. My children never saw her in life, but they heard the voice that came out of me.

Through her acts of intervention, Kato’s mother re-established a relationship with him and with his children. By involving herself in their lives, both through her initial act of force and threat and through her ongoing efforts to make herself known in dreams and by voice, she asserts and reclaims her relationship with them.

Transforming the self in the company of others

In the literature on ethics in anthropology, the role that divinities or other spiritual beings might play as agents involved in collectivities capable of shaping the self has received only occasional attention (Mittermaier 2012; 2011; Laidlaw 2013; Lambek 2010; Bialecki 2017; Scherz 2018), yet as Kato’s story and the rich anthropological literature on spirit mediumship vividly demonstrate (Boddy 1989; Lambek 2010; Langwick 2011; Masquelier 2001; Peek 1991), many people conceptualize such forces as being crucial to processes of self-transformation. Likewise, while conflicts between the groups of practitioners involved in our larger study often stem from ontological disagreements about the beings that exist, their natures, and the relationships between them, there is a common sense of agreement among these practitioners that the forces and beings involved in a process of ethical transformation exceed secular categories and understandings of bounded or buffered selves (Taylor 2007).

Drawing on the work of Stanley Tambiah (1990), philosopher Charles Taylor distinguishes between the modern ‘buffered self’ and the pre-modern ‘porous self’ (Taylor 2007: 29–41). For Taylor, the ‘porous self’ sees itself as necessarily vulnerable to the influence of agencies and forces that lie beyond its borders. By contrast, ‘the buffered self can form the ambition of disengaging from whatever is beyond the boundary, and of giving its own autonomous order to its life’ (ibid.: 38–9). While we resist the modern/pre-modern, West/rest dichotomies that Taylor’s work could be seen to support, we do find that this contrast between the buffered self and the porous self allows us to better understand why the prevailing models of ethical self-formation fall short in terms of their capacity to help us understand cases like Kato’s. While James Laidlaw provides a possible
pathway for exploring how people make judgements about ethical responsibility with regard to the porosity of such borders (Laidlaw 2013: 179–212), the way in which projects of ethical transformation might play out among such porous selves has only rarely been explored within this rapidly growing literature.

As Scherz has noted elsewhere (2018), Michael Lambek’s writings on ethics and spirit possession in Mayotte provide a guide for one possible approach to this problem (Lambek 2010). In these writings, Lambek questions the priority Western thinkers have given to a ‘pure and unitary state of mind’ as ‘the necessary source of ethical action and commitment’ (ibid.: 722). In exploring forms of ethics founded on a more ‘porous, passionate, or relational self’ (ibid.: 729), Lambek breaks down moralized dichotomies between reason and passion and between the mind and the body. This later move is especially important given the ways in which Kato’s story involves an ethical transformation that is in some way demanded by his body. In this way, his story resonates with Lambek’s story of Ali, a young man whose plans for a career in the French army are disrupted by symptoms resembling rheumatism which he says were caused by a spirit who possesses his mother. Like Ali, Kato’s moral conflict ‘was displaced and resolved by the certainty of his body … [and] he had to accept its decision’ (ibid.: 737).

Similarly drawing on Godfrey Lienhardt’s ‘ethics of passion’ (1961), Amira Mittermaier’s research on dreams among followers of Shaykh Qusi in Egypt also seeks to illuminate an ‘ethics of relationality’ that ‘not only undoes the notion of a unified subject but also draws attention to the role of an Elsewhere in constituting the subject, and with it to elements of unpredictability and contingency’ (Mittermaier 2012: 249). Through her writing about the ways in which Shaykh Qusi’s followers understand some dreams to come to the dreamer through divine intervention, Mittermaier illuminates a form of relational or dialogic ethics that extends beyond the bounds of the living human community (Mittermaier 2011; 2012).

Like Mittermaier’s dreamers, Kato’s life is shaped through a dialogue with a being eclipsed by the boundaries of secular thought. As we noted above, during the years that have passed since his mother’s dramatic return, she continues to come to him, speaking through him and coming to him in dreams, guiding him through his life. As in Mittermaier’s work, dreams in Uganda are often interpreted by Christians, Muslims and people engaged in indigenous spiritual practices as coming from an ‘elsewhere’. Dreams (plural: biroto) are sometimes referred to in Luganda by the word for messages (obubaka), and their instructions are to be interpreted carefully and taken seriously. Yet, as in Lambek’s work, Kato’s mother’s involvement in his life also exceeds the dialogic communication of messages, as she has become part of his body in a way that has profoundly transformed his way of being in the world. He thus finds himself not only in a relationship with someone capable of influencing him through processes of communication; he is in a relationship with someone

\[\text{For a more extended discussion of this point, see Scherz (2018).} \]

\[\text{The promise Kato makes to his mother also resonates with Lambek’s analysis of the ways in which certain speech acts can play a critical role in establishing the ethical criteria by which later actions will be evaluated (Lambek 2015).} \]

\[\text{For an insightful discussion of the role of dreaming in colonial politics in Uganda, see Earle (2017).} \]
capable of acting on him much more directly, and acting on him in ways that make his previous life of drinking practically impossible.

The risky work of being cared for

The importance of the body in Kato’s story also requires us to attend to a moment in which care was given through an act of physical force. The overpowering nature of Kato’s mother’s act of caregiving provides us with an opportunity to think more deeply about the work, risks and possibilities involved in opening oneself up to the possibility of receiving care provided through violent means.

Ambivalent scenes of force are often present in everyday moments of caregiving, but these moments may be difficult or uncomfortable to consider as care (Gottlieb 2014; Goldstone 2017). In drawing attention to such moments, we are not making a point about the alternation between caring acts and violent acts, or the possibility of these two discrete kinds of acts within the family setting (Geschiere 2013; Schepers-Hughes and Sargent 1998; Schepers-Hughes 1992; Demause 1995; Korbin 2003; 1981); rather, this is a consideration of acts that are simultaneously forceful and caring, which execute the work of care through the use of force. We are not saying that all violence is care, or that all violence in families is care. This is clearly wrong, and Kato and Sr. Jane would agree that it would also be wrong in relation to particular instances of violence enacted by their mother during her life. Nevertheless, there are instances of physical hurt that may be interpreted by performers, witnesses and victims as examples of care and love.17

Kato’s ability to receive his mother’s violent return to his life, and the family’s collective appreciation of that violence as a form of love, depended on existing definitions of both care and love that were capacious enough to include this dramatic display of physical force. These definitions both include and push beyond understandings of care that focus on acts of being present with or watching over another (Garcia 2010; Stevenson 2014), collaboratively tinkering, improvising and experimenting (Mol 2008; Mattingly 2014; Livingston 2012), or engaging in moral practices of ‘empathic imagination, responsibility, witnessing, and solidarity’ (Kleinman 2009: 293). While these forms of care are no doubt present in Uganda, Kato’s mother’s intervention falls outside these available definitions. There is a kind of total force in this moment of maternal care. She breaks the boundaries of his body. She works like medicine unknowingly swallowed, without his consent or cooperation.

This moment of total force resonates with other moments of caregiving in everyday child-rearing in Uganda. From the age of two and a half or three, children may be hit on the buttocks with the stem of a banana leaf or rubber sandal for

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17In emphasizing the role of this triad of interpreters (performer, witness and victim) in the definition of acts of physical harm as violence we recall David Riches’ essay ‘The phenomenon of violence’ (Riches 1986). While we seek to return to Riches’ more open-ended approach to the study of violence – an approach that has in many ways been overshadowed by studies of violence, both extraordinary and everyday, in which ethnographers grant themselves the privilege of defining the bounds and moral valence of violent acts – we also wish to avoid an analysis that would see all violence as instrumental or that would limit the interpretive frame to three individuals (Das 1987). On the redemptive possibilities of ‘therapeutic violence’, see also García (2015).
unnecessary crying or for defecating in their trousers if they fail to heed earlier warnings. Older children might be made to lie on their stomach while they are struck on the buttocks with a long stick (oluga), which is kept in the corner of the house for this purpose. Speaking obscenities, breaking things, dawdling while completing chores or fighting might all bring about a beating of this kind.\(^{18}\) Where beatings are excessive, neighbours or other family members may intervene to try to stop the parent. Such excessive forms of beating may include striking parts of the body other than the buttocks, giving too many strokes, using the wrong type of stick, spontaneous slapping, or other acts of cruelty.\(^{19}\) Yet, despite criticism of excessive or unjustified punishments, and efforts by international organizations to stop child beating, many forms of corporal punishment remain an acceptable and valued disciplinary strategy.

This acceptance stems from the fact that transforming a child into a disciplined person is commonly seen as the most important thing that a parent can do for a child, and a failure to do this is seen as a critical form of neglect. Parents of undisciplined children may be criticized by neighbours, saying: ‘That one doesn’t even care enough to lift a slipper to train her children.’ Becoming disciplined is also something that children value as they grow. While the use of physical force can be difficult for outsiders to accept and understand, it is common to hear university graduates make speeches at graduation parties thanking their parents for all of the disciplinary beatings they received when they were younger, saying that these beatings made them more disciplined and better people. There are also songs sung at kasiki parties held for brides and grooms just before marriage, praising the beatings given by parents. As in Caroline Bledsoe’s writings on Mende ‘hardship ideology’ in Sierra Leone, hardship and struggle are necessary and highly valued elements of child-rearing (Bledsoe 1990). While there is a distinction made between simply being ‘quarrelsome’ and beating for disciplinary purposes, the use of physical force is regularly recognized as a form of love and care.

While the fact that Kato’s mother is a spirit may be what allows some readers to accept this family’s interpretation of her actions, the actions of spirits perhaps being further beyond the reach of judgement than the actions of our living interlocutors,\(^{20}\) in our broader project it is not only spirits who, as caregivers, seek to overcome those they see as problem drinkers in Uganda. As is true in many places, concerned relatives lie to their kin as they drive them to be admitted to inpatient rehabilitation centres. ‘We’re going to look at some land we’re thinking of buying.’ ‘We’re taking you for lunch near the lake.’ Sometimes they go as far as to get their kin, and patient-to-be, drunk before setting out. Relatives might attend a seminar to learn how to pray in a way that will drive Satan out of their lineage and thus free their kin from drinking problems, without necessarily seeking the consent or cooperation of the person whose transformation is being prayed for. Other relatives might seek out the services of a herbalist who will

\(^{18}\) For historical and comparative discussions on disciplinary beatings in several other African contexts, see Ocobock (2012), Archambault (2009), Last (2000) and Imoh (2013).

\(^{19}\) While Kato’s mother’s actions certainly fell beyond standard forms of corporal punishment, he and his family felt that they were justified given the severity of the situation.

\(^{20}\) By contrast, we might consider the difficulty of accepting as forms of care the coercive actions of Dr P., the German oncologist at the centre of Julie Livingston’s account of Botswana’s only cancer ward (Livingston 2012).
provide them with the emetic liquid that they can secretly add to a drink. That such scenes of being physically, socially or spiritually overpowered play a pivotal role in a process through which a person might regain their self-control (\textit{okweg-fuga}, to rule oneself) is striking, and resonates with the works by Lambek discussed above.

**Conclusion**

How these actions are interpreted and received by those who are their target may vary widely. In this case, Kato’s ability to receive his mother’s care in the way that he did depended on a process of collective interpretation, with Jjajja Nalunkuma playing a critical role in establishing the identity of the mother’s spirit and telling Kato what had happened, and in helping him see this act of violation as an act of love. Her capacity to narrate the incident shaped how Kato received his mother’s intervention as well as the events that followed (Garro and Mattingly 2000). Yet, we would stop short of saying that such work transformed a visceral material reality into a meaningful spiritual experience. To say this might subtly demote the narrative shared by Kato and Jjajja Nalunkuma to an interpretation, a set of beliefs, while at the same time possibly granting a privileged position to an implicit argument about the biological generation of those bodily experiences. While all experience involves a process of interpretation, the stakes of stressing this are different when we are talking about experiences involving beings whose existence is often denied. Likewise, an approach and set of questions that might seek to explore the cultural practices and beliefs that may have generated or intensified this affective experience would foreground the beliefs and practices at the expense of focusing on the force of the experience that followed (Bialecki 2017).

In remaining open to the possibility that Kato’s dreams and the material traces of his mother’s presence are more than an effect of Kato’s biology, practices or beliefs, we move into a different register of thinking about this, and about other similar experiences. Rather than trying to understand how states such as possession might serve as embodied metaphors for critiquing the social order (Ong 1988), or how such profound experiences might be produced and intensified through cultural practices (Casaniti and Luhrmann 2014; Luhrmann 2012; Csordas 1997; 2002), this way of thinking leaves open the possibility that Kato’s mother really did possess his body, really did become the hardness in his stomach, really did become the medicine that continues to move with him. Along with our interlocutors, we come to see dreams as reasons for action, stomach pains as signs of a mortal threat to be avoided. Such a stance does not necessarily require that we—or, more importantly, those who have shared their stories with us—always approach such beings with absolute certainty or agreement (Graeber 2015). Indeed, in many cases such issues are characterized more by troubled doubts and worries than by clarity and certainty (Meinert and Whyte 2017; Bubandt 2014). What this stance requires is that we attend to the results 21It is worth noting that, while there is often a great deal of uncertainty about the cause of a particular set of symptoms, problems or experiences, in this case Kato and his family were emphatic in their certainty about what had occurred and why.
of their collective and individual processes of discernment and their ongoing efforts to live in relation to these forces. Anthropologists have always known that people craft their lives and find their ways to a life worth living in collectivities and through relationships, but it is only when we move beyond the confines of the secular and the scientific that the full range of others becomes visible.

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Excessive alcohol consumption often appears as an issue of great concern for the friends and family members of drinkers in Uganda, where per capita consumption rates among drinkers are among the highest in the world. In many cases, these families seek care for their loved ones in small shops run by herbalists, in the shrines of spirit mediums, in the pews of churches, or in one of several newly established inpatient rehabilitation centres. Yet, acts of intervention come not only from living family members or friends, but also from an array of spiritual beings who may arrive uninvited and outside intentional therapeutic contexts. In this article, we consider a case in which a mother’s spirit intervenes in the life of her son, first by possessing his body and then by continuing to dwell there in ways that make it impossible for him to drink. This case highlights the importance of

Abstract

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forces experienced as non-self in life-transforming processes, and demands that we give attention to a moment in a person’s life when the work of care is achieved through an act of physical force.

Résumé

Une consommation excessive d’alcool est souvent un sujet de préoccupation important pour l’entourage familial et amical des buveurs en Ouganda, où le taux de consommation d’alcool par habitant est l’un des plus élevés au monde. Dans de nombreux cas, ces familles cherchent des remèdes pour leurs proches dans des petites boutiques tenues par des herboristes, auprès des spirites, dans les églises ou dans l’un des centres de cure nouvellement créés. Cependant, les actes d’intervention ne viennent pas uniquement des parents ou amis vivants, mais aussi d’esprits divers susceptibles de se manifester sans y être invités et en dehors de contextes thérapeutiques intentionnels. Dans cet article, les auteurs étudient un cas dans lequel l’esprit d’une mère intervient dans la vie de son fils, d’abord en possédant son corps puis en continuant à l’habiter de manière à le rendre incapable de boire. Ce cas souligne l’importance des forces vécues comme non-soi dans les processus de transformation de la vie et exige qu’on prête attention à un moment, dans la vie d’une personne, où le travail de soin se fait par un acte de force physique.