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towards an experiential analysis of shamanism

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There are numerous approaches to the study of shamanism.¹ Anthropologists, psychologists and religious historians have attributed to it a wide spectrum of cultural and psychological perspectives. In this paper, we concentrate upon the altered states of consciousness (ASC)² experienced by the shaman during ceremonial performances. In studying this phenomenon, certain experiential characteristics of the shaman's trance as they occur in 42 cultures (see Appendix) will be identified.³ The experiential characteristics delineated are often referred to in the literature: magical flight, possession, and the control, memory and cultural orientation of trance.

The anthropological and psychological study of shamanism is multifaceted. The anthropologists Metzger and Williams (1963) approached it by studying the "ethnosemantics," using indigenous cultural categories to determine the social role of Tenejapa shamans. Landy (1974) investigated the shaman's innovative social role as a "cultural broker" in situations of acculturation. Shweder (1972 [1958]) pointed up the unique cognitive capacities of Zinacanteco shamans as opposed to nonshamans, especially their abilities to "avoid bafflement and impose form on unstructured stimuli" (1972:412). Numerous other investigators have focused on the shaman's vision quest and its psychological meaning, often coming to antithetical conclusions. The initial crisis experience of the shaman has been likened to almost every psychopathology, including schizophrenia (Silverman 1967); and its final outcome, personality formation, has been called "a controlled hysterical dissociation" sup-

A comprehensive delineation of the ecstatic states of shamans is developed along the lines of cross-cultural psychiatry. Psychiatric concepts, such as dissociation, role playing and hypnosis, are integrated with the ethnographic literature on spirit possession, soul journey and other forms of shamanic ecstasy in order to shed light upon some old anthropological controversies regarding the psychopathology and authenticity of the shaman's trance. Forty-two cultures, from four different cultural areas, are compared in order to determine a set of experiential and psychological factors that collectively identify what is meant by shamanic ecstasy. Shamanic ecstasy is identified as a specific class of ASC involving: (a) voluntary control of entrance and duration of trance, (b) posttrance memory, and (c) transic communicative interplay with spectators. [shamanism, altered states of consciousness, spirit possession, ethnopsychiatry]

ported by the community which saves the individual from a "wildly disturbed schizophrenic state" (Wallace 1966:150). Devereux (1956:28-29; 1961:63-64) says "the shaman is mentally deranged," and that shamanism is a neurotic defense which never attains sublimation so that, sooner or later, the shaman will decompensate into a permanent pathological state. Conversely, some writers emphasize the therapeutic aspects of the shaman's initiatory process. Ackerknecht (1943:46) states that "shamanism is not a disease but being healed from disease." Similarly, Eliade (1964:27) writes "... the shaman is not only a sick man; he is above all a sick man who has been cured." Other investigators pursuing the same question have administered Rorschach tests (Boyer, Klopfer, Brawer, and Kawai 1964; Gillin 1948; Lantis 1960), Holtzman inkblot techniques (Fabrega and Silver 1970), and other psychiatric examinations (Sasaki 1969), all with equivocal results indicating that there is no reason to consider shamans, as a group, either "deranged" or "normal."

Our approach is somewhat different. Although concerned with the question of pathology, we spell out what kind of psychological phenomena the shaman exhibits, and refer to an alternative framework rather than the pathological one. Further, while we investigate the psychological and experiential aspects of shamanism and the shaman's ASC, no interpretation of this phenomenon according to any particular school of thought is attempted, although we need to use technical terminology common to the disciplines of psychology and psychiatry. Our thesis is that, in order to begin to understand shamanism, focus must be on its most salient facet: the experiential aspects of the shaman's ecstasy during ritual performance.

Almost every writer on the subject singles out ecstasy as the inescapable ingredient of shamanism. But the meaning ascribed to it is often diffuse and at times contradictory. Some authors have proposed that true shamanic ecstasy implies possession by spirits⁴ (Loeb 1929); others take an alternative view, believing that the true shaman experiences only magical flight⁵ (Eliade 1964; Heusch 1962). Lewis (1971:49) argues against interpreting shamanic ecstasy as being exclusive to either phenomenon. His definition includes both magical flight and spirit possession, and he notes that they can exist separately or coexist in various degrees (see also Reinhard 1976). In the 42 cultures surveyed, 18 reported spirit possession only, 10 magical flight only, 11 both; and in 3, neither concept was used to explain the shaman's trance.

An important psychological criterion for distinguishing shamanic ecstasy from other types of trance is the factor of *mastery* or *control*. In much of the literature, this is referred to as the critical difference between a shaman's trance and the ASC experienced by an individual who is victimized by his trance. The shaman's capacity to willfully induce and terminate ecstasy is what is meant by "control" in our sample. Oesterreich (1966) calls this capacity "voluntary" or "artificial"; Lewis (1971), "solicited"; Bourguignon (1968), "desired." Uncontrolled states are referred to as "spontaneous," "unsolicited" or "negative." While these authors are specifically concerned with spirit possession, Eliade (1964:27) has used the term "control" to describe the magical flight type of trance, and this may be contrasted to unsolicited soul loss. In all the cultures surveyed, the shaman's ecstasy experience was controlled.

Firth (1959:129-148; 1964), in accord with Shirokogoroff (1935:271), applies the term *shaman* only to those persons who enter into controlled trance and who manipulate spirits in socially recognized ways ("master of spirits"). Firth also uses spirit mastery to distinguish shamans from spirit mediums. Lewis (1971:92ff) suggests that these two categories are often linked and may represent stages in an ongoing process which culminates in shamanism, although this is not necessarily the case. The primary phase common to both shamanism and spirit mediumship is a spontaneous "initiatory possession" which is often interpreted as illness. The second phase consists of becoming a medium;

herein the possessions become volitional and practiced in community context. In the third phase, the medium becomes a full-fledged shaman if he gains the mastery of spirits who possess him. Experientially, however, as regards the elements of volition or control of trance, there is commonality between the ASCs of shamans and spirit mediums. Firth (1967a:198–199) writes that among mediums (like shamans):

... *control* is important ... for the mediumistic state must be able to be induced and not simply have to rely on spontaneous generation. Mediums must be able to go into trance when people are ill. ... Every spirit medium has some form of internal control by which he is enabled to return from his state of dissociation to his ordinary condition (emphasis in original).

The element of control is included in our sample, but the theoretical differences between shamans and spirit mediums are not introduced. What is important, for a psychological and experiential analysis of ecstatic states, is not the belief in spirit mastery but mastery of the trance.

There are some religious specialists who attain full control of their trances and use them in sociocultural context, but who do not associate their states with beliefs about spirits. For example, the Azande witch doctor induces trance through “violent ecstatic” dance, reports visions, slashes his tongue and chest with knives, and extracts objects from the bodies of patients. But his powers are thought to emanate from a “magic inside of him.” Illness, according to cultural belief, does not derive from a spirit but from witchcraft and sorcery, i.e., from other people. Therefore, combatting illness does not demand manipulation of other-worldly beings (Evans-Pritchard 1976:73, 87ff). Likewise, the !Kung Bushman medicine man derives his power from within himself during trance states, and not through the control and utilization of spirits (see Lee 1968). Thus, we use the term “shamanic ecstasy” in the generic sense, referring to controlled trances occurring in community context, regardless of whether the trancers themselves are called mediums, medicine men, or witch doctors.

There are a variety of techniques employed by shamans to induce trance, ranging from fasting and other deprivations to dancing and the use of percussion instruments (Needham 1967) like the drum which, when beaten at certain rapid rates, may result in trance (see Neher 1961, 1962). There are also “meditative”-type trances, like those employed by aboriginal shamans who sit or lie in quiet contemplative states when communicating with the supernatural and performing magical feats (Elkin 1977:56). Some of the earliest forms of shamanism, dating back to the paleolithic age, may have involved the ingestion of hallucinogenic substances (Wasson 1968; LaBarre 1972). The shamanistic use of drugs was common in Siberia (Jochelson 1908) and in both North and South America (Furst 1976).

Again, the common element in all of these accounts is that the shaman, no matter how the trance is interpreted (magical flight, spirit possession, or other) or how produced (drumming, drugs, etc.), remains in control of his ecstasy. It is this aspect of ecstasy which we wish to single out as our starting point for the further analysis of the shaman’s trance. In what follows, a new approach will be indicated for some of the problems encountered by those investigators who have described and analyzed the shaman’s trance, one which compares psychiatric concepts regarding ASCs with what the shamans themselves say about their trance experiences.

shamanism and role playing

There is considerable disagreement in the cross-cultural literature over whether or not the shaman’s trance is simulated. To cite just a few examples: Eliade (1964:199–200, 236), basing his conclusions on ethnographic reports, posits that shamanic trance, at least among the Siberian Yakut and Altaic, is of “slight intensity” or imitated. Metraux (1959) describes

Haitian voodoo trance ceremonies as theater, and Kiev (1961:136) interprets Haitian trance-possession as "culturally acceptable patterned role playing." Leiris (1958) emphasizes the dramatic play elements of possession trance in Ethiopian Zar cults. Referring to his Nepal fieldwork, Hitchcock (1976:168) maintains that, in his opinion, Magar shamans "did not enter an ASC during seances, at least no more than a good actor does when he takes a part." On the other hand, Bourguignon (1976), drawing from her Haitian material, observes that the depth of trance varied, and that she did not expect to find widespread simulation. In our fieldwork with the Helambu Sherpa and Tamang in Nepal, we questioned whether our informants actually saw visions or if their possessions were imitations. They denied simulation and, for the most part, their trances seemed authentic to us. Other observers said that some of the trances of the shamans they witnessed were genuine, and others were not (Nadel 1965 [1958]: 477; Shirokogoroff 1935:362). Nadel further reported seeing one trance which began as a simulation and ended as real.

It appears to us that much of this disagreement has resulted from the observers' differing opinions as to just what constitutes authentic trance. There are no formal guidelines; until there are, all designations are arbitrary and rest upon the observers' assumptions, not on the reports of entranced individuals. Now, some of this confusion may originate in the peculiar nature of the shaman's community-oriented trance. In 34 of the 42 societies surveyed, there was communication between the shaman and the audience during trance. For example, Harner (1973:23-25) reports that the Jívaro shaman, having visions under the influence of narcotics, sucks pathogenic "objects" from his patient's body and gives them to the patient, saying "Now I have sucked it out. Here it is." The Tungus shaman, while on magical flight to the upper and lower worlds, answers questions put to him by spectators and reports his perilous visionary journey (Shirokogoroff 1935:304ff). Further, the interaction between audience and shaman is so important to the shamans that they believe ecstasy will end if the audience ceases their singing and encouragement. Shirokogoroff (1935:363ff) describes this relationship as one of mutual excitement, with shaman and audience influencing the ecstasy of the other.

Of the 18 cultures with spirit possession only, 16 reported transic communicative interplay; it was reported in 5 of the 10 cultures with magical flight only. In the 11 cultures where magical flight and spirit possession coexist, 8 had communicative interplay during both trance experiences; the remaining 3 experienced it only during possession trance. In the 3 cultures where there is neither spirit possession nor magical flight, 2 had transic communication with spectators.

Thus, the evidence indicates that the ability to maintain contact with ritual participants and spectators is an important element of ecstasy. Unlike the goal of meditative trance, which is *samadhi*, enstasis (Eliade 1958), the shaman does not usually enter an invulnerable state in which his perception of the external world is absent. In other words, communication with, and awareness of, others is an aspect of the phenomenon under study.

Still, the question of what constitutes authentic trance is not resolved. As noted earlier, each case should be considered on its own merits, accompanied by thick description. An attempt to delineate the criteria is difficult, at this time, since there is as much dissension in psychology as there is in anthropology over what characterizes trance phenomena.

Certain psychologists have criticized the viability of equating hypnotic behavior with trance. Sarbin (1950) and Barber (1972) both label hypnosis as "role-playing" behavior, the latter saying that hypnosis is not intrinsically different than ordinary waking consciousness. Barber and DeMoor (1972) note that such supposed manifestations of hypnotic trance as limp appearance, immobility, passivity, transic "fixed stare," etc., are variables of the hypnotic induction procedure based on the demands of the situation and the subject's willingness to be motivated by the role.

One major argument against the role-playing theory is that phenomena produced under hypnosis are not ordinarily within the normal range of voluntary response. For example, it is hard to imagine a person undergoing surgery without anesthetic in the normal state, but this has occurred under hypnosis (Crasilneck and Hall 1975:24ff). Similarly, several of our Nepali informants were able to put their hands in boiling oil or run over live coals, comparable to the feats of shamans in some other cultures. Barber (1970:205ff) counters, saying that hypnosis relieves anxiety over, and memory of, pain when suggestions are given, but does not affect the actual pain itself. Many hypnotized patients undergoing surgery cry and moan and show signs of shock.

Until all the evidence is in, acceptance of any one of these contending theories is difficult. However, the role-playing models advanced by Sarbin (1954) and Shor (1962) present an interesting way to view trance phenomena. Sarbin charts role playing according to organismic intensity and involvement, distinguishing seven different levels. The most minimal involvement (level 1) is casual role playing; levels 2 and 3 are dramatic role enactment; level 4 is the role of the hypnotized subject; level 5 is hysterical fugue, the role of the amnesic; level 6 involves ecstatic states and includes mystical experiences, possession and religious conversions; and level 7 includes the most extreme example of role involvement: thanatomania. In the higher levels of role involvement, self and role are undifferentiated; on the lesser levels, role and self are differentiated. Sarbin (1954:235) writes: "Ecstasy, a condition usually involving suspension of voluntary action, illustrates organismic involvement to a degree which is not ordinarily observed in day-to-day social interaction." He includes in this category "... accounts of ecstatic trance experiences, possessions, religious revivals, conversion experiences, and mystical unions." Sarbin (1954:235) further adds: "What is common to these events is the intensity of involvement, the apparent relationship of this intensity to the activities of the sympathetico-adrenal system, and the autonomic equilibratory controls."

Shor (1962) also distinguishes between hypnotic role taking as such, and role-taking involvement. According to him, role taking is a conscious process and represents the subject's willingness to follow the hypnotist's suggestions. Role-taking involvement is the "extent to which the hypnotic role taking has sunk below the level of purely conscious compliance and volition and has become nonconsciously directive" (1962:28-29). Role-taking involvement obviously represents a high degree of self-immersion in the hypnotic experience.

We believe that shamanic ecstasy represents a similar type of active, imaginative involvement. The hypnotic situation differs from ecstasy, however, in that the ultrasuggestibility prevalent in the former is absent in the latter. The "rapport" between shaman and audience is typically one of mutual involvement and communicative interaction. As noted above, these factors are identified as essential ingredients of the shaman's trance.

Of course, it is impossible to take an absolute position regarding the authenticity of shamanic trance. It does seem likely, however, that numerous shamans attain a condition wherein they behave in ways atypical of normal, waking consciousness. Even if this behavior can be explained as role playing, there is a point when role playing becomes intense involvement. At least levels 6 and 7 of Sarbin's (1954) schema—the ecstatic experience and thanatomania, respectively—seem to be beyond the range of role playing, if this implies conscious simulation.

Whatever the label given to hypnotic and other trance phenomena, the various findings from their study are relevant to our concern. In this paper, we intend to avoid the semantic and definitional problem, and concentrate on the shaman's trance along the lines Diamond (1974) suggests for the study of hypnosis: that is, by viewing it as an identifiable domain of behavior, and as a distinctive class of behavior, not an explanation for behavior. Thus far,

we have maintained that, ideally, the shaman's ecstasy is controlled role involvement with intense organismic participation and communicative rapport.

dissociation and shamanism

Shamanic ecstasy, like all trance phenomena, is defined as a dissociative condition. For example, the *Penguin Dictionary of Psychology* (1961:297) defines trance as "a condition of dissociation marked by lack of voluntary movement, and frequently by automatisms in act and thought, illustrated by hypnotic and mediumistic conditions." A review of some of the psychiatric literature is required because there is debate over what the term *dissociation* describes, and how it can be applied to ecstasy.

Psychoanalysis, which has a long and influential link to psychological anthropology, views dissociation as the result of repression and defense, and is thus pathological. The original meaning of the term also derives from pathology, coming from Janet's (1907) study of hysteria and multiple personality. Basically, Janet viewed dissociation as the converse of the then-prevalent theory of association. That is, if memories are brought to consciousness via association, then those memories not available to association must be dissociated. Further, these thoughts, now split off from consciousness, tend to form integrated subsystems, or even secondary personalities.

Shamanic spirit possession has often been thought to be a form of mental pathology, and it is commonly thought to be a dissociative reaction. The symptoms of shaking seizures, distorted physiognomy, speaking in an unknown language, etc., are too close to the classic hysteria described by Charcot (1889) and Janet (1907), and psychoanalyzed by Freud, to miss the eye of numerous investigators of shamanism.

More recently, in the anthropological and psychological literature, the pathological bias towards dissociation has been lifted. For example, West (1967:890) writes that dissociation is not necessarily to be considered psychopathological. Going further, Bourguignon (1965) emphasizes the healing aspects of dissociation. From her observations of Haitian possession phenomena, she writes of "dissociation in the service of the self" (1965:55). It is likened to Kris' (1952:60) formulation of "regression in the service of the ego," i.e., a regressive experience which then leads to artistic inspiration and creative integration. In Haiti, according to Bourguignon (1965), the spirits (i.e., possessed individuals) have a creative and innovative influence on voodoo religion, where possession dissociation can be an "enlarging of the field of action of the self" (1965:55). It can be cathartic and thus give relief and expression to repressed thoughts, feelings and desires, as well as provide alternative roles which satisfy individual needs.

While the bias has lifted in some quarters, and dissociation is seen as both potentially pathological and beneficial, just what type of behavior dissociation implies is obscure. Some observers of the Haitian scene, like Metraux (1957:31; 1959) and Kiev (1961:135-137), deny that some voodoo priests really become dissociated and that their behavior is simulated. Important to both their arguments is the question of amnesia as a defining attribute of dissociation. Dissociation, and therefore authentic possession, is denied, basically because the investigators believe that the priests generally know what occurs during their performances. In light of Janet's (1907) definition and the Freudian concept of repression, this seems perfectly reasonable.

However, as Oesterreich (1966) points out, possession states may be either somnambulistic or lucid. In the first of these forms there is no memory, upon awakening, of what took place during the trance. In lucid possession there is consciousness of the possessed state and memory of it afterwards. As Oesterreich (1966:49-50) notes, even Jeanne des

Anges, the demonically possessed nun at Lourdes, was lucid during her possessed states and remembered them afterwards. This view, that amnesia and possession dissociation are not necessarily connected, has been substantiated by E. R. Hilgard (1978) who, in his "neodissociation theory," says that possession represents a special type of dissociation in which "amnesias are not essential" (1978:18). He emphasizes that repression and dissociation are not interchangeable terms, and that dissociation can occur when there is no repression. Possession is considered to be dissociative because there exists a split in the personality system allowing for alternating personalities.

Prince (in press) has drawn the distinction between ecstasy (shamanic magical flight) and spirit possession in this way: Basically, spirit possession involves a "loss of memory" and is, therefore, a dissociated state, whereas magical flight is not. But this distinction, as Prince himself mentions, is less than precise. As can be seen in the tables, there is memory of trance in a large majority of cases of shamanic spirit possession. This was the case in 20 of the 29 cultures in the sample where spirit possession was reported. In the 18 cultures where spirit possession occurs with no magical flight complex, half (9) reported that their states are nonamnesiac. In 11 cultures where magical flight and spirit possession are both manifest, memory is reported in both states; and it also occurs in the 3 cultures where neither complex is noted. If we consider that the 42 cultures are a typical sample, it is specious to distinguish magical flight from spirit possession along the lines of the older dissociation theory. As mentioned above, according to the neodissociation theory, spirit possession need not be amnesiac.

Some of the nine counterexamples, where amnesia is reported for spirit possession, may well have been facilitated by cultural factors. Among the Bunyoro (Beattie 1969:166-167) and the Haitians (Metraux 1957:131), two of the counterexamples, emic theory states that authentic possession is accompanied by forgetting; if it is remembered, the natives consider the trances inauthentic. Even so, Metraux (1957) heard subjects speak of trance events of which they could not possibly have been aware unless they had been conscious. Beattie (1969) mentions an interview with an ex-medium and healer who admitted she was conscious of what she did during trance, but had not claimed to be so during her cult membership. Among the Mandari, a third counterexample, there is no memory of possession seances, yet there is memory of one's "calling"—which is the beginning of spirit possession and mediumship (Buxton 1973:282). Among the Nuba (Nadel 1965:470), the Hausa (Tremearne 1919:250-260), and the Veddas (Seligmann and Seligmann 1911:133-136), there seems to be a relative memory, at least to the extent that the individual remembers being possessed and that certain things were said, although there is not a complete memory of what transpired.

Thus, while the evidence is not all in, we believe that spirit possession trance is guided by the demands of the situation (i.e., cultural beliefs about trance states). These various cultural beliefs function somewhat analogously to the assumptions of, and the suggestions given to, hypnotic subjects. In fact, there seem to be some analogies between hypnotic amnesia and possession trance amnesia. There does not appear to be anything inherent in possession states which would inhibit memory. Similarly, posthypnotic amnesia is generally not spontaneous, i.e., occurring without suggestion, and there is no correlation between depth of hypnosis and amnesia. In a study designed to measure posthypnotic amnesia, Hilgard and Cooper (1965) report that five times as many subjects manifested posthypnotic amnesia as a result of hypnotic suggestion than experienced such amnesia spontaneously (7 percent). Further, the latter may have been influenced by expectation of hypnotic amnesia. Why, therefore, should we assume *ipso facto* that amnesia is a requisite for authentic possession trance? We believe that cultural ideas influence trance states in a manner similar to hypnotic suggestion and expectation. Bourguignon (1973:12) writes:

It must be stressed that although the capacity to experience ASC is a psychobiological capacity of the species, and thus universal, its utilization, institutionalization, and patterning are, indeed, features of culture, and thus variable.

Our Nepali shamans said that they were conscious of their experiences and seemed to have complete recall of their possession experiences. They reported being fully conscious of what the gods or ancestors spoke through them. Bhirendra, the Tamang shaman, described himself as an onlooker—standing back, so to speak, watching himself perform—and therefore somewhat removed from his trance activities. Parko, the Sherpa shaman, described his consciousness as “staying in the heart” while the gods spoke through him. An incident occurred with this shaman that is worth recording, as it illustrates the normative principle of memory. While drunk, Parko had a fight with an older man and got the worst of the encounter, suffering a head wound. Reaction to the fight developed in the village, and Parko became the brunt of derogatory gossip. At a subsequent ritual, when Parko was making a diagnosis of his patient’s problem, his guardian spirit—one of his ancestors—spoke through him to the audience. The homily consisted of accusing Parko of a way of life that had to be changed if Parko was not to suffer early death. The ancestor spirit chastised Parko over the fight, and told the listening audience that Parko would have to mend his ways. Now, it had been the habit to record and play back Parko’s ritual singing and orations. When he heard this particular tape, he expressed shock and dismay, holding his head in horror at the words of his guardian spirit. Questioning him, it was obvious that what had been said in trance was revelational to him. He had never expressed such an attitude when listening to earlier tapes, and one has to assume that he had complete amnesia of what he had said in this particular case. The amnesia could reasonably be referred to the fight, and the subsequent shame and overall emotional turmoil experienced by Parko; but the exceptional nature of the amnesia points up the normative nature of memory for trance events. It further indicates that it is possible, because of emotional stress, to regress to a state atypical of shamanic ecstasy.⁶

If these accounts are compared to certain general findings about the hypnotic state, there emerges another confirmation to our hypothesis that a recall of trance states in shamans is to be expected unless culturally mitigated or provoked by critical psychological situations. Schilder and Kaunders (1956) make reference to a relationship in hypnosis that exists between two portions of the personality. The first portion remains in suggestive rapport with the hypnotist; the second portion, what they call the “ego-ideal,” is never hypnotized. During the hypnotic state, it assumes the role of an observer, monitoring and controlling the hypnotized portion. Schilder and Kaunders (1956:76) define the depth of trance according to the extent to which the un hypnotized portion freely partakes with the hypnotized portion. But even in the most profound hypnosis, the observing ego never relinquishes its monitoring function (cf. Hilgard’s 1978 concept of the “hidden observer”). We believe this monitoring function is responsible for the shaman’s transic memory.

It has been shown that shamanic spirit possession, contrary to the assertions of numerous investigators, does not necessarily (and, indeed, usually does not) involve loss of memory or the production of pathology. Dissociation may well be in the “service of the self” and provide alternative roles to creatively expand the field of the self.

The trance that occurs in magical flight, on the other hand, has not met with the same benign interpretation. This may be because of the visual hallucinatory element in these experiences which so readily may, but too easily can, lead to an interpretation of schizophrenia or some other form of a more serious disorder. For example, loss of soul, which is the Yakut shaman’s first initiatory experience, has been interpreted as a more serious illness than his initial spirit possession; it is characterized as a chronic and stable melancholia which may lead to suicide (Lot-Falck 1970).

However, as far as the ceremonial aspects of shamanic ecstasy are concerned, it is only the resolution of this disorder which is important. As we noted, shamanic resolution results in mastery of the trance state. Ideally, the shaman does not slip in and out of ASC unpredictably; his "soul loss" is controlled and ritualized. What was once a spontaneous crisis is now a controlled ecstasy in which he has mastered the techniques and learned the parameters of celestial space. Yet magical flight is not only descriptive of the shaman's controlled soul journey; it is a psychotherapeutic device. Its practice and mastery may well be the means by which the shaman comes to "master himself," i.e., become cured. As a psychological technique, magical flight is very similar to such therapeutic methods as Jung's (1958) "active imagination," Desoille's (1966) "directed daydreams," Leuner's (1969) "guided affective imagery," as well as to a group of other therapies which make use of the patient's capacity to visually imagine (for a review of the literature, see Singer 1974).

Mary Watkins (1976) calls these therapeutic techniques "waking dreams" because they all make use of the ego to record and observe the imaginal process. Therapeutic effectiveness is, of course, attributed to different factors by different psychological theories. Desoille (1966:30) believes that the waking dream allows the patient to experience the collective background of his personal conflicts and finally to actively participate in the fantasy images, to control them and thereby change "maladaptive" patterns into more "appropriate patterns." Leuner (1969) guides his patients' imaginations into certain set scenes like "a meadow" or "under water," then he lets the imagination freely develop. He interferes only to help the individual recognize and talk to the figures that emerge. Leuner (1969) believes that one can note the gradual progress in therapy by the increased frequency of positive images over negative ones which the patient gradually must learn to "confront." "Psychoanalytically speaking," he writes, "the end result of successful confrontation is a strengthening of the ego" (Leuner 1969:20). As Watkins (1976:36-37) notes, these therapies are developments of Janet's early therapeutic attempts with hysterics, in which he would enter into his patient's imagery after they were hypnotized, and help them by influencing and changing the basic pathological structure of the fantasy experience.

The techniques for producing waking dreams in psychotherapy are usually different than those occurring in shamanism. Rather than the relaxing hypnotic techniques employed by psychotherapists, the shaman may produce these states through drugs, dancing, drumming, or by other means. In these imaginal states, the shaman on magical flight will confront and interact with a host of demons and gods; like the daydreamer, he is conscious of his visions and able to remember them. This is the case in all 21 of the cultures from our sample in which magical flight occurs. Let us cite two examples. In New Guinea, the Sambia shamans dispatch their familiar spirits to the other worlds in search of patients' lost souls. In their visions, the shamans report to the spectators their imaginal adventures and the narrow escapes of their familiar spirits, even while acting them out. At the end of the trance state, the shamans give fuller narratives of their experiences (Herdt 1979:51). When the Iglulik Eskimo shaman returns from the underworld, or from the land of the dead, he relates his experience to his audience. He tells them how he confronted the Mistress of Beasts, how he stroked her hair and narrowly escaped from her father—who thought he was a dead person come to expiate for his sins—by crying out, "I am flesh and blood!" (Rasmussen 1929:123-131)

Probably the most salient difference between waking dream therapies and shamanic magical flight is the interpretation given to the imaginal processes. Whereas Western psychiatry explains the visions as symbolic of internal processes, the shaman sees them as objective events. However, this does not imply a cognitive distortion or the inability to distinguish fantasy events from waking events (as occurs in delusions). Myerhoff (1976:102) writes, "The shaman's journey is in three phases. The shaman sets forth from the realm of

the mundane; he then journeys to the supernatural and returns." In other words, the shaman's trance is only a temporary reduction of reality testing; it is therefore not any more pathological than the many types of psychotherapy that make use of techniques designed to temporarily reduce reality testing, i.e., hypnosis and guided daydreaming.

The shaman approaches his inner image in a way not much different from what Jung (1953:185) considered the appropriate attitude towards inner processes in active imagination. That is to say, as von Franz (1976) illustrates, the inner images and events must be met with the attitude of "as-if-they-were-real." A threatening tiger image is responded to by real fright, not as if it were a projected image on a screen. Similarly, a message conveyed by a figure is fully experienced, not dismissed as an illusion. The shaman's trance experiences are seen as "objective," with values and ways of knowing different from, but no less valid than, waking experiences. The shaman's relationships with his images yield knowledge from which to proceed (Jung 1961:170-171). In fact, this process of recognition of, and participation with, the inner images leads to what Jung (1958) called the "transcendent function," a uniting of conscious and unconscious ways of knowing that leads to self-actualization or "individuation," the goal of his type of psychotherapy.

Admittedly, the precise parallels between waking dreams and magical flight need to be worked out more completely. Our purpose here is to discuss their similarities and propose a possible new approach to shamanic ecstasy and the issue of shamanic pathology. From what has already been set forth, it appears obvious to us that the typical types of ecstasy—magical flight and possession—have therapeutic potentials. There are broad similarities between magical flight and waking dream therapies. This has also been suggested by Eliade (1960:117) and by Greenleaf (1978:183), a Jungian clinician. There also exists therapeutic potential in states of spirit possession. The "dissociation in the service of the self," discussed earlier, may be induced by certain therapeutic acting-out maneuvers similar to those found in psychodrama (Moreno 1947) and in Perls' (1969) Gestalt therapy.

Further, magical flight and spirit possession are not dissociative states, if by that is implied amnesia for the trance performance. Indeed, as our sample indicates, there *is* memory in the great majority of cases. The shaman mediates between the two worlds of men and gods. If he does not remember his experiences, i.e., if the belief system mitigates against such memory, there must be some other recognized means to translate the ASC into cultural terms. In fact, the cultural context of the shaman's trance is a very decisive element; it is impossible to abstract the shaman's trance from the cultural milieu. His mystical journeys and alternative personalities are not idiosyncratic; they do not isolate him from the community. The spirits who possess him, and the worlds to which he travels, are recognized by the community and are part and parcel of the belief system. It is at this juncture that the symbolic system is crucial, for the symbols that are brought forth in the shaman's journey must be both transformative for the shaman and empathic for his audience. The practicing shaman must adapt himself to the role expectations of the community. It is not enough that he has visions and enters into a controlled possession trance; he must give form to these states so they will serve the community. Indeed, this cultural embedding of the ASC may, in itself, be an important means of discriminating pathological states from shamanism. In reference to possession trance and its distinction from the type of dissociation found in multiple personality, Bourguignon (1976:38) writes:

The great difference between such a patient and the characteristic Haitian cult initiate (or for that matter, a possession trancer in any of our 251 sample societies and many others as well) is that these (the multiple personality) dissociations are purely idiosyncratic; the behavior is not learned by following a cultural model. No one has attempted to teach dissociation to Sybil; to her associates it can only seem weird and bizarre and not the ordinary behavior of familiar and recognizable spirit entities. In Haiti, dissociation into diverse (spirit) personalities fits in with the understanding people have of the universe, of gods and human nature.

Silverman (1967) and Wallace (1966), among others, also point up the cultural acceptance and validating labels for the shamanic experience, as opposed to a pathological experience. Nevertheless, the question of whether or not the shaman is pathological is not simple. It may well be that the particular experiences a shaman undergoes include some that, by Western standards, are associated with neurosis or psychosis. It is at this point that interpretations differ. There is much data available on shamans with stable and strong personalities who manifest no evidence of distorted episodes or deviance (Handelman 1967; M. K. Opler 1959; Nadel 1965). There is also evidence to suggest the opposite. Firth (1967b:295) reports that the medium for the principal Tikopian god had "periodic fits of craziness," and would at times "rush shrieking into the lake." But "even when mad he would, on the appropriate ritual occasions, enter into trance and behave in an organized manner. His psychic controls were evidently strong enough so that the social call of duty restored him to some equilibrium, from which he relapsed again after the rite was over" (Firth 1967b:295). Thus, there is no unequivocal answer; shamans as a group cannot be considered of one personality type any more than can the members of other social or cultural groups.

Our position here is not to adjudicate on whether none or all shamans are pathological, but to propose that their trance states during ritual performances are not in themselves pathological. Indeed, they are similar to certain psychotherapeutic techniques.

summary

Our primary concern has been to describe ecstasy from the perspective of its most salient experiential aspects cross-culturally. We have enumerated several facets of possession trance, the most universal being control. We suggested that although the shaman's trance might manifest indications of dissociation, it was generally a dissociation without amnesia. Further, the communicative interplay between trancer and audience was established as another common feature. The theatrical quality of this rapport—what psychologists might call "acting out"—keeps the ecstasy, which by itself could lead to uncontrolled frenzy, within cultural limits. We also examined the charge that the shaman's trance is simulated, nothing more than role playing, suggesting that such role playing can involve intense organismic participation.

A few examples from our own experiences with shamans in central Nepal have been presented to illustrate specific points. The body of the article, however, refers to ecstasy in general—as it has been documented by scholars with a wide spectrum of opinions, and is applicable to this study. We recognize an ambiguity in the literature regarding the nature of shamanism. Our essay has been directed towards a focused delineation of the experiential aspects of shamanic ecstasy. In so doing, we have proposed an experiential model which emphasizes the three points mentioned here: (1) voluntary entrance into, and control of, the duration of the trance, (2) memory of the dissociated state, and (3) communicative interplay with spectators.

notes

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¹ The term *shaman* comes to us through the Russian, derived from the Tungus term *šaman*, meaning "one who is excited, moved, raised." It is descriptive of the shaman's most basic attribute: shaking (ecstasy) (Casanowicz 1924:419). Concerning the ultimate derivation of the term, Professor Sir Harold Bailey (see Blacker 1975:317-318, n. 4) says:

From the Vedic *śram*, meaning "to heat oneself or practice austerities," we get *śramanā*, one who practices austerities, an ascetic. The word made its way into central Asia from India through the northwest Prakrit used in the Shan-shan Kingdom about 300 A.D. as an administrative language, as *śamana*. Thence it may be traced through the Khotanese Saka *ssamama*, the Tokharian dialect-A *šāman*, the Sogdian *šmny*, and other forms in Uigur Turkish, Asokan Greek and new Persian, until it reached China as *sha-men*. Thence it made its way to Japan as *shamon*.

Mironov and Shirokogoroff (1924) argue that the word is foreign to Siberia, and that shamanism, its most basic attribute being spirit possession, made its way to north Asia via the dissemination of Lamaistic and Tantric Buddhism.

² Altered states of consciousness are defined by Ludwig (1969:9) as

... any mental state(s), induced by various physiological, psychological, or pharmacological maneuvers or agents, which can be recognized subjectively by the individual himself (or by an objective observer of the individual) as representing a sufficient deviation in subjective experience or psychological functioning from certain general norms for that individual during alert, waking consciousness. This sufficient deviation may be represented by a greater preoccupation than usual with internal sensations or mental processes, changes in formal characteristics in thought, and impairment of reality testing to various degrees.

In this paper, ecstasy refers to the religiously toned ASC specific to shamanism.

³ We began this research with the opinion that shamanism was not an inherently north Asian phenomenon, but much more widespread. The tables reflect 42 cultures, chosen randomly from 4 somewhat arbitrarily designated culture areas. The data on the 2 Nepalese culture groups, the Helambu Sherpa and the Tamang, derive from our fieldwork with these groups (see Acknowledgments). The research was designed to find sufficient descriptions in the literature of the shaman's seance for an experiential comparison. In some of our culture areas, there were not ten examples of trance performances given the label of shamanism. This was especially the case in Africa. In these culture areas, we chose from other descriptive labels, being careful to choose only those which seemed psychologically similar to the descriptions of the other investigators who used the term *shaman*. We attempted to be as broad as possible in our assumptions, using as our only defining attribute that the specialist enter into a controlled ASC on behalf of his community. This is consistent with the remainder of our sample because we found this element to be common to every culture where the term *shaman* was employed by the ethnographer.

⁴ Crapanzano (1977:7) defines spirit possession as "any altered state of consciousness indigenously interpreted in terms of the influence of an alien spirit."

⁵ After Eliade (1964), we employ the term *magical flight* to connote an ASC interpreted as "soul journey" to heaven, other worlds, underground, or horizontally (to places in this world). An important variant of the soul journey is the sending of a familiar or tutelary spirit on the journey. Both types are psychologically similar in that they involve the "seeing of visions."

⁶ See Pressel (1977) for an account of an experienced medium who regressed to an uncontrolled and involuntary trance due to disturbing circumstances.

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appendix

Table 1. North and South America.

Group/ethnic designation	Trance only	Possession trance	Magical flight	Control of trance	Amnesia	Memory	Transic Communication interplay
HUICHOL shaman			Myerhoff (1974:94)	Myerhoff (1974:94-95)		Myerhoff (1974:164-166)	
PERU shaman			Sharon (1972:130)	Sharon (1972:132-133)		Sharon (1972:130-131)	Sharon (1972:128)
AKAWAIO shaman		Butt, Wavell, Epton (1966: 47, 157)	Butt et al. (1966:58)	Butt et al. (1966:95, 151ff)		Butt et al. (1966:48, 151ff)	Butt et al. (1966:60, 87)
WAROU shaman			Wilbert (1972:57)	Wilbert (1972:61)		Wilbert (1972:58)	Wilbert (1972:72)
JIVARO shaman			Harner (1973:17)	Harner (1973:56)		Harner (1973:15)	Harner (1973:23-25)
PAVIOTSO shaman			Park (1938:41)	Park (1938:50)		Park (1938:50)	
ACHOMAWI shaman		DeAngulo (1928:567-568)		DeAngulo (1928:570)		DeAngulo (1928:567, 575-577)	
NAVAJO hand trembler	Leighton (1949:20)			Leighton (1949:20)		Leighton (1949:20)	
ESKIMO (Alaska) shaman		Murphy (1964:62)	Murphy (1964:62)	Murphy (1964:62)		Murphy (1964:62)	Murphy (1964:62) ^a
IGLULIK shaman			Rasmussen (1929:123ff)	Rasmussen (1929:123ff)		Rasmussen (1929:123)	
CHIRACAHUA shaman	M. E. Opler (1947:1ff)			M. E. Opler (1947:13)		M. E. Opler (1947:9)	M. E. Opler (1947:9)
APACHE shaman							

^a Only during possession trance.

Table 2. Africa and Caribbean.

Group/etic designation	Trance only	Possession trance	Magical flight	Control of trance	Amnesia	Memory	Transic Communication interplay
ALUR		Southall (1969:248)		Southall (1969:248)		Southall (1969:248)	Southall (1969:243, 248)
medium diviner							
HAUSA (Bori cult)		Tremearne (1919:259-260)		Tremearne (1919:259-260)			Tremearne (1919:259-260)
medium dancer							
AMHARA (Zar cult)		Messing (1958:1123)		Young (1975:573)		Messing (1958:1124)	Messing (1958:1123)
shaman		Young (1975:573)					
NUBA		Nadel (1965:465)		Nadel (1965:465)			Nadel (1965:465, 476)
shaman							
AZANDE	Evans-Pritchard (1976:73)			Evans-Pritchard (1976:73)		Evans-Pritchard (1976:89)	Evans-Pritchard (1976:76)
witch doctor				Katz (1973:141)		Lee (1968:43)	Lee (1968:40ff)
BUSHMEN			Bieseke (1979:54ff)	Field (1961:101ff)			Field (1961:99, 105-106)
medicine man		Field (1961:99)					
GA							
medium priest							
MANDARI		Buxton (1973:296)		Buxton (1973:277)		Buxton (1973:300)	Buxton (1973:300)
doctor		Beattie (1969:159ff)		Beattie (1969:164, 169)		Beattie (1969:166)	Beattie (1969:163)
BUNYORO		Metraux (1957:22)		Metraux (1957:24)		Metraux (1957:21)	Metraux (1957:23)
spirit medium							
HAITI							
voodoo priest							

Table 3. North and South Asia and the Far East.

Group/ethnic designation	Trance only	Possession trance	Magical flight	Control of trance	Amnesia	Memory	Transic Communication interplay
TAMANG shaman		X	X	X		X	X
HELAMBU							
SHERPA shaman		X		X		X	X
CHUKCHEE shaman		Bogoras (1972:384)	Bogoras (1972:386)	Bogoras (1972:384)		Bogoras (1972:384-387)	Bogoras (1972:384-387) ^a
ALTAIC shaman		Eliade (1964:199) ^b	Eliade (1964:192)	Eliade (1964:191-192)		Eliade (1964:199, 201, 209-210)	Eliade (1964:191-199)
YAKUT shaman		Eliade (1964:229, 236)	Eliade (1964:229)	Eliade (1964:230)		Eliade (1964:228-236)	Eliade (1964:230-231)
TUNGUS shaman		Shirokogoroff (1935:271-276)	Shirokogoroff (1935:307)	Shirokogoroff (1935:271)		Shirokogoroff (1935:306-313)	Shirokogoroff (1935:304ff, 363)
EVENKS shaman		Anisimov (1963:97, 101)	Anisimov (1963:103)	Anisimov (1963:87)		Anisimov (1964:236)	Anisimov (1963:102-103) ^c
PAHARI shaman		Berreman (1972:89)	Berreman (1972:90)	Berreman (1972:89)		Berreman (1972:59)	Berreman (1972:89)
SENAPUR shaman		M. E. Opler (1958:553)	M. E. Opler (1958:554)	M. E. Opler (1957:269)		?	M. E. Opler (1958:565)
MYSORE shaman		Harper (1957:268)		Harper (1957:269)	Harper (1957:285ff)		Harper (1957:274ff)
JAPAN shaman		Blacker (1975:238)	d	Blacker (1975:173-178)		Blacker (1975:238-244)	

^a Only during possession trance.^b The shaman "imitates" the god's voice.^c In communication with assistants only during magical flight.^d Evidence of magical flight is in the ancient literature and myth.

Table 4. Southeast Asia/Oceania.

Groupletic designation	Trance only	Possession trance	Magical flight	Control of trance	Amnesia	Memory	Transic Communication interplay
TIKOPIA spirit medium		Firth (1967b:293)		Firth (1967b:298, 306)		Firth (1967b:311, 316)	Firth (1967b:310)
AUSTRALIA ^a medicine man			Elkin (1977:143)	Elkin (1977:39-57, 143)		Elkin (1977:143-144, 40)	Elkin (1977:40)
BATAK shaman		Oesterreich (1966:267ff)		Warneck (1909:101) ^b		Oesterreich (1966:271-272)	Warneck (1909:101)
SEA DYAK shaman			Roth (1896, I:265ff)	Roth (1896, I:265ff)		Roth (1896, I:265)	
SEMANG medicine man		Evans (1930:116)		Evans (1930:119)		Freeman (1966:316)	Evans (1930:119)
MENTAWEI seer			Loeb (1929:78)	Loeb (1929:71ff)		Evans (1930:118)	
SAMBIA shaman		Herd (1979:43, 51)	Herd (1979:43, 51)	Herd (1979:48)		Loeb (1929:78)	Herd (1979:43, 50-51)
VEDDES shaman		Seligmann (1911:129)		Seligmann (1911:211ff)	Seligmann (1911:133-136)		Seligmann (1911:133)
NIUE shaman		Loeb (1924:394)	Loeb (1924:397)	Loeb (1924:399)		Loeb (1924:397-399)	Loeb (1924:397) ^c
BURMA shaman		Spiro (1967:151)		Spiro (1967:159)		Spiro (1967:206-207)	Spiro (1967:207)

^a Not restricted to one tribe; information comes from Elkin's (1977) general discussion of Australian medicine men and their trances.

^b Shaman may also become nonvoluntarily possessed outside of ritual context (see Oesterreich 1966:272; Eliade 1964:347).

^c Only during possession trance.

Table 5. Elements of shamanic ecstasy found in 42 cultures:
distributed by ethnographic region (summary of tables 1-4).

Type of trance:	N. & S. America (Table 1)		Africa & Caribbean (Table 2)		N. & S. Asia and Far East (Table 3)		SE. Asia/ Oceania (Table 4)		Total (All Tables)	
	#	%	#	%	#	%	#	%	#	%
Magical flight only	6	55	1	10	0	0	3	30	10	24
Possession trance only	1	9	8	80	4	36	5	50	18	43
Magical flight and posses- sion trance	2	18	0	0	7	64	2	20	11	26
Trance only (neither magi- cal flight nor possession trance)	2	18	1	10	0	0	0	0	3	7
Total	11	100	10	100	11	100	10	100	42	100
Experiential as- pects of trance:										
Control of trance	11	100	10	100	11	100	10	100	42	100
Memory (also see p. 403 in text)	11	100	4	40	9	82	9	90	33	79
Transic com- munication interplay (also see p. 400)	6	55	10	100	10	91	8	80	34	81