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Kyoto University
Abstract

This paper aims firstly at documenting a unique phenomenon that has been observed and analyzed over a period of 20 years, namely the consistently high occurrence of suicide among a small population of tribal inhabitants of Southern Palawan, Philippines. After a brief sketch of the cultural and social setting of the study, anthropological studies on suicide among tribal and non-industrial people are reviewed and a quick overview of suicide in Southeast Asia is provided. Aggregate figures are then examined with a view of providing a general outline of voluntary death in Kulbi, Palawan. The yearly rate, one of the highest in the world (as high as 173 per 100,000) is established. Factors that are computed include age, sex, method, and motives. Indigenous concepts concerning personhood, morality, the emotional life, and eschatology are examined next and a sketch of the native conceptual framework is drawn, so as to locate the indigenous view of suicide within this framework. In conclusion, the central problem of the study is restated, namely to understand the overall rate of suicide for a population whose culture does not essentially differ from non-suicide prone neighbors. Several complementary hypotheses are suggested, combining socialization, genetically defined predisposition and "wave hypothesis."

Keywords: Palawan, Philippines, Southeast Asia, suicide, suicidology, suicide rates-statistics, anthropology, tribal-genetics, socialization

Introduction

My acquaintance with the Palawan people of Palawan island in the Philippines dates back from 1970. I conducted fieldwork from 1970 to 1972 in the central highlands near Brooke’s Point, in the Mekagwaq and Tamlang river basins. I gathered there most of the data I used for my Ph. D. dissertation and further publications [see Macdonald 1972; 1973; 1974; 1977; 1988; 1996; 2002]. In 1972, and in subsequent years I visited several other areas in Southern Palawan and made observations on a number of Palawan subgroups. One section of the Palawan people I visited was located in the southwestern corner of the southernmost portion of the island. It consisted of two adjacent lowland areas located in the Kulbi-Kenipaqan river basins (see Map 1). Although this is a lowland or hill area from an environmental and ecological point of
view, it is and was for centuries inhabited by tribal people practicing shifting agriculture, and collecting a variety of products from the forests, rivers, mangroves and reefs.

In the early seventies they were almost no Christian settlers in this area. Access was difficult. One had to walk across the island, or take a boat, or use a small plane flown by the New Tribes Missions between their main base in Lada, near Brooke’s Point, and Megkelip or Latud, their field stations in southwestern Palawan.

This place remains one of the few magic spots I have visited during my lifetime. It floated in some remote and hazy confines of the real world. A remarkably fine-looking people inhabited its low rolling hills and secluded valleys sloping gently towards the South China Sea. Elegant young ladies wearing sequined tops and red scarves, dignified elders in high headgears and muscular young men in G-strings welcomed the foreign visitor with the usual mixture of endearing warmth and shyness found elsewhere among the natives of the island.

Compared to the highland indigenous people I had lived with, they offered to my inquisitive eye several unusual features. One was a developed institution of courtship. Its visible sign were the numerous little huts on high stilts, decorated like dollhouses, where young maidens entertained their suitors who plied them with sweet words and music from their long two-stringed luthes, kutjapi. Another feature was the large size of local settlements, composed of up to 50 houses, in contrast to the tiny highland hamlets that usually contained no more than 10 houses.

At the center of the area lived Tuking, the great shaman and spiritual leader in Kulbi, heir to
such famed and legendary shamans as Pedjat or Nambun. People from all corners of the Kulbi-
Kenipaqan river basins and beyond would come and visit him to receive his blessings and listen to
his prayers, which he dispensed endlessly in the vastness of his large house open to all visitors.

Their houses, their dresses, their settlements, even the way they danced to the music and
beat of the gongs, had something that was both familiar and different, more elegant perhaps,
more refined, but equally cheerful. Their religion was marked by large ceremonies of a very
different kind than all those observed elsewhere in Palawan [Macdonald 1997]. They also
spoke a slightly different dialect from the one spoken in the central highlands, but not one I
could not understand.

There was one single feature though that I could not fathom. Ever since I set foot on that
remote corner, I heard constant references to self-inflicted death. I was bewildered by remarks
to the effect that “one would just take a length of rattan, tie it to the roof-beam and . . . that’s it!”
A number of recent occurrences of suicide were pointed out to me. Suicide seemed to be an
ever-present topic of conversation. People were threatening to commit suicide and they said it
with no apparent levity. They could name victims.

At the time, in the early seventies, there was a case of land grabbing that occupied the
minds of the people and that was of great concern to them. An entrepreneur from Brooke’s
Point had appropriated a vast tract of land in the lower Kulbi river basin and had turned it into
pastureland for his cattle, water buffaloes that were running wild and threatening people. The
land was a major concern and people were speaking of killing themselves in connection with
this problem. I concluded of course that suicide was a reaction to the violent and sudden
intrusion of the outside world in the guise of particularly aggressive townspeople and the
danger of losing their land.

The fact is, I was not prepared to see suicide as a characteristic feature of the Palawan
people or their culture. I had spent almost two years with them and I never came across a
case of suicide during my stay, nor could I recall anyone reporting a case or even mentioning
the topic. Suicide in Kulbi-Kenipaqan, I thought, could only be an exogenous and momentary
pathology. I was wrong.

Subsequent visits to the same area in the late seventies and during the early and mid-
eighties convinced me that suicide was an endemic and enduring phenomenon repeating itself
with unusual and stubborn frequency. Land had long reverted to its traditional owners. The
threat posed by the cattle breeder had vanished, and his water buffaloes were all dead. True, a
mining company had carved a dirt road and was digging for silica on nearby hills, creating run-
off and silt deposits that killed populations of sago palms. Christian lowland settlers were
slowly invading the land. The old days of remoteness and isolation were coming to an
end. But nothing seemed to have shaken the people and their way of life. History was
proceeding at a leisurely and gentle pace. There was no cause for great alarm. Yet people
killed themselves.

2) Names of famous shamans having lived one to three generations ago in Southern Palawan.
Suicide was not something I had ever envisioned as a topic of inquiry that would occupy me full time. But it dawned on me that this was indeed a most intriguing and enduring feature of the Kulbi-Kenipaqan people. As a result, I finally decided to devote some time to the study of this strange and disturbing phenomenon. I spent several months in 1989 studying suicide in Kulbi. I gathered systematic information and made a list of all cases that had happened in recent years as well as all cases that my informants could remember. Numbers indicated a staggering rate of occurrence. It was confirmed by a follow-up on the study I made in 1989. I continued this survey until 2002.

Suicide, I was able to establish, was a feature that was characterized, in this particular area only, by a consistently high rate of occurrence. Figures show that it is probably the highest or second highest in the world (see below). Why? Why would suicide, in such staggering numbers, affect those people whose society and culture is in no basic way different from other Palawan people, their immediate and non-suicidal neighbors in the hills and mountains of Southern Palawan? Why would such happy-looking and comparatively well-off people, going about their lives in orderly fashion, fall victims to despair?

So far I have found no clear answer. The phenomenon remains mysterious and a complete puzzle. What is the answer, and where can it be found? Being an anthropologist I have turned to anthropological explanations first and in this paper I shall review some of those. My first attempts at providing a convincing anthropological account failed. I shall explain why. Other directions will have to be explored and I shall suggest a few.

The main point I want to establish in the present contribution is the fact of suicide as a collective phenomenon among the people of Kulbi. Who does it? How many do it? How? When? What is it that makes them do it? I shall also probe into the representations and concepts of suicide that are current in the language and culture of the area. Having thus outlined the main features of this phenomenon, I shall suggest a few leads for its possible explanation, more in the form of questions than answers.

Palawan Culture and Society

The Palawan people form an ethnic group of about 50,000 persons. With the Tagbanuwas and Bataks, they are one of the three autochthonous groups in this island whose shores were sparsely and sporadically occupied in previous centuries by Muslim groups harking from the Sulu archipelago and claiming Palawan to be part of their political space [see Ocampo 1985].

Having adapted to various micro-ecological environments from a coastal or near-coastal to a mountainous habitat [Macdonald 1977; 1994; Revel 1990], and living in separate river basins, with no central power or unifying political system, they naturally split in the course of time into various sub-groups characterized by dialectal and cultural differences. Those however did not result in a full process of ethnogenesis in spite of a very fine gradation of ethnic identities.
ranging from the coast to the mountains [see Macdonald 1994].

My own fieldwork covers five different areas (see Map 1): two central highlands (Mekegwaq and Singnapan valleys), two coastal and sea-oriented clusters (Punang-Irerej and Kulbi-Kenipaqaqan), and one hill and near-coastal area (Quezon). Differences between these sub-groups are indeed more “cultural,” and environment-oriented, than sociological. I have found for instance that religious representations and cults vary significantly from one place to the other [see Macdonald 1993b] while social structure remains essentially identical, having at its core a residential unit based on kinship both affinal and consanguineous [Macdonald 1977: 175–179]. The settlement pattern is scattered with usually small residential units (2 to 20 households). Roles are defined along the lines of consanguinity, affinity and generation [ibid.: 243]. Gender relations are weakly asymmetrical. The kinship system is cognatic and kin terms are the same throughout the entire ethnic group. There is no stratification, no centralized locus of power outside the local community, no organized violence or warfare. Aggression tends to be avoided at all times. Individual autonomy is strong [see Macdonald 2002].

Roughly, social order rests on three foundations:
- kinship ties and uxorilocality, working together to create small integrated local groups;
- a judicial system of customary law, adat, with a set of rules for conducting trials and litigations, bitsara, and appointed judges or arbiters, ukum, or mengingisara (memimisara) who pronounce people guilty and impose fines [Macdonald 1996];
- a secular morality based on the concept of ingasiq, that can be translated as “compassion, sympathy, generosity, inclination to extend help.”

Marriage is the single most important social ceremony and rite de passage [Macdonald 1972; 1977]. Monogamy is the rule, but polygamy (polygyny) is permitted and occasionally present. Divorce is frequent.

Palawan people are polytheists, with a belief in a supreme being, Empuq, “Master,” “Lord” [Macdonald 1988; 1993b; 1997]. Traditional cults and ceremonies range from shamanistic séances to quasi-theatrical performances [Macdonald 1990], and frequently include trance [Macdonald 1993b]. Nowadays Protestant missionaries are winning a growing number of converts [Macdonald 1993a].

The economic and subsistence basis of their life is upland agriculture. Rice is grown together with a variety of other crops [Macdonald 1987; Revel 1990]. Although rice is the most valued type of food [Macdonald & Revel 1974], it is never the sole resource and subsistence is insured by other cultigens and root crops such as cassava. Diet is supplemented by hunting, fishing in streams, and collecting forest products for upland groups or fishing and collecting

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4) Palawan people themselves make various distinctions like “highland people,” taw’t daja, versus “lowland people,” taw’t napan, or “people from the south” taw’t sanad, “people form the other side,” taw’t ljaw, and so on. The exonyms “Ke-ney” and “Tau’t Batu” refer to subsections of the same ethnic group, and in no case to different “tribes.”

5) Only very minor dialectal differences can be observed.
marine and mangrove products for coastal groups. From long-standing observations, I finally concluded that to classify them as “agriculturists” is to a certain extent a misnomer, so central to their way of life and representations are extractive activities, especially for the upland groups [Macdonald 1979; 1987; Macdonald & Revel 1974; Revel 1990; Novellino 2002].

The Kulbi-Kenipaqan cluster of communities, which we are discussing in these pages, is composed of 2,000 to 3,000 inhabitants. I consider these adjacent river basins⁶ (see Map 1) as forming one “sub-culture” on the basis of their identical dialect and religious system [Macdonald 1997], together with cultural traits such as those mentioned earlier, like a formal courtship apparatus, large local settlements (up to 50 households), a more visible center of regional authority — of a spiritual, rather than political kind — and of course, suicide. In the following pages I shall speak of the Kulbi culture or people as I have gathered most of my data on the population of Kulbi proper and since I have made both extensive and intensive surveys within the Kulbi river basin. I do consider, however, that conclusions applying to Kulbi will also, with a very high degree of probability, hold true for the Kenipaqan people.⁷

One final and important remark has to be made. In the course of the past 30 years, starting with the coming of the missionaries and the operations of the silica mine, the outside world has increasingly intruded into this secluded corner of the island, to the point of overtaking it entirely at the beginning of the twenty-first century. Lowland tribal Palawan are now turning into lowland Christian farmers, and most of them become Protestant converts and wet-rice farmers. The old way of life, the ancient ceremonies, the costumes, the very cultural identity of the indigenous Palawan people is undergoing drastic change. A road has now reached Tagbita and trucks ply it with loads of industrial goods. The history of this transformation has still to be told and I have gathered more systematic data to supplement scattered observations made in the course of various periods of fieldwork. Let it be said however, that in spite of some tension resulting from episodes such as the previously described establishment of a cattle ranch, in spite of destructive effects of mining activities, and uneasiness felt as a result of new waves of incoming Christian settlers, this transformation is to a great extent not only peaceful but successful. With ingenuity and hard work local Palawan people have started to engage in extensive irrigated agriculture, a crucial step towards insuring continued ownership of their most precious land.⁸ Relationships between Christian settlers and indigenous people are marked by strong interaction and now a growing number of mixed marriages. It has become impossible, at times, from their exterior appearance only, to

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6) The local Palawan themselves always refer to groups or clusters of groups by applying river names to them (“people from Kulbi, from Kenipaqan,” taqaw Kulbi, taqaw Kenipaqan), without necessarily implying meaningful cultural or social contrasts.

7) The situation is quite similar to that of Punang-Irarej, north of Brooke’s Point on the east coast. I did a study in this area while gathering most of my data from Punang [Macdonald 1990].

8) Here again I draw a parallel with Punang in the north-eastern part of the Palawan territory with its clever, industrious and inventive inhabitants, who have equally well adapted to a market economy, without any government help or plans supported by national or foreign agencies.
distinguish between a pure blood Palawan native and a Christian settler. 9)

Increased contact with the outside world and changes that result from it are not factors initiating suicidal tendencies in a given population. They are significant factors only with respect to an increase in suicide rates, whenever suicide rates were already significantly high. This observation has been made by anthropologists for other groups like the Aguaruna of Peru [Brown 1986: 352–353], the Maenge of New Britain [Panoff 1977: 52], the Trukese [Hezel 1984:193; Purcell 1991: 84], among others.

Anthropological Interpretations of Suicides and Suicidal Behavior

Suicide is a topic that has attracted a lot of attention in the fields of sociology, psychology, psychiatry, law, criminology and philosophy. Anthropologists have occasionally dealt with suicide and suicidal behavior but much less frequently than their colleagues in the other social sciences, especially sociologists and psychologists. Going back to the sixties, the anthropological literature on suicide is not very extensive. True enough, a number of studies have been published, articles rather than books, on certain areas or groups where suicide rates have been observed to be high or higher than elsewhere. Such are Micronesia and other island people in the Pacific [see Hezel 1984; Hezel et al. 1985; Purcell 1991; Rubinstein 1992], North American Indians [e.g. Webb and Willard 1975; Westlake Van Winkle and May 1993], and Australian Aborigines [see Reser 1989].

Among the few book-length anthropological studies devoted at least partly to the topic of suicide one should mention the classic work of Verrier Elwin on the Muria [Elwin [1943] 1991], the collective volume published by Bohannan on Africa [Bohannan 1960a], Devereux’s study on the Mohave [Devereux 1961], and the recent book by Maria Catedra on the Vaqueiros of Northern Spain [Catedra 1992; 1993]. 10) Other than that, a number of papers or short essays have been published in specialized journals together with passing references to suicide in various ethnographic studies.

Two main and somewhat diverging courses of theorizing are open to the student of suicide, whether an anthropologist or a social scientist from a related field. One is the study of suicide cases in themselves. It is a study in behavior leaning towards the psychological. The other is the study of statistics and suicide rates. It is conducive to a sociological explanation. Each course starts from a different definition. One goes like this: “Suicide denotes all behavior that seeks and finds the solution to an existential problem by making an attempt on the life of the subject” [Baechler 1979: 11]. The other is more like Durkheim’s: “The term ‘suicide’ is applied to all cases of death resulting directly or indirectly from a positive or negative act of the victim himself, which he knows will produce the result” [Durkheim [1897] 1997: 5]. 11)

9) Maybe increasingly similar diet habits and food intakes make them physically look alike.
11) In this paper I focus on a type of behavior or action that is not culturally prescribed — such as the
Anthropological theories of suicide fall into two broad categories, unsurprisingly matching the two diverging courses of interpretation outlined above. The first and most frequently chosen one is clearly what one could term the socio-psychological (henceforth SP), for instance Bohannan or Catedra (quoted above); the other is the ethno-psychiatric (henceforth EP) with examples like Devereux and Dentan (quoted below). These two different approaches are premised on a statistical (SP) versus case-study (EP) definition of the object of study (see above). Characteristically EP studies pay little or no attention to statistics; they are involved in figuring out the internal logic of psychodynamic processes. SP studies may not be mainly based on statistics but do count cases and start from there. In the end, anthropologists are eclectic and are wont to borrow from a variety of fields, from psychoanalysis to sociology and statistics [e.g. Panoff 1977; Brown 1986].

At this point, there is a need to introduce a major bifurcation in explanatory models of the SP and, to an even greater extent, the EP persuasion. Anthropologists and other social scientists premise their interpretations on two major conceptual clusters. One is stress with all its variants, grief, sadness, despair, mourning, depression, etc.; the other is aggression with the related notions of violence, anger, rage, hostility, homicide, warfare, and so forth. This latter cluster centers on the concept of aggression and its corollary “redirected aggression or violence.”


Very briefly stated, anthropological explanations of suicide meet five major difficulties and pitfalls.

1. As far as SP or role situation type of interpretations are concerned, the first kind of failure are partial explanations, that is explanations valid for specific categories of actors — for example young men only, or women only, or both together — passing as explanations valid for the overall rate of suicide. This type of explanation leaves an important residue unaccounted for.

2. Second, what is explained in the role situation type of explanation is stress and not why stress should result in suicide. Anthropologists explain rather well why young Gisu men from Africa, or Aguaruna Indian women, or Trukese male teenagers are stressed out, but why should they kill themselves? Stress is never a sufficient reason in itself, since the same stressful situations and the same role conflicts do not always result in suicides.

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Indian suttee, the Japanese hara-kiri, or the Tao Sug parang sabit, see below —. Theories on suicide do include prescribed suicide (Durkheim used the term “altruistic”), but for the time being I will not take it into consideration. Prescribed suicide is clearly a very specific behavior linked with special cultural norms that are absent in the Palawan case at least.

12) Here taken in a somewhat broader sense than usual.
3. Third, and maybe most importantly, specific socio-structural variables do not account convincingly for, or are largely irrelevant in, explaining a majority of cases. A cross-cultural comparison shows that grief over, and conflict between closely related people, together with sheer physical pain and discomfort, cause or promote suicide more often than any other circumstances. It is stress resulting from loss or conflict in the context of intense familiarity that accounts for suicide, and not whether the society is patrilineal or matrilineal, prone to warfare or non-violent, polytheistic or monotheistic.\(^ {13}\)

4. As far as EP but also to a great extent SP theories are concerned, a fourth major shortcoming lies in the notion of redirected violence and/or aggression.\(^ {14}\) The idea that aggression and/or violence against an other person or persons will rebound and be “redirected” against self, thus resulting in self-inflicted death, is in all likelihood grounded on a questionable metaphor of violence/aggression as a physical energy or fluid.

5. A last question concerns the possibility to generalize, within the same group or population, psychodynamic processes and psychotic or psychological profiles proposed by ethnopsychiatrists.

**Suicide in the Philippines and Southeast Asia**

The Philippines has one of the lowest national rates of suicide in the world. According to the World Health Organization it is 2.5 per 100,000 for men and 1.7 for women, while Thailand is 5.6 and 2.4 respectively, Singapore 13.9 and 9.5.\(^ {15}\) South Vietnam in the 1930s had a general rate of suicide of 7.5 per 100,000 [Smolski 1949: 56]. A study on suicide in Manila puts the overall rate at less than 1 per 100,000 for the period 1952–55 [Catunan 1956: 19].

Suicide rates and statistics for other countries in Southeast Asia are lacking or incomplete and scarce.\(^ {16}\) It would be unwise to make hasty conclusions from a few figures. It seems, however, that suicide rates are comparatively lower than elsewhere, if compared with European or East Asian countries. Japan has a rate of around 25, France a rate of 20, to give just two examples. Long-term trends based on serious statistics remain to be documented for Southeast Asia.

There are no reports that suicide is a recurring pattern of behavior in the Philippines except maybe for one specific institution documented for the Tao Sug people of Jolo, the sabil or juramentado [Rixhon 2000: 13–14, footnotes 3, 4 and 5]. This refers actually to a suicidal attack of the kamikaze type, a religiously and politically sanctioned action taking place in the context of warfare or hostile confrontation with a foreign power. It cannot be called simply “suicide” but has to be defined as “suicidal homicide,” or “murder-suicide,” an act sanctioned by Durkheimian beliefs.

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\(^ {13}\) This again would call for lengthy clarifications, especially in view of the strong survival among social scientists of Durkheimian beliefs.

\(^ {14}\) A discussion of the psychoanalytical antecedents and uses of this notion is presented in another publication [Macdonald forthcoming].

\(^ {15}\) WHO, suicide rates as of October 1991 (from the WHO web site). See also Cheng and Lee [2000].

\(^ {16}\) A fairly complete study of suicide in Singapore has been published [Hassan 1983].
cultural norms, something very different indeed than non prescribed suicide and self-inflicted death accomplished for personal motives. It makes the sabil culturally similar to collective mass suicides such as those reported in Bali when personal lives were sacrificed in the context of warfare [Suryani and Jensen 1993: 137]. What is known as amok in Malay and other Indonesian languages [ibid.: 143] can also be related to sabil inasmuch as it involves violent behavior and can be defined as murder-suicide. As a psychotic disorder however, amok lacks the kind of cultural content that characterizes sabil and is better characterized as homicide than suicide [ibid.: 144–145]. These institutions, sabil, amok and such, whether belonging exactly or not to the same class of culturally defined behavior, have little to do with the act of suicide as an individual, non aggressive, non-culturally prescribed type of behavior, which is the object of the present paper.

Elsewhere in Southeast Asia, there are sporadic reports of suicide among tribal and non-urban groups. Hollan and Wellenkamp devote a small section to suicide in their book on the Toraja of Sulawesi [Hollan and Wellenkamp 1994: 190–192]. Their sample — 5 recorded cases only — is too small however to prove anything and no general figure is given. For Bali, Suryani and Jensen speculate that possession trance and suicide are related [Suryani and Jensen 1993: 134], but suicide in Bali is rare except for the above-mentioned cases of collective sacrifices that occurred in 1902 and 1908 [ibid.: 137]. Amok and related types of behavior in Bali (called bebainan and kasurupan) are linked to possession phenomena and have, according to these authors, a suicidal aspect.

A recent paper by Robert K. Dentan provides a set of extremely relevant information and illuminating comments on the subject [Dentan 2000]. Studying suicide and emotions leading to it among the Semai of Malaysia — whose culture is very similar indeed to the Palawan culture — the author deals mainly with the emotional determinants of suicide [ibid.: 32]. Unfortunately there are no available rates, and frequency of occurrences is not estimated. No figures are given. The simple fact however that the author devotes a paper to this subject matter seems to indicate that suicide is not uncommon among the Semai. A number of case studies are proof enough that suicide is very much part of the social and psychological landscape of the Semai who apparently offer many instances of suicidal acts, mostly by drinking poison.

The gist of Dentan’s argument is that Semai people possess a mental/emotional profile that includes as one of its prominent traits “learned helplessness” [loc. cit.] which is characterized by passivity, nonaggression, and powerlessness. This attitude that could may be glossed as

17) In a private communication R. Dentan wrote that my characterization of Palawan social order could just pass as a description of the Semai. I wrote: “Their social life, efficiently organized, rests on a secular — not religious —, and individualistic code of ethics based on compassion. Conflict resolution is done by way of talking, not violence. Social order is further organized along the lines of statuses and roles based on sex, age, and closeness in terms of consanguinity and marriage.” See also Macdonald [1999]; Dentan [2000: 46, n.7].

18) In a footnote [Dentaw 2000: 45, n.3], the author compares “learned helplessness” to contemplative peace in Buddhism and to Step one of the program of Alcoholics Anonymous.
negative fatalism, leads to despair, and eventually suicide. Dentan’s interpretation of suicide among the Semai is worth a more detailed and critical analysis but I will leave it at that in this short contribution.

**Palawan Statistics: Basic Facts and Figures**

Let us now go back to the situation observed in Kulbi. The figures discussed below were obtained by drawing a list of all completed suicides, with a total of 88 cases, which occurred in the Kulbi area proper (that is excluding Kenipaquan) as far back as the informants memory could go, and up to March 2002. Since the systematic count of suicide cases started in 1989, and since informants memory could not be trusted to go back accurately over a period of more than 12 years, it is more than likely that statistics covering the period 1945 to 1978 are highly inaccurate and rates hugely underestimated. In Table 1, below, I did, however, indicate rates including this 1945–78 period, with 25 cases thus retrieved, just to show that in spite of its gross underestimated rate, occurrences of suicide during this period were already very high comparatively speaking, and that suicide was in no conceivable way an entirely new phenomenon in the 1970s. Informants agree also that suicide was a common practice in old times, even if they could not point to actual individual cases.

The period 1978 to 1989 is better remembered, partly also because 1978 saw a big surge in

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<td>Period 1945–89</td>
<td>I</td>
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<tr>
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<td>1,500</td>
<td>29</td>
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<td>Period 1990–2000</td>
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<tr>
<td>Period 1990–2000</td>
<td>867</td>
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<tr>
<td>Period 1990–2001</td>
<td>867</td>
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Note: Column I: population, II: number of cases, III: number of years, IV: number of cases per year, V: rate per 100,000

19) Usually this meant the end of the war (WW II) for which I give the date of 1945.
suicides, due to an epidemic of *epras* (festering sores causing blood poisoning) that left many dead. Out of grief caused by those fatalities, many people hanged themselves.

Since 1989, I kept an exact count of casualties and I made a number of visits to check data, the last ones in 2001 (May and October) and March 2002. In 1989 also I made a benchmark study, drawing a list of 867 living people, which I subsequently used as a cohort. This was actually a complete population census for 16 local groups, more than half the actual population of the Kulbi river basin, which I was able to estimate in the range of 1,500 to 1,600.

The annual rates per 100,000 that I get (last row of Table 1) are then calculated over several period of times as indicated in the table, and for three population sets: 1) the total estimated population of 1,500, 2) the total estimated population of 1,600 (in order to indicate a safe margin of computation), and 3) an actual population of 867 people (benchmark study).

Rates per 100,000 range from 76.3 to 173. The first figure is unquestionably far below the actual rate, since, as we said, data from the period 1945 to 1978 are incomplete and the actual number of cases cannot be assessed. Still, let us repeat that, comparatively speaking, we deal here with rates that already rank in the highest brackets in the world!

The 173 per 100,000 rate is the average rate over a period of 12 years for a cohort of 867 individuals. Over 867 people listed at the end of 1989, 18 had killed themselves at the end of 2001. There is only one instance in the world that is known to the author to show a higher rate, the one calculated for the Aguarunas of Peru [Brown 1986].

In Table 1, it will be observed that rates for the estimated population of 1,600 and for the benchmark study population (cohort) for the same period 1990–2000 are almost identical, 136.36 and 136.31. Considering that from 1978 on, all the rates are higher than 136, I suggest to settle for an estimate yearly rate in the range of 136 to 173. This gives us a safe margin. It can thus be confirmed that, for the total actual population of Kulbi (let us say 1,550 persons), 2 persons will, on average, kill themselves each year. In Fig. 1, the annual number of cases is graphically displayed and we see that the curve tends to remain between 1 and 4 suicides per

![Fig. 1 Number of Cases of Suicide per Year in Kulbi](image-url)

20) The average yearly rate for this cohort is actually higher when taking into account the total number of deaths occurring during this period.

21) In the US, by comparison, the national rate is 11.3 per 100,000. It is 15.7 times less than in Kulbi.
year, with a peak in 1978 (for reasons explained earlier), and a slight increase since 1995, with somewhat higher peaks than before.

We have thus established the statistical reality of suicide. Not only is this a very high rate compared to any other group or population in the world as Table 2 shows for other non-industrial or tribal people, but it is also a very major cause of mortality, compared to other causes in the same population set, as Table 3 indicates clearly.

Mortality rates estimated above show that suicide comes always as the second cause of mortality.22)

The Palawan who wanted to commit suicide did it almost always by hanging, very rarely

<table>
<thead>
<tr>
<th>Table 2</th>
<th>Comparative Annual Rates of Suicide per 100,000 Population for Other Non-industrial and Tribal Peoples (various sources)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aguaruna (Jivaro, Peru)</td>
<td>180</td>
</tr>
<tr>
<td>Palawan (Kulbi)</td>
<td>136–173</td>
</tr>
<tr>
<td>Apache (North America)</td>
<td>133</td>
</tr>
<tr>
<td>Shoshone (North America)</td>
<td>100</td>
</tr>
<tr>
<td>Maenge (Melanasia)</td>
<td>59</td>
</tr>
<tr>
<td>Tikopia (Polynesia)</td>
<td>53</td>
</tr>
<tr>
<td>Truk (Micronesia)</td>
<td>30</td>
</tr>
<tr>
<td>Vaqueiros (Spain)</td>
<td>28</td>
</tr>
<tr>
<td>Navajo (North America)</td>
<td>8</td>
</tr>
<tr>
<td>Maria (India)</td>
<td>5.3</td>
</tr>
<tr>
<td>Gisu (Africa)</td>
<td>2.4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Table 3</th>
<th>Mortality Rates for Kulbi</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mortality Rates, 1989, Estimated Population of 1,500 to 1,600 Pers. Causes</td>
<td>%</td>
</tr>
<tr>
<td>Sickness &amp; old age</td>
<td>73.00</td>
</tr>
<tr>
<td>Suicide</td>
<td>11.00</td>
</tr>
<tr>
<td>Childbirth</td>
<td>8.00</td>
</tr>
<tr>
<td>Accidental poisoning</td>
<td>5.00</td>
</tr>
<tr>
<td>Accidents, violent death</td>
<td>3.00</td>
</tr>
<tr>
<td>Sickness &amp; old age</td>
<td>78.00</td>
</tr>
<tr>
<td>Suicide</td>
<td>13.00</td>
</tr>
<tr>
<td>Accidental</td>
<td>4.00</td>
</tr>
<tr>
<td>Childbirth</td>
<td>3.00</td>
</tr>
<tr>
<td>Violent death (homicide)</td>
<td>2.00</td>
</tr>
</tbody>
</table>

22) In the US, suicide is only the ninth leading cause of death. Of course, if heart diseases and cancer are considered two separate causes of death, the ranking does not have the same meaning.
by other methods. Suicide by drinking poison either *tuba*, the juice from *Derris elliptica*, or *tejudan*, an industrial pesticide, has become more frequent in recent years, especially since 1980. Hanging is often, not always, done in the way described by Hezel for Truk [Hezel 1984: 195]. The victim does it kneeling or sitting and just leans into the rope. Death comes from anoxia. The difference between poison and hanging is an obvious reflection on different types of suicide. A younger population of suicides nowadays drinks poison and the act takes an exhibitionist form, with the victims parading in front of their family as they are in the throes of death. This will be developed elsewhere. Table 4 gives a breakdown of 88 cases.

Let us turn now our attention to the identity of those who commit suicide. The following figures display graphically the proportion of suicides by sex (Fig. 2), and age (Fig. 3). A breakdown by age and sex is given in Fig. 4 with a simultaneous view of the male and the female curve per age.

In sum, men commit suicide much more often than women, and young people, especially young men, more than older people. The first result (male > female) is the usual one among a majority of human societies, with a few exceptions. The second result (young > old) is more unusual. Industrialized and urban countries for which we have available rates show a curve that invariably reverses the one found in Palawan. Older people commit suicide more often than young people.23)

Fig. 4 displays graphically an interesting contrast between male and female suicides. Men and women do not seem to commit suicide at the same age. I suggested a socio-cultural interpretation of suicide in Kulbi on the basis of this sex and age variation24) [Macdonald 1999].

After answering the questions of who, how, and how many commit suicide, let us now answer the question of why they do it. What is being listed and counted in Table 5 below consists in alleged causes couched in the language of simple psychology, although one used by the informants in their own terms. Precipitating circumstances — like a quarrel or the sudden

---

### Table 4 Methods Used in Committing Suicide

<table>
<thead>
<tr>
<th>Method</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hanging</td>
<td>57</td>
</tr>
<tr>
<td>Poison (<em>tejudan</em>)</td>
<td>11</td>
</tr>
<tr>
<td>Poison (<em>tuba</em>)</td>
<td>8</td>
</tr>
<tr>
<td>Other</td>
<td>5</td>
</tr>
<tr>
<td>Data not available</td>
<td>7</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>88</strong></td>
</tr>
</tbody>
</table>

---

23) However, a sample of non-industrial and traditional societies including Truk, Aguaruna Jivaros, Maria from India, Vaqueiros from Spain, Tikopia and some others, displays an equal or higher rate of suicide for the young than for the old. The higher rate for the young seems to be a variable pointing to a very important property of suicidal trends. This issue is dealt with elsewhere [Macdonald forthcoming].

24) For reasons that will be explained below this interpretation is not valid.
death of a close relative — are usually part of the alleged causes and they coincide to give a plausible explanation to the fatal act of the victim. It is understood that the sudden death of a child, for example, causes the mother to commit suicide out of extreme grief. The sample we have is large enough, I believe, and the reported alleged causes plausible enough, for this table to reflect something of what is actually happening. In no way can it be taken as an accurate and final explanation of suicide in Kulbi, but it provides information on the variety of imputed motivations behind completed suicides.

As Fig. 5 shows, old age, sickness, grief, anger, and jealousy together form more than half of the alleged causes or motivations. In a number of cases, informants give more than one reason — for instance anger is often combined with jealousy —. Clearly reality is complex and stories disclose an intricate pattern of grief, anger, shame, jealousy and various other affects and feelings. But one thing is clear: apart from physical pain and extreme discomfort brought

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**Table 5** Imputed Motives for 86 Cases of Suicide (with multiple motivations per case)

<table>
<thead>
<tr>
<th>Alleged Causes or Motivations</th>
<th>No. of Occurrences</th>
</tr>
</thead>
<tbody>
<tr>
<td>Old age, sickness</td>
<td>17</td>
</tr>
<tr>
<td>Grief (over death of close kin/spouse)</td>
<td>15</td>
</tr>
<tr>
<td>Anger</td>
<td>13</td>
</tr>
<tr>
<td>Jealousy</td>
<td>13</td>
</tr>
<tr>
<td>Love</td>
<td>11</td>
</tr>
<tr>
<td>Fear</td>
<td>9</td>
</tr>
<tr>
<td>Thwarted desire to marry or remarry</td>
<td>8</td>
</tr>
<tr>
<td>Strife</td>
<td>7</td>
</tr>
<tr>
<td>Love with partner defined as incest</td>
<td>5</td>
</tr>
<tr>
<td>Marrying a second spouse</td>
<td>4</td>
</tr>
<tr>
<td>Shame</td>
<td>2</td>
</tr>
<tr>
<td>Madness</td>
<td>1</td>
</tr>
<tr>
<td>Slander</td>
<td>1</td>
</tr>
<tr>
<td>Loss of property</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total alleged causes/motivations</strong></td>
<td><strong>107</strong></td>
</tr>
</tbody>
</table>

---

Fig. 3  Age Curve (79 cases)

Fig. 4  Male and Female Suicide per Age (79 cases)

about by ailments, often due to old age, the great majority of cases arise either from tensions
existing in a narrow circle of closely related people, such as spouses, or parents and children, or
from thwarted and/or unrequited love.

Again this projection could not be taken as more than a very rough approximation of the
complex mental and emotional landscape of suicide amongst the Palawan of Kulbi. A much
more detailed study of case studies is needed.

Indigenous Concepts on Emotions, Personhood, the After-life,
and the Morality of Self-inflicted Death

The term urug is the generic term for suicide; tekleq, strangulation or hanging, is a term often
used as a substitute since it was, and still is to a great extent, the most usual way to
proceed. Nowadays one hears the word inum, drink, in connection with suicide by drinking
poison (tuba or tejudan). “He drank,” means “he committed suicide by drinking poison.” As
mentioned already in the introduction, people will refer to suicide with a gesture measuring a
length of rattan or rope and say “I’ll tie it to the roof-beam, and that’s it!” Frequent quotes
regarding the possibility or risk of suicide are made in public meetings, during litigation, and in
private talks.

Indigenous concepts relating to emotional life are used — very much as we do ourselves —
to explain the immediate causes or motives of individual suicides. The Palawan vocabulary
seems to be as extensive as the English one. Words like bugew, ruruk, gewaq, susa, subet,
relate to sorrow, emotional pain, grief, bereavement, loss, separation, solitude, loneliness,
silence, tears, crying, and the death of beloved ones. Nostalgia, tulus, the intense longing after
someone absent, the feeling that one is sorely missing another person, is frequently associated

25 It is not old age per se that is a cause for suicide.
26 This will be published separately [Macdonald forthcoming].
with alleged suicidal motivation.

In contrast with stress and grief, that are silent, solitary, almost anti-social, joy, happiness, being *mesegja*, happy, relate to collective activities, to feasting, gathering of people, boisterous noise, *rijuriju*, and joking, *luluji*. To be sociable is equated with a humorous, *meluluji*, disposition.

Fear, *takut*, *kebaq*, *rahas*, relate to anxiety, to being startled, to expect violent action, reprisal, and impending catastrophe. It is one of the commonly accepted motivations for suicide.

Feelings of love, *ireg*, *lusig*, *ingasiq*, cover a wide range of affects and dispositions, from desire, marital love, love in general, friendship, to generosity, sharing, giving, compassion (related also to *meubrej* and *perangaj* meaning good disposition, good moral quality). As has been remarked in the preceding pages, *ingasiq* (compassion and generosity) is a fundamental moral concept.

The term *iseg* is ambivalent; it means “anger,” but the adjectival form *meiseg*, also has the implication of bravery or of being evil, nasty. Resentment is expressed by the words *idekidek*, *siqik*, *bangis*, *bakak*, and denote also anger, hatred, hostility. Jealousy, *imun*, is frequently associated with anger and, of course, love.

Shame, embarrassment, *lequ*, and envy, *imbeng* are notions used in connection with suicide cases. Connected to shame and anger is the concept of slander, false accusation, *kudew*.

Indications provided by the above terminology may point to the conclusion that emotions quoted as causes of suicide by informants — like anger, pain, sorrow — mark separation from social life, a solitary behavior divorced from social concerns. Silence and solitude are characteristic of both estrangement from society and a desire to end one’s life. Personality traits invoked as contrary to suicidal behavior are indicators of active connection to others — namely *luluji* “humor, prone to joking” and *mepangnaq* “zealous, hard working” — whereas laziness, thievery, being *mejahuq* and *metakew*, are indicators of both antisocial and suicidal behavior.27)

Like other Palawan people, the inhabitants of Kulbi hold that the component parts of the person are 1. the *atej*, liver, seat of emotions, heart, place from where love, generosity, fear, anger, etc. originate, 2. the *nakem*, awareness, consciousness, 3. the *ginawa*, breath, life, and 4. the *kurudwa*, souls. The latter are the spiritual components of the person, entities that survive the individual’s demise, and make it possible to continue its existence after death. There are several souls, *kurudwa*, and usually they are located by informants at the top of the head and in various parts of the body, especially the joints. People don’t agree on the exact number of souls. The other components, *nakem* and *atej*, are functions and capabilities rather than spiritual entities and they don’t survive the living. The emotional and mental life of a person is also made possible by the following capabilities: *rendem* which means both memory and feeling.

27) Note however that positive traits, like being hard working, humorous, generous, etc., can be associated with individual suicides in statements to the effect that “in spite of he/she being hard working, humorous, etc, he/she committed suicide.”
pikir, pikiran which denote thinking and intellectual capacity but include also feeling and emotion. There is an interesting word for deep thinking, meditation or intellectual concentration, ujekkinen. Sensory receptivity to physical stimuli, like taste, rasa, is extended to emotions like anger and grief.

It is to be noted that emotional states are not separated from ideas and judgments. There is no absolute dichotomy between cognitive and affective states. The ability to comprehend, to remember, to reflect, and to feel are referred to by the same concepts of rendeman, pikiran and mepeatej.

It is tempting to treat suicide as part of an anthropology of death and see it in the light of cultural institutions dealing with mourning, beliefs concerning the afterlife, relationships between the dead and the living, funerary rituals and the like. Unfortunately in the Palawan case, eschatology does not provide a broad enough or solid enough ground for such an approach. Funerary rituals, death, and beliefs concerning the after-life are minimal. Shortly after death has occurred, the body is simply buried in the ground wrapped in a mat and sometimes put in a coffin. Several days later, an invocation and an offering is made to the soul of the departed who is sternly lectured on his/her duty to leave the living alone and not come back hovering about. Contact between the living and the dead are always detrimental to the living. Complete separation should be observed at all times.

This scant development of death rituals is linked to the general amnesia concerning the departed. Dead relatives above the generation of the grandparents are entirely forgotten. Oftentimes names of all four grandparents are not remembered. Ancestors, kegunurangan, are invoked in prayers; they form a fuzzy set of dead relatives of uncertain depth and width.

The soul, or main soul, kuruduwa, of the dead goes to a place called kelebegang (kulibegang, kulebegang) where it lives happily forever in local settlements like those of the living. The kelebegang is supposed to be a place where things are upside down (streams flow from downhill to uphill, etc.).

Dead people are separated according to the kind of death: victims of accidents and violent death live in one settlement, victims of epidemics in another, suicides in another yet. People having committed evil deeds (murder, theft) go to narka, where they burn in the flames of hell. No specific stigma or consequence is attached to suicide. The souls of suicides live in one particular place reserved to those having thus died, but they continue their after-life existence in no worse or better conditions than the others. To my knowledge, the soul or ghost of the suicide is not considered to be particularly harmful or vengeful.

As a rule, suicide is a kind of behavior that is disapproved of. It is considered bad, foolish, sad, the person committing suicide is considered unreasonable but oftentimes pitiful. No sanction whatsoever and no definite condemnation are pronounced against the suicide. Some,

28) Sometimes dead people speak to the living. The sound of their words cause the living to feel headaches and pains.

29) The word is Sanskrit in origin. I owe this information to Prof. Tachimoto. I believe, however, that the concept of purgatory is borrowed from Islam.
like the great shaman Tuking whom I interviewed on the subject, speak of suicidal behavior as some kind of curse or illness that befall people and things when the order of the world has been disrupted. Suicide is thus part of a general disruption of things.

The social outcome of suicide is most often a litigation involving the close kin of the deceased bringing a “suit” against the spouse or any another person deemed to be responsible of the victim’s death. Suicide is then constructed as homicide. The accused is asked for a kebangunan, compensation to be offered for the death caused by the guilty party’s behavior. This is the prevalent cultural model enabling society to deal with the aftermath of self-inflicted death.

The above examination of local views and concepts — concerning the structure of personhood, the emotional life, the after-life, morality and the social model used to deal with suicide — together with some detailed accounts of completed cases of suicide, not included in the present paper — lead to two conclusions.

1. Current views hold that suicides are the result of stress and emotional pressure combined with conscious, rational, albeit faulty, thinking.
2. Suicide is not conceivably committed with fear or hope based on local eschatology, nor with a notion of supernatural sanction, positive or negative. It is just consistent with the inherent secular nature of this society that the only cultural model offered is a judicial one, not a religious one. Suicide is framed in terms of social behavior and law. The anthropological model called for should then be premised on concepts inherent to customary law.

Conclusions

In a forthcoming book, a great deal more evidence and data analysis will be provided, including the detailed account of actual cases, statistical analysis of social, economic and demographic variables, as well as in-depth examination of the cultural context. However, a few tentative conclusions will be ventured at this point.

We could describe the situation in Kulbi like this: suicides cases seem to fit five basic profiles.

1. “melancholy” suicides (with victims characterized as prone to self-sacrifice, considerate to others, self effacing, having a strong internal sense of duty),
2. gender relations suicides (involving jealousy, infidelity, unhappy marriages, polygyny, frequent quarrelling between spouses),
3. passionate and angry suicides (resulting from forbidden love, incestuous relationships, involving physical violence at times),
4. multiple suicides out of grief (close relatives committing suicide in a domino pattern),

30) Thus fitting the “egoistical” type of Durkheim: strong regulation and weak integration.
5. impulsive suicide of teenagers (apparently due to love, or anger, or fear)\(^{31}\)

Moreover, individual cases indicate suicide as a way to stop pain and stress, a withdrawal from social life and possibly a low threshold to suffering and pain. Suicide is rarely linked with homicide or violent behavior and only one case was definitely caused by severe mental problems or insanity.

A general and sketchy description like the one outlined above falls short of a satisfactory account of the phenomenon, for some of the reasons indicated when reviewing other anthropological interpretations. To begin with, it accounts for clusters of cases, and gives a fragmented explanation, not an explanation of the overall rate of suicide availing in Kulbi. Indeed the overall yearly rate is the statistical fact to be explained in the first place.

The first hypothesis I suggested, based on the 1989 survey, proved unsatisfactory. The kind of interpretation I offered then [Macdonald 1999] was the typical SP role situation interpretation of suicide. In it, I suggested that two peaks of male and female suicide curves per age could be explained by socio-structural variables associated with marital status. Young men committed suicide, I contended, because they were not able to marry\(^{32}\) (a number of instances showed this to be the case); middle-aged women killed themselves because they lost or were about to lose a husband (this again seemed to be supported by a number of occurrences). It seemed to be a sound explanation because it accounted for a fair number of cases — two out of the three peaks of the age/sex curves — but mainly because it tied up stress, role situation and the most important variable in terms of Palawan social structure, namely marriage and affinity.

This hypothesis seemed to agree nicely with the facts. Unfortunately, a sound-looking interpretation that seems to agree with the facts is no proof that it is a good explanation. Actually it turns out not to be a good explanation at all. Why? First because the curves of suicide for male and female suicide in the next period, from 1989 to 2001, started to diverge and display a completely different pattern. Young men continued to commit suicide, but not middle-aged women; second, because the figures were too small to grant any statistical validity to the distribution per age and sex\(^{33}\); and third because in any case it provided, again, only a partial interpretation. What was needed instead was a consideration of the overall yearly rate as an object of investigation in itself.

Marital problems such as those described for Kulbi-Kenipaqaqan, and stress resulting from situations involving prospective unions or divorces, are identically experienced by the Palawan people in the central highlands, in Punang, Quezon or in the Singapan valley. Now the latter just DON’T commit suicide over such matters. Since the culture, social structure and general way of life in Kulbi-Kenipaqaqan are not essentially different from other sections of the same

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31) There is an overlap between profiles 3 and 5, a number of teenage suicides having anger and/or love as main alleged motives.
32) The cause is usually rejection by prospective in-laws.
33) I am indebted to Myriam de Loenzien, research fellow at the IRD, Paris, for a statistical analysis of my data.
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ethnic group, where no suicides or a very low incidence thereof are reported, the major
difficulty and most important question in this connection is this: *Why, under similar
circumstances and under the same social/cultural conditions, would members of one group
commit suicide, and to such an extent at that, while members of the other will not?* Again, the
point is to account for a consistently high rate of suicide affecting one whole section of the total
ethnic population. Partial explanations will not suffice. Worst of all, social structural variables
and cultural ones stand in great danger of being found irrelevant. What then?

The Kulbi situation provides us with a unique natural experiment. Unexpectedly, a section
of a rather homogeneous ethnic group, for no apparent reason, displays a tremendously high
and fairly constant rate of suicide, completely unlike the other neighboring groups. Does it
happen elsewhere? Actually it does. The Aguarunas from Peru, and the Vaqueiros from
northern Spain are strikingly similar in this respect. Together with small island societies, like
the Tikopia, Maenge, and possibly some other Micronesian societies in the past, they are self-
contained, endogamous, and relatively isolated populations.34) They exhibit inordinately high
rates of suicide compared to their closest neighbors and to the surrounding population.
Maybe, following this lead, and by a careful comparative examination of these and similar cases,
will we get some answer to our main question.

Inevitably, this line of inquiry will lead one to raise the heredity factor question. Could
suicide be a hereditary property of a genetic pool being maintained in the same endogamous
population for generations?35) Recent findings have shown that genetic and biological factors
are at work. “Findings from genetic and, more recently, molecular biological research, add to
[psychological and other] models the possibility of a genetically defined predisposition to
suicidal behaviour . . .” [Hawton and van Heeringen 2000: 3, my emphasis]. Genetic suscep-
tibility to suicide has been demonstrated [Roy *et al*. 2000: 218] and the role of serotonin system
in the prefrontal cortex has been shown to be crucial in the pathogenesis of suicidal behavior
[van Heeringen *et al*. 2000: 227]. A genetic study of isolated populations such as the Kubli-
Kenipaqaan set is therefore needed.

But suicide can never be attributed to a single cause and as genetic and biological factors

data have been analysed by P. Bonnemère [Bonnemère 1992], might very well be such a population
isolate. Over a 40 years period, with a population of 2,500, their yearly suicide rate has been
calculated to be as high as 96 per 100,000 (P. Bonnemère, personal communication), which contrasts
in a most dramatic way with their fellow Anga-speaking neighbors, the Ankave, whose suicide rate is
zero.

35) In no way am I suggesting a scenario such as those proposed by sociobiologists whose teleological
mode of reasoning produces arbitrary and absurd hypotheses. A good example is DeCatanzaro’s
proposition that suicide occurs where it has “little impact on the gene pool” by eliminating individuals
with impairments in reproductive capacity [DeCatanzaro 1981: 66], whereas it is obvious that in many
societies like Micronesia, Palawan and elsewhere, the population most affected by suicide is composed
of teenagers and young people at the peak of their reproductive capacities. To say that suicides have
a reduced “coping capacity” is plain tautology. By the way, one could come up with a number of
much cleverer, even if equally arbitrary, scenarios proving that suicides promote or optimize the
reproduction of the gene pool.
may explain a predisposition to suicide, stressors of different orders, psychological and otherwise, will activate it. In this line of research, I suggest to look into what I call the “wave hypothesis.” This kind of interpretation is premised on the observation that suicide is a highly epidemiological phenomenon. All students of suicide have remarked the high susceptibility to imitation and the frequent clustering effect of this phenomenon. This is well established for the Palawan case. But the “wave hypothesis” is not essentially premised on direct imitation, rather on the kind of process that is brought about by long-term socialization. In a small society like the Kulbi population set, every child grows up being exposed to occurrences of suicide and suicidal behavior amongst a very close circle of kin and neighbors. The child grows up accustomed to the idea. He sees or hears about elders, uncles, aunts, older cousins, friend’s parents killing themselves. Even if the “official” explicit social discourse speaks disparagingly of it, an unspoken and intimate adhesion to the idea of suicide might prevail in the minds of the young. Thus suicide becomes an accepted model of behavior, albeit one that may be condemned by explicit social and cultural rules. Direct imitation and clustering will then look more like “wavelets” that create a superficial turbulence added to waves propagating themselves through successive generations.

But what in the first place can explain a suicide wave of the kind outlined above? In order to produce a wave one needs a commotion or turbulence of some kind that will cause the wave to swell and then propagate itself. Propagation might be accounted for by socialization, but wave formation has to be accounted by a sudden event of a catastrophic nature, such as an epidemic. We know for sure that there was such an occurrence in 1978, causing a sharp rise in suicides. But older informants and narratives of an ethno-historical nature record the advent of an even worse epidemic at the beginning of the twentieth century, or earlier, allegedly responsible for a significant demographic drop. There are no written records to document it, so it is difficult or impossible to prove, but we have an indication at least that such a suicidal wave could have originated then.

Whatever kind of explanation that will finally prevail, it will largely, I believe, result from cross-cultural comparison. Students of suicide need to focus on overall rates of suicide, become more critical of internal socio-psychological models, and pay more attention to the properties of small self-contained biological populations, before they are likely to be able to provide new and more satisfactory answers to this harrowing puzzle.

36) D. Rubinstein in a recent paper, writes: “And once begun, the suicidal acts seem to have acquired a psychological contagion of their own” [Rubinstein 2002: 40].
37) Again, D. Rubinstein writes, in a striking parallel with my own conclusions: “Evidently the idea of suicide has become increasingly commonplace and compelling, and young children are now acquiring this idea at earlier ages” [Rubinstein 2002: 40].
38) The archipelago started to be hit by epidemics from 1860 onward [De Bevoise 1995: 10]. An especially devastating cholera epidemic spread in the Philippines from the Middle East via Borneo and Jolo [ibid.: 168].
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References


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