Yogyakarta Street Careers –
Feelings of Belonging and Dealing with Sticky Stigma

THOMAS STODULKA*

Abstract
This article focuses on a community of street-related children, adolescents and young adults, who broke away from their families and began embracing life on the streets of Yogyakarta, Indonesia. Being unprotected and homeless gave rise to spatial, social and emotional vulnerabilities and negative attributes that strongly affected newcomer children and adolescents. After being mocked and exposed to affective and physical violence during community initiation, their integration into the street-related community shifted their experiences of belonging in terms of uplifted self-esteem and wellbeing. Since emotions play a vital role in transforming the experience of a stigmatised identity, this article illustrates that identity and stigma attunement entails ‘emotional promises’ of stress relief and ‘emotional rewards’ by blending in to prevailing community ethos. The extended case study of a (now) young man’s street-related career reveals that affective bonds and community solidarity, but also structural vulnerabilities, stigmatization and afflictions can stick even after ‘exiting’ the streets, despite creative ways of coping and attuning to new (off-street) localities1.

Keywords: Affliction, Emotion, Stigma, ‘Street Career’, Indonesia

When I first got involved with street-related children2 and adolescents in

* thomas.stodulka@fu-berlin.de

1 I would like to thank the collaborative research team and my friends in Yogyakarta for sharing their knowledge and time with me for over a decade. The editors of this Special Focus and three anonymous reviewers have substantially helped in finding the right words that I had lacked in previous drafts.

2 I prefer the term ‘street-related children/youth/communities’ over other concepts. The young people I have met over the years did not live and work on the streets exclusively. They engaged in socio-spatially complex and multifarious alternative economies and co-habitations. The term ‘street-related children/youth’ refers to those, who identified themselves with and shared a feeling of belonging to the community described here. When differentiating between ‘children’, ‘adolescents’ or ‘youths’, and ‘adults’, I do not primarily refer to chronological age, but to local perspectives on the life course. This perspective relates to ethnography-based insights that ‘children’, ‘youths’ and ‘adults’ do not necessarily form exclusive age-specific street-related communities. On the contrary, in both the komunitas Congklak
Yogyakarta over 15 years ago, NGO-activists were discussing the fading solidarity among Yogyakarta’s inner city ‘street communities’. They bemoaned an increasingly scattered cityscape of disconnected street-related communities referred to as ‘komunitas’ that superseded what they described as collective street kid identity (see Beazley 2003a, 2003b). A few years into Indonesia’s political reformation movement (reformasi) that followed the fall of second president Suharto (1966-1998) and in which many intellectuals, artists and political activists contemplated the possibility of a democracy without corruption, collusion and nepotism, delineated instead by freedom of speech and assembly, I doubted their pessimistic tone. They forecast that one day nothing might be left of the citywide street movement that had unfolded so vibrantly before my eyes during my first six months of fieldwork in 2001. I had spent three months at an NGO-owned beach bamboo hut, where together with transitory visitors (most of them children and adolescent young men that had identified themselves as either anak Bendoro or anak Congklak depending on ‘their’ street-junction) we produced handicrafts that were sold to a local street art gallery. Lacking more practical skills, I offered English language, swimming, cooking and filmmaking sessions, and the children and adolescents colloquialized my basic ‘classroom Indonesian’ in return. The bamboo hut, which had no running water but basic kitchen utensils, a kerosene stove and two mattresses, was temporarily neglected by the NGO. Thus, we could engage in activities that we thought were entertaining or useful for the sometimes fifteen, at other times only two, visiting ‘street kids’’ future careers. After three months, Monchi (*1980, †2013), Harvey (*1976) and Kris (*1982), three senior anak Congklak asked me to join them to sleep over at their hangout near the Congklak street junction in the North of the city. 16 years later, and after almost 50 months (2005; 2006-2008; 2009; 2012; 2014-2015) of actor-centered collaborative action research (Stodulka 2015b, 2014b), the activists, scholars and young persons that have invited me to learn about street-related life, witness a radical governmental crusade against street-related communities. This continuous ‘development’ has peaked in 2014, when street-related activities referred to as ‘busking’, ‘begging’ or ‘loitering’ were prohibited by a new Law on Vagrancy and Homelessness. This Peraturan Daerah No. 1/2014 legally turned and the komunitas Bendoro where I have studied with, persons of different gender, ages and life stages lived together in the same street-related communities.

3 I have changed the names of street-related communities and persons for reasons of confidentiality and anonymity. Anak (Indon.) can be translated as ‘child’ or ‘belonging/relation to someone or something’. In this context, the terms can mean both ‘Bendoro kid/Congklak kid’ or ‘relating to the Congklak/Bendoro street junctions’. Similarly, anak jalan-nan is literally translated as ‘child’ (anak) ‘from the street’ (jalan-nan) or ‘street child’. As anak can also indicate descent or a belonging to someone or something, its meaning as ‘belonging or related to the street’ seems more appropriate.
stigmatised anak jalanan – the Indonesian term for ‘street-related children’ (see footnote 2) – into ‘criminals’ in the wake of Yogyakarta’s agenda of modernising, regulating and cleansing the city from the ‘dirty’, the ‘poor’, and the ‘uncultured’. The former activists were right. Despite Indonesia’s so-called ‘reformation’, the laws and decrees that deny minorities basic social rights and exclude them from space and ‘society’ (masyarakat) are on the rise (Hegarty & Thajib 2016, Nanwani & Siagian 2017, Stodulka 2017).

This article highlights that increased marginalisation, stigmatisation, crumbling NGO-support (Pravitta 2012) and the criminalisation of street-related communities has deprived them from access to economically lucrative urban spaces of income generation. Despite this unfavorable turn of events, I intend to illustrate that their eviction from the public eye did not coalesce with a lack of mutual care and solidarity among street-related communities. From a theoretical perspective, the article contributes to critical studies of marginalised children and youth (Bolotta 2014, Brown 2011, De Moura 2002, Ennew & Swart-Krueger 2003, Glauser 1990, Heinonen 2011, Panter-Brick 2002, Vignato 2012), children and youth subculture formation (Baulch 2002), gendered identity construction, social practices of place-making among street-related communities in Yogyakarta’s city center (Beazley 2003a, 2003b, 2002, 2000, Berman 1994, Erntanto 1999), and the scholarship on Javanese subjectivities (Beatty 2005, Geertz 1960, H. Geertz 1961, Good 2012, Good, Subandi & DelVecchio-Good 2007, Guinness 2009, Newberry 2006, Retsikas 2014). Expanding on these debates, it highlights the experiences of newcomer children during and after their integration into street-related communities and focuses on the life of Kris, a former ‘street kid’ of the Congklak community, vis-à-vis central turning points during and after his street-related career. It taps into a neglected spot of street-related research that combines long-term action research with a focus on the emotional, physiological and socio-cultural coming of age in the context of stigmatisation and marginalities. This diagnosed ‘blind spot’ of child-centered research seems in accordance with the desiderata of other activist-researchers, for example Sarah Thomas de Benítez, who writes on behalf of the international Consortium for Street Children, that within

(1)ongitudinal research into ageing off or onto the streets – repeat situation analyses are useful, together with longitudinal ethnographic research – for example to explore changes in state of subjective wellbeing as children stay longer on the street (…) and to explore transitions from children to youth and adult – both on and off the streets (2011, p. 36).

The following section introduces the Congklak community, before the extended case study showcases that the integration into the street-related community shifted newcomers’ experiences dominated by shame, embarrassment and
humiliation to uplifted self-esteem and wellbeing. It underlines that emotions play a vital role in transforming the experience of a stigmatised and marginalised identity. Identity transformations and stigma attunement are collective endeavors of contesting and negotiating positionalities in encounters between veteran community members and newcomers. Social and cultural integration and subjective well-being are engineered through ‘emotional promises’ of stress relief and ‘emotional rewards’ granted by veterans if the newcomer children and adolescents blend in to prevailing community ethos by ways of rhetoric and embodied performance. Moreover, the long-term research perspective (2001–2015) illustrates that socially generated affective bonds and solidarity among street-related children and youth, but also the vulnerabilities related to a stigmatised identity can persist even after they have exited the streets.

The Congklak community

Senior activist and anthropologist Bambang Ertanto described in a conversation in 2008 that until the turn of the century there were hardly any street buskers (pengamen) along the Ring Road, a multi-lane highway that surrounds Yogyakarta’s city center. In the 1990’s, ‘anak jalanan’ were a phenomenon of train stations and the city centre. Monchi, Harvey and Kris, who had introduced me to street life in 2001, dated the origin of their komunitas in 1999 at the aforementioned multi-lane city highway. A group of around 20 children, adolescents, young men and women started to build huts behind the big street junction after the nearby ‘Street Children University’ (Berman & Didit 1997) had closed down only a few months after it had opened its gates. With the assistance of an NGO that had previously set up the ‘university’, the anak Congklak founded a music band the same year and held street art exhibitions within their emerging community that was built on neglected public wasteland. Good relations with local police officers who guarded the traffic (Stodulka 2016a), the lucrative location just behind a busy street junction, the informality of the place with its comparatively loose social rules, the openness of the komunitas, and the safety it offered to ‘homeless’ and busking children and young adults, soon increased the numbers of the community. In 2005, the komunitas Congklak comprised of over 40 members. As its leader, then 25-year old Monchi aimed at attaining formal recognition for their place. After collecting the signatures of local authorities, the police, and representatives of different political parties, the collective efforts of formally adhering to the neighbouring kampung’s formal rules of appropriate conduct and fostering

Kampung (Indon.): a closed social community, which is organised along strict social and cultural rules and norms of conduct. Kampung life is strongly ritualised and comprises of various status-related social duties and economic obligations of mutual help (gotong
good ‘neighbourhood’ relationships almost resulted in the community’s legal authorisation as an officially registered kampung.

Until one day in April 2005, when an infuriated mob burnt the whole place down after the community was scapegoated for thefts of a motorbike and an electronic water pump. After six years of growth, the community decreased in size and those who continued working at the street junction had to carve out new ‘safe enough spaces’ (Thajib 2017). When I talked to the anak Congklak about what they called ‘tragedi’ – a tragedy – most of them concluded with the words: Ya udah! Mau gimana lagi? – ‘Well, what’s done is done! What else is there to do?’ – an expression that was often articulated in the aftermath of challenging experiences, where there were no social, economic or material solutions at hand. Monchi, key informant and protagonist of this research, explained this trope as an acknowledgment of one’s own powerlessness in terms of overburdening experience and related it to the Javanese-Indonesian term ‘pasrah’, that can be translated as ‘(fatalistic) surrender or submission’.

After their little huts were burned down by the neighbouring kampung residents there seemed to be only one option: move on. After the incident, around 20 children (aged between 5 and 15 years old) started rebuilding their community on the other side of the street junction under the guidance of Monchi, Harvey and Kris, who by then had matured into young men. The intersection’s traffic lights and their social and spatial surroundings remained the anak Congklak’s primary work spaces, where they begged, busked and hawked, hoping that the window slots of cars or big trucks coughed up some spare change (receh). Sometimes, in groups of two or three, they entered the small city buses (or the bigger economy intercity buses, leading north to the local bus terminal, east to the cities of Solo, Malang or Surabaya, south to the city centre, and west to Bandung or Jakarta) to busk for a few minutes before they hopped off at the side of the road. Presumably a consequence of their previous eviction, the komunitas tried to keep a low profile. Monchi defined this careful ‘blending in’ as ‘Javanese way’ (cara Jawa): instead of provoking others’ attention, he explained that his komunitas intended to glide along (ngalir), practice endurance, patience (sabar) and respectful deference (hor-mat) to the neighbourhood and the shop owners, as well as accepting (nrimo) their misfortune wholeheartedly (ikhlas).

(Be)coming and leaving – A street-related career

Kris (*1982) grew up in a kampung that was located five kilometres from the Congklak street junction as the first child of Ibu Wijila and Bapak Hartono.

rayong). Java’s cities are both spatially and socially structured as mega-clusters of hundreds of kampung, which are only interrupted by commercial units and gated communities.
His mother worked as a hired labourer in the rice paddies a few kilometres north of the city. His father sometimes contributed to the household income as a hired labourer at construction sites in and around the city. Kris dropped out of school after the 6th grade (kelas 6 SD) at the age of 14 in 1997, whereas his younger brother Trianto finished junior high school (SMP) at the same age two years later. Because Kris began working at construction sites with his father when he was 12 years old, he had missed school regularly. The family's rented home was an empty three-room cemented house and contained only two woven mats, two mattresses, an old sofa, a coffee table, and an old portable radio. There were no photos or pictures on the walls that displayed family pride or history (Suryakusuma 2016). At the back, there was an empty little room, where Kris’ mother cooked with firewood. Kris had finally left home at the age of 16 (1999) and joined the nearby komunitas Congklak without returning home soon after his youngest brother Hari was born.

**Becoming ‘Congklak’ – Shifted Experience and Stigma Attunement**

‘Blending in’ was not only a matter of collective attunement to marginal spaces5 (Röttger-Rössler & Stodulka 2014), in order to navigate the streets and urban niches in smooth Javanese ways as Monchi had previously described above. As a newcomer to the streets, one had to work one's way into the komunitas first. Monchi, Harvey and Kris described their own and other newcomer children’s integration into the komunitas Congklak as a monitoring process, in which they had to prove that they were trustworthy allies. When compared to other Yogyakarta street communities, where beatings, prolonged humiliation, mocking and also forced sex could be part of community initiation practices (Beazley 2000, Bongkok 1995, Stodulka 2016a), Monchi, Harvey and Kris described the integration into their komunitas as more ‘subtle and smooth’ (halus). They continued stressing that the komunitas Congklak highlighted Javanese values of ‘politeness’ (sopan santun) and ‘mutual care’ (saling peduli).

One evening in 2005, when we sat at the community’s new ‘basecamp’ under the roof of the motorbike workshop where we shared food and drinks, Kris related his first encounters with Congklak community members. When he first tried to sit with them as a 16-year-old ‘stranger’ in 1999, they had turned their backs on him. They were eating rice snacks, fried chicken claws and heads, while he was sitting about three metres away under the roof of a

---

5 Human geographers have categorised marginality into overlapping spatial and social dimensions (Mehretu et al. 2000). From an anthropological perspective, I define marginality as also situated and contingent, “as a constantly shaped asymmetric power relationship between an often self-claimed centre and a (constructed) periphery” (Röttger-Rössler & Stodulka 2014:17).
deserted motorbike workshop. He remembered “these bastards” (bajingan) talking about “dogs” (asu), and that there were different kinds of dogs: good dogs, bad dogs, and dogs that had to be beaten up because of their annoyance to the public. At that time, he did not understand that his later friends, among them Monchi and Harvey, were actually talking about him. They started throwing the leftovers over their backs into his direction, which Kris recalled as “bone rain” (hujan tulang). After they had finished eating they sat down next to him. When one of them suddenly grabbed him roughly and asked what he wanted from them, Kris replied that he only wanted to sit with them. He hadn’t even finished his sentence, when then 17-year old Habib suddenly slapped him in the face. He asked Kris to eat up the bones, the rest of the fried chicken heads and feet as fast as he could. After almost vomiting, Habib gave him a local whiskey-gin-vodka-mix to drink. “It tasted awful,” he remembered. Then Kris was invited to sit and drink more of the local brew with them. They called him “a dog” for the whole evening and mocked him for becoming more and more drunk.

During the following weeks, he was invited to join them busking between the cars lined up before the red traffic lights. After a while, the joking and mocking ceased, until he himself started to pull jokes and fight back whenever he was beaten without reason. Kris defined this as a turning point, where his experience of the street junction had shifted. He claimed that he was no longer afraid (takut) on the streets once the mocking stopped, and that he was no longer worried being spotted and looked at while busking (ngamen) between the cars and motorbikes. Kris described that it was important to him not to feel ashamed (malu) anymore to be a jalanan, and that after a while he wasn’t afraid (takut) to be discovered by his parents, because he could feel that he had become an anak Congklak. He assured me that despite the initial mocking and the tragedy of eviction, life was better there. He was fit better (cocok) with his ‘new family’ than he did at home. I am proud (aku bangga) to be an anak Congklak, he closed the conversation and headed off to the neighbouring little shop to buy more tobacco, boiled peanuts and drinks from the community’s collective funds that were administered by Monchi. After enduring the liminal phase of his initiation Kris had learned to attune to the community’s ethos and act accordingly: addressing food stall owners empathically so he could get food on credit; embodying the ways of politely speaking to police officers on the streets in order to pass them without harm; negotiating with NGO-activists in order to get as much as possible out of them; or keeping members of other street-related communities at a distance through body posture and coarse language. Newcomers were continuously socialised and – at a later stage – socialised others into their komunitas by means of almost ritualised initiation that targeted the acquisition of a particular slang, the introduction to masculinity performances, practice of seks bebas (‘sex before marriage’),
working patterns, navigating localities, and learning how to reappraise adversities that exceeded their coping resources in a more positive light. The collectivity of the komunitas with its group norms of conduct and narratives of unlimited freedom, self-elevation, superiority and pride created a social and localised identity that they celebrated with their peers and resourcefully communicated in their encounters with others (Stodulka 2016a, 2015a, 2014b). At the age of 16, Kris turned into a master of ‘code switching’ by adapting his speech and body language according to the expectations of those he encountered in the city’s public spaces.

The long-term street career perspective aims to highlight that the subjective experience of identity attunement is closely related to the appraisals and affective practices of community veterans and leaders: “emotions play a vital role in transforming the meaning of a stigmatized and marginalized identity” (Fields, Kopp & Kleinman 2007, p. 164; see also Yang & Kleinman 2008; Yang et al. 2007). A positive re-evaluation of a stigmatised self is difficult without an emotional mobilisation by the surrounding community. The process of identity attunement entails ‘emotional promises’ of community integration and an enhanced wellbeing triggered by ‘emotional rewards’ through senior anak Congklak’s approving looks, words of solace or the introduction to new income generating opportunities once the newcomers adequately embodied the community’s ethos, norms of conduct and emotion display rules. The integration into the community did not safeguard the newcomers from stigmatising encounters, but it fostered a feeling of belonging that entailed the opportunity to continuously improve their skills of keeping harmful encounters at a distance and experience comfort and well-being in others. I follow Douglas Hollan’s (2009) definition of wellbeing here, which highlights its relation to socio-cultural practices of place-making and moving through space, time and various social fields of the public spaces. He writes:

all communities create zones of activities and engagements for people that affect their sense of well-being in relatively positive or negative ways. As people move through the course of a day and traverse the socialscapes around them, as they move from one location to another and engage with various types of people and activities, they feel more or less safe and secure, more or less stimulated and engaged, more or less well or unwell (Hollan 2009, p. 215).

A attuning to community action and ethos could contribute to increased well-being by converting shame and loneliness into the pride of belonging to the komunitas, despite its stigmatization as ‘dirty’ (kotor) or ‘criminal’ (preman). In addition to the public’s stigmatization of newcomers as ‘anak jalanan’, painful experiences of shame and perpetual humiliations during the liminal phase of initiation by those peers and seniors they sought to be-
friend as community members, underwent processes of re-evaluation once the newcomers felt integrated into the community. The senior community members’ positive feedback on the embodiment of the Congklak community ethos could evoke pleasant (nyaman) feelings. The fear (takut) and shame (malu), which dominated the experiences of ‘newcomers’, gave way to more positive self-evaluations and narratives of freedom (bebas), happiness (senang) and pride (bangga) once they felt they belonged to their new komunitas (Stodulka 2009). By observing, learning and imitating speech and body language from senior community members, power inequalities, which were previously responded to with frustration, became more contestable.

**Leaving ‘Congklak’ – Immutable Solidarity and Persistent Stigma**

Kris returned to his family’s house to visit his mother every other week in the aftermath of the ‘Congklak tragedy’, but he continued busking (ngamen) and sleeping at the intersection irregularly until 2006. The following encounters unfolded in 2007, a few months after Kris had ‘exited’ the streets and moved back into his family home again in order to support his mother and take up more regular jobs at construction sites. I had left Yogyakarta for a year, so my reunion with Kris was initiated by a short SMS text from Monchi, the community’s leader: “Please come to my house, something important happened. All the best for you and peace on every single of your paths, Monchi.” I picked up the then 25-year-old next to a little food stall along the four-lane highway that connects Java’s South with the Northern coast. “Let’s go!” he shouted from afar. A second later he sat on the back of my aching motorbike smiling. “Let’s go, I will tell you on the road”.

As we drove through little hamlets on our way down South into the city, Monchi explained that Kris (then 24 years old) had been taken to a mental health institution because he “went crazy” (jadi gila) six weeks prior. Monchi assumed that his ‘craziness’ resulted from a frequent combination of methanol, pills, and magic mushroom consumption. After he had been isolated in a ‘cell’ for two weeks at an asylum near the mountain resort of Kaliurang, he escaped during the warden’s lunch break and walked 20 kilometres to his family home, just before he was to be transferred to the institution’s third-class section.6

After spending a week with his family, Kris had recovered and seemed

---

6 In most Yogyakarta city hospitals, rooms were divided into the categories VIP, 1st, 2nd and 3rd class. The rooms differed in their costs, equipment, service, the quality of the treatment, and the frequency of nurses’ and doctors’ visits. Patients, who were treated based on the subsidised Social Health Insurance, were referred to 3rd class. In the 2nd and 3rd class section, water bottles, towels, syringes, soap, or blankets needed to be either rented or purchased. In 2nd class, patients shared a room with two to six patients, sometimes separated by curtains, 3rd class could accommodate up to twelve beds per room.
better. But for the past two days he had become strange (aneh) again. His temporarily improved health condition developed into another episode of “real madness” (gila benar), as Monchi described it. Kris’ mother had called Monchi in the morning and asked him to calm down her son and – if possible – bring him back to the institution. When I asked Monchi what I had to expect, he smiled and replied: “You have to see it yourself, it is hard to describe”.

When we reached the kampung, the neighbours had already assembled. They whispered in each other’s ears, some pointed their fingers at us from afar. Right after we had parked the worn-out scooter in front of his family’s house, Kris turned the corner, returning from one of his strolls through the neighbourhood. He was sweating and breathing heavily. After he had hugged me intensely, he grabbed my hand and squeezed it firmly. Monchi intervened, smiling. “I told you,” he said. Kris stared at me with his eyes wide open. He seemed to look through instead of at me. His body moved in an awkward way, almost like a robot. There was nothing left of his smooth motion and wit.

“Hey, how are you?” he asked me. “I am fine. How are you?” I replied. Kris smiled, took a deep breath, before he literally spat out his breath again only a second later (he continued exhaling and spitting every 30 seconds during our two-hour visit). Then he looked at me again and said: “Mbah Maridjan, Chris John”, West Kalimantan tribe, South Sumatra, Central Java... Chris John!” – “Yes”, I replied startled. He kept repeating the chain of words over and over again. Monchi looked at me and smiled before he took Kris by his arm. They smiled at each other, Monchi tried not to avert his eyes from him: “Do you know who this is?” Kris looked at me for a few seconds, then smiled and said: “Thomas!” He hugged me again, and we walked into his house holding hands. Kris’ mother was waiting for us inside the house. His younger brother, who was only nine years old then, and his father also welcomed us, but apologised and left the room as soon as we sat down on the worn-out sofa, which was covered with old newspapers as cushions. His mother apologised that she could only offer us boiled warm water to drink, and not tea, coffee, or biscuits. She explained that since her son had returned home the whole family could not earn an income. They had to take care of Kris and keep him at a distance from the agitated and frightened neighbours.

Kris’ behaviour struck me as awkward in many ways. He had an incredible craving for water to satisfy his permanent thirst. When he started drinking,

---

7 Mbah Maridjan: famous spiritual ‘caretaker’ (juru kunci) of the Merapi volcano. Died in a pyroclastic flow during the volcano’s last major eruptions in October/November 2010. Chris John: Indonesian boxer (former WBA featherweight champion).

8 See Robert Lemelson’s film ethnographies (2010) on afflictions in Indonesia for substantial discussions on mental health, illness, caring and healing practices.
he almost finished a whole 1.5-liter bottle of water within only a few seconds, spilling half of it over his face. His eyes were always wide open, and he started to laugh out loud during a conversation that was not funny to others, just to perform Muslim praying rituals a moment later. He stood up from the sofa, crossed the empty room towards his chamber in robot-like movements and mumbled that he had to pray (harus sholat). After having entered the room, he came out again after only a few seconds, sat next to us, and repeated the words “Mbah Maridjan, Chris John, West Kalimantan tribe, South Sumatra, Central Java... Chris John”. After he drank another bottle of water, which his mother had already prepared, he sat down, stood up again, went to pray, came out of his room again. He never tired of it. After my initial irritation, his mother, Monchi and I started discussing what we could do to make him and his family feel better again. His mother was in favour of treatment by a local healer (dukun). In case this treatment would not help, she proposed to refer him back to the clinic. Ibu Wijila was a very polite, warm hearted and – inferring from her gaunt physical posture – hardworking woman. She seemed completely overwhelmed in regards to the ‘strange’ (aneh) behaviour of her eldest son. She didn’t use the word ‘gila’ (crazy) like his friends did.

She related that she felt deep malu (shame, embarrassment) facing the neighbours, but she, her husband, and their two other sons were afraid (takut) of Kris. Instead of locking him into his room again, as her husband advised her to do, Ibu Wijila ceased working as a hired labourer in the rice paddy and looked after her son 24 hours a day. After a few days, she began to feel tired (capek) and had surrendered (pasrah). With nobody else to turn to, she was seeking advice from Monchi and the komunitas Congklak, because she knew that they were Kris’ best friends.

“Sorry, sorry, Thomas!” (Maaf, maaf, Mas Thomas), she beseeched me not to get angry (jangan marah!) after Kris had spilled a whole bottle of water over his head, while holding my hand, and asking me whether we would finally go to Australia to get married there. I hoped he was making fun of me, as he used to, but after he addressed me as “Sandy”, I realised that he was not joking. “Ful eror” Monchi said and smiled. Sandy was an Australian social worker volunteering for the aforementioned NGO some years earlier. Kris hadn’t stopped talking about her after she had returned to Australia in 2004. Ibu Wijila threw her hands up against her head and started laughing. “God, I surrender,” (Ya allah, wis pasrah), she whispered before she burst into laughter and hugged me in tears – a gesture that would have been highly inappropriate in other circumstances. Monchi and I joined in her laughter, all three of us shaking our heads. Kris smiled to some invisible person, walked to his room and prayed again. We left after two hours.

After we returned to Congklak in late afternoon, Monchi called a community meeting (rapat). As a temporary community member (I was in-
Itiated myself in 2001 when I was asked to eat up a bowl of rotten fried chicken feet before walking the five kilometres from the intersection to a mall on Malioboro street barefoot, without money and water in the midday heat – a rather symbolic act when compared to the other’s initiation), I had participated in dozens of meetings that could extend over many hours and often transformed into nightly drinking feasts. But this meeting was over after not even half an hour. Everyone agreed that Kris needed to be cared for and hospitalised again as soon as possible, even if he had turned his back on the community a few months earlier. When we arrived at Kris’ house to pick him up the next morning, his mother felt relieved (lebih tenang), and agreed. On two motorbikes – one with Monchi and Kris, on the other Ibu Wijila and I – we drove to the Congklak junction, where eight other friends already waited in a hired minibus, pretending to go on a holiday trip to Mount Merapi. Because Kris was terrified of going back to the mental health institution, lying to him seemed the only way to get him on the bus, and hand him over to experienced doctors and psychiatrists again.

The anak Congklak neither mocked Kris nor pitied him. On the contrary, when we were on our way to the hospital, they cared for him with compassion: hugging him, stroking his hair, trying to involve him in conversation, and even laughing politely at his strange jokes. Only the young children, who had come in spite of the seniors trying to prohibit them, watched him from a distance and tried to avoid eye contact. When Kris saw the hospital from afar, he started panicking and raging. “Ngamuk!” the smaller ones shouted in panic. Kris refused to get out of the minibus, so he had to be carried by Ronggo, Monchi, and Irianto, while he kicked his arms and legs into the air and the bundle of their intertwined bodies. After we registered at the front desk and accompanied Kris to the emergency unit, a doctor put him back into the isolation cell with the assistance of two male nurses. The cell, which looked like a small cage from a zoo, was located inside a gloomy room next to a colossal wooden chair, where Kris was subjected to electroconvulsive therapy (ECT) the week before.

The journey back to Congklak in the minibus was far from depressing or sad. “You will be next! You will be next!” – “No, you will be next! You crazy man (orang gila)! I know, why you stayed in the bus all the time, because they would have kept you there straight away! You are all crazy!” they shouted at each other, laughing ecstatically. Instead of lamenting, worrying, and discussing Kris’ condition, the whole bus seemed to laugh off its disturbance collectively. When I asked Monchi after we had returned to Congklak why everyone was so jolly and not terrified (kagèt), he asked: “What else would you do? It’s better to joke and laugh instead of being depressed, right?”

---

9 ‘Ngamuk’ is often translated as ‘amok’, or described as a form of mental and social suffering (see Browne 2001 for a case study in a Javanese village).
udah, mau gimana lagi? Lebih baik ngawur daripada depresi, toh’).

When I asked him how he felt about the decision to bring Kris back to the hospital, he assured me that there was no other alternative. He reminded me that the community had been through very similar procedures with other friends before.

Two weeks later, Kris escaped from the hospital for the second time. He was treated with second-generation psychotics in relation to being diagnosed as ‘schizophrenic’, but he was far from recovered. Instead of admitting him into the mental health institution for the third time, the komunitas had opted to keep Kris at his family home, to support his mother financially and treat him with the assistance of a local traditional healer (dukun) and ‘therapy’ of voluntary construction work at the local mosque, which had been destroyed by the earthquake in May 2006. After some bureaucratic detours within the village, the local municipality, the PUSKESMAS (an acronym for Pusat Kesehatan Masyarakat; a governmental community health center), hospitals, and pharmacies, we received his prescribed medication for the following two months free of charge. Yet, the doctors were pessimistic concerning Kris’ full recovery outside regular psychiatric treatment.

Kris started to work at the local mosque under the supervision of the local kiai\textsuperscript{10} who was a dukun (traditional healer) at the same time. Every morning, he purified Kris with water from a holy well located next to the mosque. The dukun was very optimistic regarding Kris’ recovery, as the water had already saved national hero General Sudirman from dying of tuberculosis just before his attack on the Dutch colonial army in 1948, when Yogyakarta was still the capital of the newborn Indonesian nation. It seemed that both the medication and the supervision of the kiai contributed to the young man’s recovery. Although he appeared almost healthy, his movements and behaviour were still ‘strange’ at times. Besides contributing to communal neighbourhood work (gotong royong) at the mosque, Kris started to work at other, smaller construction sites in his kampung where he was accompanied by Harvey and alternating junior community members. He began contributing to the household income. After one month, in which his mother and Monchi, as head of the komunitas supervised his routine medication intake, the anak Congklak were confident about their friend’s recovery.

A few days later, I received an SMS text from Kris’ younger brother who had been taking him to his work at construction sites in the city as an assistant. He asked whether I could stop by for a visit, because the whole family was startled (kagèt) again. Kris had relapsed (kumat). When I arrived at their house together with Monchi, Kris’ mother was frantic with worry (khawatir) since her son hadn’t returned home for two days. Then, he

\textsuperscript{10} Kiai or kyai (Javan.): expert of Islam; also a leader of Islamic boarding schools (pesantren).
dropped by the house that morning and shouted at them and their neighbours. While screaming ‘nonsense’, Kris threatened to beat up his brother if he refused to give him money.

Kris had also stopped by at the Congklak hangout only a few hours before. He had asked his friends for cigarettes, and once he received one, he broke it and began laughing hysterically (histeris). He repeated this ‘joke’ in every encounter. Strangers who didn't know him became ‘angry’ (pada emosi) and started beating him up. After he deeply insulted his friends, who had rushed to his aid, he headed back towards his family home. They said that he was drunk (mabuk) and smelled of alcohol. In the evening, Monchi, 15-year old Rahman and I finally managed to find Kris near the Congklak junction. He was sleeping next to the river, where he had lived before their huts were burned down in 2005. After he sobered up, we discussed his options. Kris agreed that it was best if he went back to hospital until he felt better again.

He was released from the hospital one month later and the doctors attested his recovery. In the months after his release, Monchi, his mother and younger brother supervised Kris’ medication. He started working at construction sites again and busked at the intersection irregularly in order to save enough money to open a small shop where he and his brother sold mobile phone vouchers and second-hand mobile phones. Three years after what he himself referred to as ‘crazy times’ (zaman gila), Kris married a young woman from a neighbouring kampung and fathered two girls born in 2010 and 2011 respectively. The family live in his parents’ house, together with Kris’ mother, father and youngest brother Hari. Aged 35 years old at the time of writing this article, Kris continues working at construction sites as hired labourer. As a so-called ‘kuli’ (coolie), he also helps unload trucks and buses at the nearby bus terminal. When we last met in May 2015, he claimed that he had only relapsed twice since his ‘crazy days’. “Once, when I could not afford the medication, and once when I was too embarrassed (terlalu malu) to ask my friends at Congklak for help.” I asked him why he did not contact the NGOs that he was acquainted with, as we had initially agreed upon together with Monchi. “I feel embarrassed (malu) to ask for more support. They take care of the young ones, the children. I am too old.” He paused for a few seconds, sipped gently from his coffee and added in soft-spoken voice, “I am a good Muslim now. My wife and I attend the prayers at maghrib (around 6 pm) every day. The kiai takes care of us now.”

The stigma of ‘being crazy’, a ‘drop out’ and a ‘jalanan’ had clearly poured through Kris’ embodied experience and affected his family. But the care of Monchi and the Congklak community by organising his medical treatment, keeping Kris occupied, mediating paid work, and supporting his transition from the streets into the kampung also showed community solidarity, prolonged feelings of belonging and responsibility even after ‘exiting the streets’
The anak Congklak worked towards taking off affective, social and economic burdens from Kris, his family and his new neighbourhood despite their limited resources. The long-term perspective reveals that street-related children and young adults are not isolated communities of ‘social pariahs’. They comprise a history and biography that relates their identities, social and cultural practices to the wider local society. Street-relatedness is not a fixed entity or identity, but a social, cultural and biographic continuum in which children, adolescents or adults constantly oscillate between localities and communities in order to adapt to their particular and age-related motivations and aspirations of leading a better life.

Conclusion

This contribution started out with a description of the komunitas Congklak community followed by a focus on then 16-year old Kris’ integration into the community. It has underlined that accomplished integration and emerging feelings of belonging to the community were fundamental in establishing newcomers’ well-being and increasing their self-esteem. Being accepted as community member and feeling entitled to the social, economic and emotional resources of community protection, food sharing, collective hangouts, or shelter, countered stigma-related experiences of shame, inferiority and embarrassment.

At the same time, bearing in mind Kris’ episodes of mental affliction, this article illustrates that long-term physical and psychological endurance of stigmatising daily encounters, exposure to heat, rain, exhaust, poorly treated infected wounds, consumption of junk food, or various alcohol mélanges can socially and effectively scar street-related persons’ social and physical bodies even after they had exited the streets and engaged in ‘off-street’ careers. The article’s long-term perspective reminds the reader that – despite existing examples of successful street exits – structural forces that marginalise and stigmatise street-related children and youth can produce vulnerable social bodies in adulthood that can manifest in continued poverty circles, chronic illnesses and premature deaths (Stodulka 2016a, 2016b).

Beyond the actor-centered focus on street-related careers, the larger perspective reveals that former Congklak hangouts were turned into a shopping mall and a hotel in 2015. Even more, with the passing of the law on ‘beggars’, ‘vagrants’ and the ‘homeless’ (Perda Gepeng No.1/2014), which has been rigorously executed since 2015, street-related communities have become almost invisible to the public eye. They have been pushed into less visible urban niches and newly established ‘educational camps’ run by the local government (Stodulka 2017). Ongoing studies by fellow colleagues (Kellner 2018) reveal that spatial and social niches of street-related agency...
might have been narrowed down dramatically over the years, but the creativity and solidarity of street-related communities produce new forms of resistance and ‘blending in’ to the city’s marginal spaces in unexpected ways.

To conclude, I want to advocate research into the life courses of (former) street-related children – not only for the sake of scientific understanding, but as ethnographic and experience-based evidence that contributes to ethical and sustainable governmental and non-governmental policies and so-called ‘intervention strategies’. One way of doing this might be systematic research into the lives and careers of those socially and physiologically mature persons that were showered with NGO-support, scientific interest and societal moral panic when they were still perceived as ‘children’ that needed to be protected in face of exploitative family and social structures. Throughout the years, my street-related friends have shown me that an understanding of the imaginations, desires, practices and feelings of street-related children is only possible if we include those persons in our studies, who have grown out of societal and scientific focus as adults. If street-related children paid great attention to their seniors and followed their lives even after they had exited the streets either through direct observation or through word of mouth (which they did extensively in Yogyakarta), so why shouldn’t also anthropologists and policy-makers?

References


Browne, K., (2001), (Ng)amuk Revisited: Emotional Expression and Mental Illness in Central Java, Indonesia”, *Transcultural Psychiatry* 38, 2, pp. 147-165.


Guinness, P., (2009), *Kampung, Islam and state in urban Java*, Singapore, NUS Press and ASAA.

Hegarty, B., Thajib, F., (2016), A dispensable threat, *Inside Indonesia*, 124,


Lemelson, R., (2010), Afflictions: Culture and Mental Illness in Indonesia (six-part series of ethnographic films), DVD, colour, 182 minutes, DER.


Stodulka, T., (2015a), Emotion work, Ethnography and Survival Strategies on the
Streets of Yogyakarta, Medical Anthropology, 34, 1, pp. 84-97.
— (2015b), Spheres of Passion: fieldwork, ethnography and the researcher’s emotions, Curare - Journal for Medical Anthropology, 38, 1+2, pp.103-116.
Vignato, S., (2012), Devices of oblivion: how Islamic schools rescue ‘orphaned’ children from traumatic experiences in Aceh (Indonesia), South East Asia Research, 20, 2, pp. 239-261.