

POSSESSION: INTERDISCIPLINARY ROOTS

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ABSTRACT

Possession states have a remarkably broad transcultural distribution, and mirror the influence of a range of social variables. Encompassing a variety of individual patterns, as a class they virtually confound attempts at "reduction" to pathological conditions or forms of dissociation like multiple personality disorder. Paradoxes exist in both the naturalistic and supernaturalistic approaches to possession. Commentators in both traditions may misconceive the nature of the connection between explanatory schema and treatment packages, while contemporary exorcists may underestimate trends of skepticism about their practices evident in honored theological traditions. Exorcisms are not precluded on "scientific" grounds. Treatment strategies for culture-bound syndromes may have to accommodate to the meanings those who experience them attribute to their plights.

INTRODUCTION

Sciences, whether fledgling or advanced, strive to extend their purview through concepts unifying diverse aspects of reality. The bent is viewed as salutary when it establishes commonalities underlying otherwise disparate phenomena. When it denudes cherished beliefs of their time-honored meanings, it may be perceived as merciless reductionism. One offshoot of the drive is the theory that spirit possession is a form of dissociation, probably multiple personality disorder (MPD). Parallels between the two are unmistakable (Kenny, 1981), despite differences distinguishing them. One such difference would be presumed to be an invasion by a discarnate spirit or spirits, rather than the existence of alternate human identities or personality states. The contrast here also spawns clashes between hotly contested explanatory paradigms involving the fundamental nature of our world.

Not all slants on possession and dissociation mobilize

party loyalties. Some take the neutral ground. For example, we may, without ulterior reductionist motive, construe possession states and dissociative disorders to be simply different taxonomic categories. Such theory-neutral decisions have always been available for classificatory purposes. They cut across commitments to broader paradigms. For example, the diagnostic terms *possession state* and *trance/possession syndrome* can be applied aseptically to patterns different from those routinely classified as MPD.

On the other hand, we may regard possession and multiplicity as contrasting interpretations of the same data-base, dubbing this slant the Double Aspect Picture (DAP). The DAP is the view that diagnoses of possession and MPD are based upon the same database. In other words, the separate diagnoses refer to the same substratum, but represent different interpretations of it. Under it, possession has a home in a broader religious or supernaturalistic outlook. It embraces such concepts as *discarnate entity*, *spirit*, *demon*, *exorcism*, and the like. MPD, on the other hand, relies on scientific concepts such as *dissociation*, *alters*, *ego-states*, and *psychotherapy*. If the DAP specifies that the concepts represent separate theories about the same data, reductionism takes the further step of disqualifying one of the interpretations. The step taken is not an inconsequential one. A reductionist may grant the presence of a "demonic" alter with the qualification that it is not a *real* demon, but only a dissociated ego-state presenting as such.

Selfhood

As concepts, possession and multiplicity embody different slants on individuation. In the dissociative disorder, the self is split or fragmented; in possession, the body is shared. The semblance of fragmentation of self in possession is an artifact of the invasion of the truly alien other, but in dissociation, it is due to the splitting of one. In other words, in MPD, alters, however separable, are still considered aspects of one individual. Possession, on the other hand, is presumed to involve more than one entity. Furthermore, these conceptual differences have been historically coupled with contrasting treatment packages. In MPD, separate or conflicting ego-states (alters) are usually *integrated* psychotherapeutically; in possession, alien spirits are *extruded* or *exorcised* (Goodwin, Hill, & Attias, 1990) when not accommodated as an aspect of cultural life (Lewis, 1971). Since the contrast between treatment approaches is a palpable one, exorcists and psychotherapists have often been at loggerheads over strategies of remediation. Be that as it may, reductionism may be

doomed for other reasons. Telling differences between features of possession states and MPD may cause the DAP model to founder.

CROSS-CULTURAL FINDINGS

Possession has a broader conceptual sprawl than multiplicity. Because of this, there are no invariant psychological components in possession states permitting inclusion under multiplicity. Even if the common denominator existed, the category could not be a *clinical* one. Many possession states, by virtue of their integral function in cultural or tribal life, their role in communal ritual, and the socially binding functions they serve around the world, cannot be classified as pathological (Herskovitz, 1955; Ward, 1980). In addition, some possessions do not meet criteria of dissociation, because they are not dissociative phenomena. This is shown by cultures in which they occur in the virtual absence of a trance state, and in the context of alterations of *capacity* or *physical condition* rather than *consciousness* (Bourguignon & Evascu, 1977; Wijesinghe, Dissayake, & Mendis, 1976). Such cases appear to involve "possession" as purely cognitive overlays in non-dissociative patterns. In Sri Lanka, for example, Sinhalese communities often diagnose possession on the basis of such symptoms as headache, fever, or gastrointestinal distress, conditions that they attribute to spiritual intrusion (Obeyesekere, 1970; Kapferer, 1983).

Oesterreich (1966) believed a majority of possessions do not involve alterations of consciousness, a criterion of dissociation. His estimate of non-dissociative possessions may have been exaggerated. Bourguignon, in a comprehensive survey of 488 societies, cites 34, or only seven per cent of them, in which possessions are believed to occur in the virtual absence of trance-states or other dissociative patterns (Bourguignon, 1973). For her, possession unaccompanied by trance-state (P), trance-state without possession (T), and trance/possession state (TP) can be documented anthropologically as discrete. In line with the second of these variations, Spencer (1965) cited protracted trance-states in the Samburu nomads of Kenya. These states are not attributed by the Samburu to spirits or mystical forces, but to stress reactions. A similar ideology characterizes the approach of the Abelams of New Guinea to warriors who become extremely agitated and engage in uncontrollable violence (Lewis, 1971).

Divergent interpretations of possession states may coexist within the same culture. A fifteenth century example is the dancing manias which swept Europe in the wake of the Black Death (White, 1955; Aston, 1968). In the Low Countries, the mania was attributed to demon possession. In Spain and Italy, it was perceived naturalistically as due to the bite of the tarantula — hence the origin of the term *tarantella* (Sigerist, 1943; Rosen, 1968; Lewis, 1971). One sometimes gets the impression that treatment specialists who are convinced they deal with MPD alters and spirits or demons — sometimes in the same patient — are not "culture-controlled" (Lhermitte, 1963; Allison, 1980; Peck, 1983; Crabtree, 1985; Friesen, 1991). These practitioners, like the patients

they treat, seem to straddle two "cultures": one developed in a technocracy, and one harkening back to centuries-old traditions.

Another challenge to the DAP is that its assumed parallelism between naturalistic and supernaturalistic categories breaks down. For example, a pattern of behavior may be classified as *pseudo-possession* because it does not meet criteria fixed by certain theological traditions. However, this may not affect its status as a dissociative pattern within a medical or naturalistic tradition (i.e., not all pseudo-possession are factitious disorders).

The historically epidemic character of certain possessions, as manifested by the European dancing manias and the group possessions of cloistered seventeenth century French nuns (Huxley, 1952; Robbins, 1959) also undermines the DAP. While MPD may run in families, it has not been observed to develop as an immediate effect of modeling, affecting fifty or eighty nuns in short order. Such was the case in the Rome possessions of 1554 and the Lyons possessions of 1687 (Robbins, 1959).

Ritual Control

Forms of possession world-wide may be distinguished by the degree to which they are subject to ritual control. This refers to the regulation of a possession by a host and the community. One can distinguish the individual, unpredictable, and culturally pathological forms of possession from the valued, institutionally-based, and morally conformist type. The distinction corresponds to the one drawn by Lewis (1969; 1971) in the anthropological literature as between *peripheral* and *central* cult possessions.

Degree of ritual control is yet another challenge for the DAP. A regular feature of such dissociative disorders as MPD is their unpredictable switching. Possession states, on the other hand, run a gamut from cases of sudden onset to those in which spirit intrusions are ceremonially scheduled and terminated like clockwork. In our own country, ritual possessions in such groups as Pentecostal and Charismatic sects (Nichol, 1971; Ward & Beaubrun, 1981; Goodman, 1988), and early Quaker and Shaker communities (Braithwaite, 1955), were an accepted and valued feature of religious life.

The form of possession known as mediumship or channeling had a preminent place in the nineteenth century revival of Spiritualism (Cadwallader, 1911; Cumberland, 1918; Brandon, 1984; Coon, 1992). Biblical reference to this sort of possessed state actually predated references to the demonic possessions of the Synoptic Gospels. The woman of Endor, arguably misidentified for centuries as a witch (Parrinder, 1958; Scot, 1972), operated as a channeler through whom the ghost of Samuel was raised at the request of King Saul. Later theologians, like St. Augustine, were intent on denouncing such black arts as necromancy. Accordingly, he interpreted the Endor channeling to have been engineered by a demon masquerading as the prophet (Lea, 1957).

Impact of Acculturation

The role of culture in both possession and dissociation may have been underestimated (Meekel, 1935-36; Boisen,

1939; Kiev, 1961; Leon, 1972-73; Akhtar, 1988). The most dramatic presentation of dissociative disorder, multiple personality disorder (MPD), is often traced to an early pattern of physical or sexual trauma in tandem with a biological component correlated with high hypnotizability (Braun, 1986; Putnam, 1989). On the assumption these two variables are internationally distributed, a question arises about the reported lower incidence of MPD in many Third World countries (Yap, 1960; Freed & Freed, 1964; Teja, Khanna, & Subramanyam, 1970; Varma, Srivastava & Sahay, 1970; Adityanjee, Raju, & Khandelwal, 1989; Saxena & Prasad, 1989; Takahashi, 1990). It could transpire that a third variable, acculturation, affects the final form a behavioral presentation takes when other etiological factors obtain. If so, currently posited causal conditions of MPD may be necessary, not sufficient, to produce the disorder. In line with this, the lower incidence of MPD in the Third World may not be simply an artifact of differences in diagnostic practices. Conceivably, the disparity might well reflect a higher proportion of possessions, as a function of transformations introduced by culture. Furthermore, the traumatic origins of MPD may not parallel an analogous etiology for possession states transculturally. Many of these states appear to originate in societal patterns confounding any such attribution. Kluft (1984, 1991) has made similar observations.

Another hypothesis, put forth by Downs, Dahmer and Battle (1990) and Adityanjee, Raju and Khandelwal (1989), is that possession states are diagnosed more frequently in Asia because they are lumped together under MPD in western countries. Varma, Bouri and Wig (1981), on the occasion of one of the rare diagnoses of MPD in India, speculated that the expression of personal identity disturbance is spirit possession in societies in which polytheism and beliefs in reincarnation hold sway, whereas MPD may be the favored manifestation in Western cultures in which deliberate role-playing is reinforced.

Sex-linked Factors

Investigators (Ward, 1980; Walker, 1981) have linked the incidence of possession to social disenfranchisement. Cross-culturally, women seem to be more vulnerable to possession than men. Ward (1980) has referenced women's need for "prestige elevation" in male-dominated societies. This appears to be true for populations as diverse as the Luo women of Kenya (Whisson, 1964), the Kamba women of east Africa (Lindblom, 1920), Somali women (Lewis, 1969), Swahili women, and ZAR possessions across broad stretches of Moslem Africa (Messing, 1958), as it was for the Ursuline nuns of France in the seventeenth century. In the last named case, the development of newer social roles commanding attention from male exorcists and church officials was implicit in the demonic possessions of the nuns (Huxley, 1952). Groups of women in the sixteenth century took to preaching while possessed, a revered role ordinarily reserved for men (Walker, 1981). Finally, in the widely known case of a French demoniac, Marthe Brossier, the afflicted girl had earlier cut off her hair, fugued, and cross-dressed as a male (Walker & Dickerman, 1991). For many woman innovators

from Joan of Arc to the French novelist George Sand, the donning of mannish attire heralded their assumption of cultural roles considered male prerogatives.

The stamp of culture on possession is also suggested by the obvious influence of prevailing belief systems (Littlewood & Lipsedge, 1985). Possessions tend to disappear as ideas about spirits diminish, especially in industrial societies. They increase in number in regions "where they are once more taken seriously by persons in authority" (Oesterreich, 1966, pp. 194-195). Psychoanalysts like Greenson (1974) and Challman (1974) have held that the attractiveness of exorcism lies in its ability to enable us to "delude" ourselves that we are innocent victims of invading forces which can take the rap for impulses we wish to disown. However, externalization of responsibility is but one possible element in a complicated cultural strand. Moreover, it figures prominently in the dynamics of MPD, where there is ordinarily no presumption about spiritual intrusions.

POSSESSION IN EUROPEAN HISTORY

In European history, possession had for centuries been attributed to witchcraft, an overriding social concern (Hansen, 1900, 1901; Trevor-Roper, 1956; Lea, 1957; Thomas, 1971; Midelfort, 1972; Russell, 1972; Cohn, 1975; Monter, 1976; Klaitz, 1985). De-escalation of the witch-craze saw a corresponding reduction in the number of reported demonic possessions. The Salem "possessions" of 1692 evaporated at the point allegations of witchcraft lost momentum because they were directed toward increasing numbers of socially prominent Puritans, rather than the downtrodden (Starkey, 1969; Boyer & Nissenbaum, 1974; Demos, 1982; Karlsen, 1987; Godbeer, 1992).

During the sixteenth and seventeenth centuries, the number of European possessions was influenced by geography, era, and socioreligious climate. The events across the ocean in Salem Village (Mather, 1693) took place against a backdrop of social upheaval, one instance of which was the revocation of the Bay Colony charter and the reinstatement of the hegemony of the Church of England (Hansen, 1969).

During the same time-frame, demonic possessions and suspected cases of witchcraft increased in countries like England, France, Switzerland, and Germany at moments in their history when religious factionalism between Catholics and Protestants disrupted national life. In England, accession of the Tudor line under Henry VIII signaled an outbreak of violence against Catholic exorcists. Across the channel in France, open warfare between Catholics and French Protestants, or Huguenots, was the order of the day, and was dramatized in campaigns of persecution (Haught, 1990). Barnett (1965) has pointed out that Catholic Ireland was virtually witchcraft-free during periods that the panic raged elsewhere, possibly because of the absence of social upheaval sparked by religious dissension. The same was true after a time in Spain. In this monarchy, prevailing ecclesiastical uniformity and a preoccupation with rooting out the infidel (Atkinson, 1960; Peters, 1989; Elliott, 1990) had brought witch-burnings to an abrupt halt after the reports of Alonso

de Salazar Frías, inquisitor of the Logroño tribunal, were sent to Madrid in 1614, (Henningsen, 1969, 1980; Baroja, 1971). Out of 4,000 cases brought to trial in Spain between 1550 and 1750, only eleven witches were sentenced to be executed by burning. Of these, only six were actually burned, since five were burned in effigy (Henningsen, 1980).

Ironically, expressions of the Catholic/Protestant antagonism were clashes over possession. In the seventeenth century, French exorcisms played a strategic role for orthodoxy. They were spectacular events, notorious for their theatrics, and staged for thousands of spectators. At Loudun alone, seven thousand people were reportedly in attendance at public exorcisms (Oesterreich, 1966, p. 103). The propagandistic value of the spectacles was not lost on the Huguenots, who had renounced exorcisms and the real presence of Christ in the Eucharist as remnants of Catholic superstition. "Successful" exorcisms using holy wafers drove the partisan point home more eloquently than did lengthy treatises in defense of the faith. Walker (1981) indicates that the staged French exorcisms effectively drove thousands into the confessional. These parishioners feared that their secret sins, festering because they had yet to be absolved, would be made public by demons before these were completely exorcised. Consequently, the parishioners arranged for private absolution before all their dirty linen was aired.

*Pseudo-possession*s

For European Catholics, a snag in the polemical warfare against Reformationists was the troublesome profusion of pseudo-possession, many of which were the product of outright fraudulence (Robbins, 1959). When exposed as fraudulent, even "effective" exorcisms seemed to have mocked the pretensions of Catholic ritual. Fraudulent cases prompted theologians to develop more stringent criteria for true possession. In this atmosphere, the seventeenth century landscape was peppered with the fulminations of bishops and archbishops, like Clement August of Cologne, who inveighed against a generation of venal and maverick exorcists whose avarice drove them to see devils everywhere (Lea, 1957, p. 1055). As a result, criteria for authentic signs of demon possession lessened in number. In a pastoral letter of 1669, the bishop of Pomerania, having grown incensed with the carnival aspect of the office of exorcist, threatened excommunication of priests initiating wildcat efforts at exorcism prior to obtaining permission from him (Lea, 1957, p. 1055). Felix Joseph Huber de Wavrans, Bishop of Ypres, likewise castigated the charlatanism of exorcists a century after the Loudun possessions (Lea, 1957, p. 1055).

Unmasked pseudo-possession were exposed in cases like those of John Darrell, a Protestant exorcist convicted of assisting people in rehearsing how to act possessed (Thomas, 1971). Countless pseudo-possession were investigated and exposed by James I of England, translator of the Bible, and himself a prominent demonologist of his day. Pseudo-possession, whether or not a result of charlatanism, increased in seventeenth century Europe to a point at which their rhetorical value to Catholicism was nearly overshadowed by a widespread atmosphere of mendacity and hucksterism.

Today, the reticence of diocesan officials to approve exorcisms willy-nilly mirrors the skepticism of forebears in whose age it was common knowledge that fools rushed in where angels feared to tread.

A related phenomenon that challenged the appearance of legitimacy was that exorcisms could drag on interminably — sometimes for years. In some cases, demons would reappear after presumably effective extrusions, deflating erstwhile triumphant exorcists.

More stringent criteria of possession were formulated in the context of the above-mentioned concerns. Among these were revulsion to sacred objects, paranormal knowledge, paranormal strength, and paranormal linguistic ability. The latter capability was often illustrated by a competence in a foreign language or dialect presumably unknown to the host. Prior to the development of these criteria, the nature of demonic signs tended to shift over time in accord with the thinking and beliefs of the day. A Rouen treatise of 1644 listed eleven such signs, whereas Père Esprit de Bosroger (Robbins, 1959) and Michael Dalton in his 1627 treatise, *Guide to Jurymen* (Robbins, 1959) listed seven. Francesco-Maria Guazzo, in his *Compendium Maleficarum* (Guazzo, 1988), developed a group of forty-seven signs.

There are, of course, other dramatic signs of possession which, while not classical, were understood to meet a test of stringency. Some examples include: several basso voices that emerged from a teenager who was not visibly articulating the words (Vogel, 1935); mysterious stench that came from nowhere (Goodman, 1988); having spun on one's back like a top (Summers, 1956); and having levitated (Fielding-Ould, 1919; Thurston, 1952, 1955; Rogo, 1982; Crabtree, 1985; Noll, 1990).

Criteria of spirit possession that plead the most plausible case for supernaturalism survive the test of time only because they appear to be impervious to naturalistic explanation over very long periods of time — sometimes centuries. They have often failed to survive the progress of medical science. Because of this, they have decreased in number. In earlier epochs, disorders exotic for the age are perhaps now diagnosable as epilepsy or conversion disorder (Temkin, 1945). They were probably viewed as instances of possession at the time (Kemp & Williams, 1987). Allotriophagy, or the vomiting of strange objects, had a significant and recurring place in the past as a symptom of possession. It appears to be on the wane in modern reports of possession.

NATURALISTIC V. SUPERNATURALISTIC EXPLANATION

The idea that "gaps" or loopholes in naturalistic accounts make them incomplete, or vulnerable to supernaturalistic explanation, is probably as old as recorded history. The imagined "incompleteness" of naturalism at many historical junctures has been emphasized in order to reinstitute or reinforce a sense of religious awe or wonderment (Brooke, 1991). The undercurrent was especially pronounced in the wake of the Copernican, Darwinian, and Freudian revolutions. These ideological depredations in effect dethroned us from

the exalted position in the universe central to older western religious concepts. Decades of the mid-nineteenth century's popularizing of Darwin's evolutionary theory also spawned the birth of Spiritualism (Coon, 1992), possibly as reaction to a prevailing mood of scientism. It is small wonder that escalation of fears about demons, sorcerers, and witches coincided in time not with periods of religion's hegemony, like the Dark Ages and the Middle Ages, but with the Renaissance. The latter witnessed a revival of pagan studies and the birth of experimental science and humanism.

The figure of the magician in European history was one steeped in the lore of occult arts (Neusner, Frerichs, & Flesher, 1989). The magician's "heretical" flirtation with demonic power was infiltrated by strains of genuinely scientific methods and goals. Distrust of early scientific procedures by religious orthodoxy was probably exacerbated by their perceived association with heretical pursuits or interests. Magicians tended often to exculpate themselves from charges of sorcery by circulating the view that high magic relied only on the natural laws implicit in God's handiwork, nature. Many of them, like Paracelsus (Sigerist, 1941; Pachter, 1951), insisted that what orthodoxy perceived as the occult or diabolical was at bottom the "miraculous" intrinsic to the natural order of things.

Medicalization and Sacrilization

Recently, tensions between a psychiatric/naturalistic approach to possession states (Ehrenwald, 1975; Cupitt, 1976; Trethowan, 1976; Fraser, 1991) and supernaturalism or truncated versions of it (Lhermitte, 1963; Finch, 1975; Rodewyck, 1975; Allison & Schwartz, 1980; Peck, 1983; Crabtree, 1985; Maurey, 1988; Friesen, 1991) are apparent in the clinical literature. Proponents of the latter approach, like their historical forebears, believe that possession states pose irresolvable problems for a one-sided naturalism. As Noll has described them, these specialists promote forms of treatment combining the psychological and the occult. Noll goes on to indicate that, "...the vast majority of mainstream psychiatrists and psychologists do not believe in spirits or spirit possession...this overwhelming majority would not recommend exorcism under any circumstances" (Noll, 1990, p. 179).

The paradigm clash (Kuhn, 1962) between naturalists and supernaturalists reflects tensions in a culture between secular and religious frames of reference. All the same, spokespersons in separate camps frequently gloss over paradoxes inherent in their respective postures. For example, Trethowan's cautionary medical stance toward exorcism seems to contaminate metaphysical issues with those pertaining to treatment efficacy or harm:

If such symptoms and behavior are not recognized for what they are, i.e., due to mental subnormality, the sufferers may not only fall into the wrong hands but be subjected to inappropriate treatment, including exorcism. The misguided application of such procedures may amount to frank mismanagement and can have dire results. (Trethowan, 1976, p. 127)

Despite Trethowan's admonition, the existence of

demons and spirits is hardly a "scientific" issue to begin with. Accordingly, it is questionable whether supernaturalism is impugned by confirming "mental subnormality." Such a view may confuse independent realms of discourse: the naturalistic and the supernaturalistic. Scientists have the tools to evaluate whether exorcisms are empirically effective; they are in no position to determine what occult forces may or may not be at work.

If Trethowan's *caveat* is intended as a flat discouragement of exorcisms world-wide, he would appear to favor psychiatric co-optation of the treatment of possession states. Should the stance be rooted principally in allegiance to therapeutic goals and benefits, how is it justified prior to confirmation from comparative studies? Perhaps "frank mismanagement" is a verdict Trethowan feels is inescapable, considering the metaphysical underpinnings of exorcism. However, the latter may actually be unrelated to issues of efficacy, just as clinical improvement in psychotherapy may be unrelated to theories from which it is thought to have sprung (Grünbaum, 1984, 1986a, 1986b). In any case, pre-emption of alternative practices in advance of obtaining cross-cultural outcome data is hardly inspired by "scientific" canons.

The "dire results" of exorcisms predicted by Trethowan may represent a selective focus on unsuccessful outcomes, the putative basis for the cautionary stance. A case in point is the death of Anneliese Michel at the hands of two exorcists in Germany (Goodman, 1981). The case was judged by a European court as "mismanaged," as are the occasional suicides of patients who, through happenstance, seek relief from exorcists (Fraser, 1991). Oddly, there is little acknowledgment that the sword cuts both ways. Suicides of MPD patients under psychiatric or psychological supervision (Kluft, 1992) are rarely conceived as advertising the "dire consequences" of secularization. Nor are numerous deaths under the surgeon's knife widely regarded as the price we pay for renouncing demonology! This is not to plead the advantage of a Renaissance mind-set, but only to call attention to the one-sidedness of certain critiques, which inevitably boomerang.

One can only conclude that blanket professional decrees against exorcisms prior to determining their comparative efficacy in particular ethnological circumstances may simply be the expression of parochial sentiment. Furthermore, professional renunciation of supernaturalistic thinking is curiously half-hearted. Rarely is it parlayed into a comprehensive critique of religious belief in general — for reasons that are as logically inconsistent as they are politically obvious. Indeed, professional endorsements of tame forms of religious persuasion as the epitome of mental health and adjustment are legion (Pattison, 1969). Yet in centuries past, and to some extent nowadays, the reality of demonic powers for the religious subculture is wedded to theism. Belief in the existence of the forces of evil was once deemed an essential ingredient of orthodoxy. Because of this, disbelief in the Devil and his minions manifestly savored of heresy in yesteryear. Today, devotional life among many Christian, Judaic, and Islamic sects can forfeit dualism without jeopardizing faith.

in the first place.

A knottier philosophical issue centers on the problem of ultimately differentiating between true possession and dissociation. In other words, if coinciding naturalistic and supernaturalistic perspectives on the same substratum or database exist, what operations would validate one slant over the other? Such a question itself implies the availability of metatheoretical rules permitting this kind of determination. There may be none. Because of this, the very parameters of discourse are murky. Perhaps supernaturalistic explanation cannot be conceived as jockeying with naturalistic explanation in an arena for which commensurate conceptual standards take the measure of both (Brooke, 1991). Some such incommensurability of explanatory status is suggested by the aforementioned failure to rule out "true possession" by confirming "mental subnormality." As Weinberg (1992) has observed, the inconsistency between scientific theories and supernaturalistic schema may not be so much a matter of logic as it is of temperament. Because of this, it may be misleading to assume we could resolve the existential mystery only providing we obtain the required data. Accordingly, a generation of treatment specialists familiar with MPD have thrown caution to the winds and have deliberated over what "empirical" criteria can be relied on to differentiate dissociative states from authentic spirit intrusions. Their guiding presupposition is that the actual data, in contrast to the incommensurable schema brought to bear on sluicing them, are metaphysically transparent. Limitations of space preclude a fuller exploration of the intricacies of this issue. At any rate, describing the form taken by exorcism rites is essentially a historical or anthropological task, while investigating their efficacy in alleviating "possessions" a psychological or methodological one. Exploring the conceptual paradoxes of demonology is a philosophical or theological undertaking.

Historically, perceived tensions between naturalistic and demonological explanation often manifested as a clash between schema presumably accounting for a diverse range of phenomena. During the Renaissance, physicians typically deferred to clerics when it came to treating conditions they felt defied understanding through natural law or categories of Galenic medicine. Capitulation to demonology at such junctures strengthened the view that there were conditions naturalistic medicine would be forever debarred from explaining. Far from being an impartial assessment of certain blights, the capitulation merely rubber-stamped a demonological mind-set. A Florentine statute of 1349 forbade physicians to consult with seriously ill patients before the patients had confessed to their sins (Park, 1985, p. 50).

The very notion of a naturalistic scheme also embraces anomalies that resist explanation because of prevailing ignorance of etiology. Consigning puzzling conditions to the purview of demonology on the basis of their rarity or unusual features amounted to precluding the possibility of undiscovered natural laws equal to the task of explanation. The move belied the fact that Renaissance medicine was already in the side pocket of supernaturalism — even before explanation got off the ground. Estes (1983) has argued that Renaissance medicine, far from allaying witch-panics, was a

prime mover in their European efflorescence. He has hypothesized that the figure of the witch was itself the byproduct of the drive to explain mysterious "witch diseases," not the other way around. The diseases (with possession in the forefront of consideration) were conditions conceived of as having a diabolical origin, due to their refractoriness to ordinary medical treatment. The Renaissance tradition survives for treatment specialists convinced that features of trance/possession states virtually preclude naturalistic explanations.

TREATMENT ENTAILMENTS

Goodman (1988) has declared that rigidities on the ontological issue are premature, since we must remain in the dark about the reality of spiritual beings. However, the practical implications for remediation of possession states may be quite unrelated to the resolution of such theological dilemmas (Mackarness, 1974). In terms of treatment philosophy, any overall program rejecting exorcism out of hand may rest upon confusion. It is not the mistake of confusing possession as dissociation, but the error of supposing that the choice of treatment approach presupposes a metaphysical position on the part of the practitioner, or depends on the resolution of theological issues. When it comes to treatment effectiveness, perhaps the question of the actual existence of the spirit in the host "drops out of consideration as irrelevant" (Wittgenstein, 1953). Maybe the particular form an intervention should take hinges on factors anthropologically weightier than the private convictions of the specialist. Perhaps it is the web of cultural and subcultural meanings perceived by the host as integral to the condition that is paramount.

Janet evidently perceived the therapeutic relevance of implicit meanings for the host (Oesterreich, 1966). He was successful in curing a "possessed" individual, Achille, who was refractory to treatment prior to being seen by him. Without incorporating the belief-system of the host, Janet adopted an ingenious strategy. It involved enlisting the aid of the invading "devil" to develop a somnambulistic state in the patient conducive to yielding significant etiological information. In other words, Janet's approach involved the appropriation of an exorcist role. The latter not only granted the reality of the invading demon, it appealed to his vanity as well to get results! It may be pointed out that Janet's ruse can also be construed as a strategy in keeping with other naturalistically-inspired maneuvers with MPD patients. However, this concedes that naturalism can encompass the appropriation of a repertoire of exorcist role-facsimiles. If so, exorcisms cannot be precluded on naturalistic grounds.

Is there a basis for therapeutic approaches maximizing a perceived congruence for the host between treatment and spiritual plight? Perhaps such interventions are even more compelling when it comes to possessions with an impregnated meaning for certain native-American, African-American, Hispanic, and Fundamentalist communities in our own country, not to mention Third World citizens. In these communities, the aforementioned notion of "culture-control" may be more marked than in other diverse ethnological contexts. Accordingly, for such groups, possession states can be

likened to "culture-bound syndromes" (Simons & Hughes, 1985). While the comparative effectiveness of any form of treatment must remain an empirical issue, prejudging its character could be tantamount to ignoring culturally pre-figured recipes for the correct approach (Torrey, 1986; Csordas, 1987). Moreover, there is a vast difference between holding, as did Fenichel (1955) and Freud (1959), that concepts germane to a scientific framework can be applied in explaining the efficacy of ethnocentric, tribal, or religious approaches to treatment, and positing the futility of all such interventions because they do not constitute "applications" of scientific principles. If the mandate is to relieve suffering, does the metaphysics of the practitioner dictate the form of an intervention, or merely color the explanatory concepts brought to bear on why it proves effective (Begelman, 1977)?

Ironically, perhaps the conviction on the part of Noll's (Noll, 1990) naturalistic practitioners that exorcisms must prove ineffective is itself but an article of faith, not a deduction from a philosophy of science. Alternatively, and as Tartarotti (Lea, 1957, p. 1445) declared, successful exorcisms hardly prove the reality of powers they are used to extrude. Should demonic agency be illusory, exorcisms in particular cases might still be the most effective way to remediate. A sizable task lies ahead in identifying criteria for the wisdom of such interventions in contexts of attenuated "culture control."

Any way one slices the cake, the empirical picture on treatment efficacy is mixed. Many exorcisms, like the one undertaken on Anneliese Michel (Goodman, 1981) are lengthy, traumatic, or unsuccessful, whereas others are remarkably successful. Giel, Gezahegn, and van Luijk (1968) and Torrey (1986) report the case of an Ethiopian exorcist, Abba Wolde Tensae. He kept records of brief and successful exorcisms totalling a million over a fourteen-year period. However, the failure of exorcism in given cases no more undermines the pragmatic utility of the practice in other cases than does the failure to integrate in professional settings impugn psychotherapy in the treatment of MPD. ■

REFERENCES

- Adityanjee, Raji, G.S.P., & Khandelwal, S.K. (1989). Current status of multiple personality disorder in India. *American Journal of Psychiatry*, 146, 1607-1610.
- Akhtar, S. (1988). Four culture-bound psychiatric syndromes in India. *Indian Journal of Social Psychiatry*, 34, 70-74.
- Allison, R.B., & Schwartz, T. (1980). *Minds in many pieces*. New York: Rawson, Wade.
- Aston, M. (1968). *The fifteenth century: The prospect of Europe*. New York: W.W. Norton.
- Atkinson, W.C. (1960). *A history of Spain and Portugal*. Middlesex, England: Penguin Books.
- Barnett, R. (1965). Witchcraft, psychopathology, and hallucinations. *British Journal of Psychiatry*, 3, 439-445.
- Baroja, J.C. (1971). *The world of the witches*. Chicago: University of Chicago Press.
- Begelman, D.A. (1977). *Fitting and guiding*. Paper presented at the Eleventh Annual Meeting of the Association for the Advancement of Behavior Therapy, December, 1977, Atlanta, Georgia.
- Boisen, A. (1939). Economic distress and religious experience: A study of the holy rollers. *Psychiatry*, 2, 185-194.
- Bourguignon, E. (Ed.). (1973). *Religion, altered states of consciousness, and social change*. Columbus, Ohio: Ohio State University Press.
- Bourguignon, E., & Evascu, T. (1977). Altered states of consciousness within an evolutionary perspective: A holocultural analysis. *Behavior Science Research*, 12(3), 197-216.
- Boyer, P., & Nissenbaum, S. (1974). *Salem possessed: The social origins of witchcraft*. Cambridge: Harvard University Press.
- Braithwaite, W.C. (1955). *The beginnings of Quakerism*. Cambridge, United Kingdom: Cambridge University Press.
- Brandon, R. (1984). *The spiritualists: The passion for the occult in the nineteenth and twentieth centuries*. Buffalo: Prometheus Press.
- Braun, B.G. (1986). Issues in the psychotherapy of multiple personality disorder. In B.G. Braun (Ed.), *Treatment of multiple personality disorder* (pp. 1-28). Washington, DC: American Psychiatric Press.
- Brooke, J.H. (1991). *Science and religion: Some historical perspectives*. Cambridge, United Kingdom: Cambridge University Press.
- Cadwallader, M. (1911). *Hydesville in history*. Chicago, Illinois: The Progressive Thinker Publishing House.
- Cavendish, R. (1967). *The black arts*. New York: G.P. Putnam's Sons.
- Cavendish, R. (1987). *A history of magic*. London: Arkana.
- Challman, A. (1974). Exorcism. *Journal of the American Medical Association*, 229, 140.
- Cohn, N. (1975). *Europe's inner demons*. New York: Basic Books.
- Coon, D.J. (1992). Testing the limits of sense and science: American experimental psychologists combat spiritualism. *American Psychologist*, 47, 143-151.
- Crabtree, A. (1985). *Multiple man: Explorations in possession and multiple personality*. London: Grafton Books.
- Csordas, T.J. (1987). Health and the holy in African and Afro-American spirit possession. *Social Science and Medicine*, 24, 1-11.
- Cumberland, S. (1918). *That other world: Personal experiences of mystics and their mysticism*. London: G. Richards.
- Cupitt, D. (1976). Comment. *Journal of Medical Ethics*, 2, 134-135.
- DeGivry, G. (1971). *Witchcraft, magic, and alchemy*. New York: Dover.
- Demos, J.P. (1982). *Entertaining Satan: Witchcraft and the culture of early New England*. Oxford, United Kingdom: Oxford University Press.

- Downs, J., Dahmer, S., & Battler, A.O. (1990). Multiple personality disorder in India. *American Journal of Psychiatry*, 147, 1260.
- Ehrenwald, J. (1975). Possession and exorcism. Delusion shared and compounded. *Journal of the American Academy of Psychoanalysis*, 3(1), 105-119.
- Eliade, M. (1951). *Le chamanisme et les techniques archaïques de l'extase*. Paris: Payot.
- Elliott, J.H. (1990). *Imperial Spain 1469-1716*. London: Penguin Books.
- Estes, L.L. (1983). The medical origins of the European witch craze: A hypothesis. *Journal of Social History*, 17, 271-284.
- Fenichel, O. (1955). Brief psychotherapy. *Collected papers*. London: Routledge and Kegan Paul. pp. 243-249.
- Fielding-Ould, F. (1919). *The wonders of the saints*. London: Watkins.
- Finch, W. (1975). *Pendulum and possession*. Tucson, Arizona: Treasure Chest.
- Flint, V.I.J. (1991). *The rise of magic in early medieval Europe*. Princeton: Princeton University Press.
- Fox, R.L. (1986). *Pagans and Christians*. New York: Harper and Row.
- Fraser, G.A. (1991). *Clinical effects on multiple personalities exposed to exorcism rites*. Paper presented at the Eighth International Conference on Multiple Personality and Dissociative Disorders, Chicago, Illinois.
- Freed, S.A., & Freed, R.S. (1964). Spirit possession as illness in a north Indian village. *Ethnology*, 3, 152-171.
- Friesen, J.G. (1991). *Uncovering the mystery of MPD: Its shocking origins, its surprising cures*. San Bernardino, California: Here's Life Publishers.
- Freud, S. (1959). On psychotherapy. *Collected papers. Vol. I* (pp. 249-263). New York: Basic Books.
- Giel, R., Gezahegn, Y., & van Lujik, J.N. (1968). Faith-healing and spirit possession in Ghion, Ethiopia. *Social Science and Medicine*, 2, 63-79.
- Godbeer, R. (1992). *The devil's dominion: Magic and religion in early New England*. Cambridge, United Kingdom: Cambridge University Press.
- Goodman, F.D. (1981). *The exorcism of Anneliese Michel*. New York: Doubleday.
- Goodman, F.D. (1988). *How about demons? Exorcism and possession in the modern world*. Bloomington, Indiana: University of Indiana Press.
- Goodwin, J., Hill, S., & Attias, R. (1990). Historical and folk techniques of exorcism: Applications to the treatment of dissociative disorders. *DISSOCIATION*, 3 (2), 94-101.
- Greenson, R.R. (1974). Exorcism. *Journal of the American Medical Association*, 228, 828.
- Grünbaum, A. (1984). *The foundations of psychoanalysis: A philosophical critique*. Berkeley, California: University of California Press.
- Grünbaum, A. (1986a). Precis of the foundations of psychoanalysis: A philosophical critique. *Behavioral and Brain Sciences*, 9, 217-284.
- Grünbaum, A. (1986b). The placebo concept in medicine and psychiatry. *Psychological Medicine*, 16, 19-38.
- Guazzo, F.M. (1988). *Compendium maleficarum*. New York: Dover.
- Hansen, C. (1969). *Witchcraft in Salem*. New York: George Braziller.
- Hansen, J. (1900). *Zauberwahn, Inquisition, und Hexenprozess un Mittelater und die Entstellung der grossen Hexenverfolgung*. Munich: Oldenbourg.
- Hansen, J. (1901). *Quellen und Untersuchungen zur geschichte des Hexenwahns und der Hexenverfolgung un Mittelater*. Bonn: C. Georgi.
- Haught, J.A. (1990). *Holy horrors: An illustrated history of religious murder and madness*. Buffalo: Prometheus Press.
- Henningsen, G. (1969). The papers of Alonzo de Salazar Frías. A Spanish witchcraft polemic, 1610-1614. *Temenos*, 5, 85-106.
- Henningsen, G. (1980). *The witches' advocate: Basque witchcraft and the Spanish Inquisition*. Reno, Nevada: University of Nevada Press.
- Herskovitz, M.J. (1955). *Cultural anthropology*. New York: A.A. Knopf.
- Hicks, R.D. (1991). *The pursuit of Satan*. Buffalo: Prometheus Books.
- Huxley, A. (1952). *The devils of Loudun*. New York: Harper and Row.
- Kapferer, B. (1983). *A celebration of demons*. Bloomington, Indiana: University of Indiana Press.
- Karlsen, C.F. (1987). *The devil in the shape of a woman*. New York: Vintage Books.
- Kemp, S. & Williams, K. (1987). Demonic possession and mental disorder in medieval and early modern Europe. *Psychological Medicine*, 17, 21-29.
- Kenny, M.G. (1981). Multiple personality and spirit possession. *Psychiatry*, 44, 337-358.
- Kiev, A. (1961). Spirit possession in Haiti. *American Journal of Psychiatry*, 118, 133-138.
- Kiev, A. (1968). *Curanderismo: Mexican American folk psychiatry*. New York: The Free Press.
- Kemp, S. & Williams, K. (1987). Demonic possession and mental disorder in medieval and early modern Europe. *Psychological Medicine*, 17, 21-29.
- Klaits, J. (1985). *Servants of Satan: The age of the witch hunts*. Bloomington, Indiana: University of Indiana Press.
- Kluft, R.P. (1984). Treatment of multiple personality disorder. *Psychiatric Clinics of North America*, 7, 9-29.

- Kluft, R.P. (1991). Multiple personality disorder. In A. Tasman & S. Goldfinger (Eds.) *American Psychiatric Press Annual Review of Psychiatry, Vol. 101* (pp. 161-188). Washington, DC: American Psychiatric Press.
- Kluft, R.P. (1992). Five completed suicides in multiple personality disorder patients. Clinical observations and perspectives. In B.G. Braun (Ed.), *Proceedings of the Ninth International Congress on Multiple Personality/Dissociative States*, Chicago, Illinois.
- Kors, A.C., & Peters, E. (1972). The recantation of the Salem jurors. In A.C. Kors & E. Peters (Eds.), *Witchcraft in Europe 1100-1700: A documentary history* (pp. 358-359). Philadelphia: University of Pennsylvania Press.
- Kuhn, T.S. (1962). *The structure of scientific revolutions*. Chicago: University of Chicago Press.
- Lea, H.C. (1906-1907). *A history of the Inquisition in Spain*. (4 Vols.) New York: Macmillan.
- Lea, H.C. (1957). *Materials toward a history of witchcraft*. (3 Vols.) New York: Thomas Yoseloff.
- León, C.A. (1972-73). The devil and the calendar. *Foreign Psychiatry*, 4, 376-393.
- Lewis, I.M. (1969). Spirit possession in northern Somaliland. In J. Beattie and J. Middleton (Eds.) *Spirit mediumship and society in Africa* (pp. 188-219). London, United Kingdom: Routledge and Kegan Paul.
- Lewis, I.M. (1971). *Ecstatic religion: An anthropological study of spirit possession and shamanism*. London, United Kingdom: Routledge and Kegan Paul.
- Lhermitte, J. (1963). *Diabolical possession, true and false*. London: Burn and Oates.
- Lindblom, G. (1920). *The Akamba in British East Africa*. Uppsala, Sweden: Appelbergs boktryckeri aktiebolag.
- Littlewood, R., & Lipsedge, M. (1985). Culture-bound syndromes. In K. Granville-Grossman (Ed.), *Recent advances in clinical psychiatry* (pp. 105-142). Edinburgh: Churchill Livingstone.
- Mackarness, R. (1974). Occultism and psychiatry. *The Practitioner*, 212, 363-366.
- Martin, D., & Fine, G.A. (1991). Satanic cults, Satanic play: Is "Dungeons & Dragons" a breeding ground for the devil? In J.T. Richardson, J. Best, & D.G. Bromley (Eds.), *The satanism scare* (pp. 107-123). New York: Aldine de Gruyter.
- Maurey, E. (1988). *Exorcism: How to clear at a distance a spirit-possessed person*. West Chester, Pennsylvania: Whitford Press.
- Mather, C. (1693). *The wonders of the invisible world. Observations as well historical as theological, upon the nature, the number, and the operations of the Devil*. London: (Publisher Unknown).
- Mekeel, H.S. (1935-1936). Clinic and culture. *Journal of Abnormal and Social Psychology*, 30, 292-300.
- Meerlo, J.A.M. (1963). Four hundred years of "witchcraft," "projection," and "delusion." *American Journal of Psychiatry*, 120, 83-86.
- Messing, S. (1958). Group therapy and social status in the Zar cult of Ethiopia. *American Anthropologist*, 60, 1120-1127.
- Monter, E.W. (1976). *Witchcraft in France and Switzerland. The borderlands during the Reformation*. Ithaca: Cornell University Press.
- Midelfort, E. (1972). *Witch hunting in Southwest Germany 1562-1684: The social and intellectual foundations*. Stanford: Stanford University Press.
- Mora, G. (1991). *Witches, devils, and doctors in the Renaissance: Johann Weyer, De Praestigiis Daemonum*. Binghamton, New York: Medieval and Renaissance Texts and Studies.
- Nichol, J.T. (1971). *The pentecostals*. New York: Harper and Row.
- Neuser, J., Frerichs, E.S., & Flesher, P.V.M. (Eds.). (1989). *Religion, science, and magic: In concert and in conflict*. Oxford, United Kingdom: Oxford University Press.
- Noll, R. (1990). *Bizarre diseases of the mind*. New York: Berkley Books.
- Obeyesekere, G. (1970). The idiom of demonic possession. *Social Science and Medicine*, 4, 97-111.
- Oesterreich, T.K. (1966). *Possession: Demoniacal and other*. New Hyde Park, New York: University Books.
- Pachter, H.M. (1951). *Magic into science: The story of Paracelsus*. New York: Henry Schuman.
- Park, K. (1985). *Doctors and medicine in early Renaissance Florence*. Princeton: Princeton University Press.
- Parrinder, G. (1958). *Witchcraft*. Baltimore: Penguin Books.
- Pattison, E.M. (Ed.) (1969). *Clinical psychiatry and religion*. Boston: Little, Brown, and Co.
- Peck, M.S. (1983). *People of the Lie: The hope for healing human evil*. New York: Simon and Schuster.
- Peters, E. (1989). *Inquisition*. Berkeley: University of California Press.
- Putnam, F. (1989). *Diagnosis and treatment of multiple personality disorder*. New York: The Guilford Press.
- Robbins, R.H. (1959). *The encyclopedia of witchcraft and demonology*. New York: Crown.
- Rodewyck, A. (1975). *Possessed by Satan*. Garden City, New York: Doubleday.
- Rogo, D.S. (1982). *Miracles: A parascientific inquiry into wondrous phenomena*. New York: Dial Press.
- Rosen, G. (1968). *Madness in society*. New York: Harper Torchbooks.
- Russell, J.B. (1972). *Witchcraft in the Middle Ages*. Ithaca: Cornell University Press.

- Russell, J.B. (1981). *Satan: The early Christian tradition*. Ithaca, New York: Cornell University Press.
- Russell, J.B. (1988). *The prince of darkness: Radical evil and the power of good in history*. Ithaca, New York: Cornell University Press.
- Saxena, S., & Prasad, K.V.S.R. (1989). DSM-III subclassification of dissociative disorders applied to psychiatric outpatients in India. *American Journal of Psychiatry*, 146, 261-262.
- Scot, R. (1972). *The discoverie of witchcraft*. New York: Dover.
- Shumaker, W. (1972). *The occult sciences in the Renaissance*. Los Angeles: University of California Press.
- Sigerist, H.E. (Ed.) (1941). *Four treatises of Theophrastus von Hohenheim called Paracelsus*. Baltimore: Johns Hopkins Press.
- Simons, R.C., & Hughes, C.C. (Eds.) (1985). *The culture-bound syndromes: Folk illnesses of psychiatric and anthropological interest*. Dordrecht, The Netherlands: D. Reidel.
- Spencer, P. (1965). *The Samburu, a study of gerontology in a nomadic tribe*. London: Routledge and Kegan Paul.
- Starkey, M.L. (1969). *The Devil in Massachusetts*. Garden City, New York: Anchor Books.
- Summers, M. (1956). *The history of witchcraft and demonology*. Secaucus, New Jersey: University Books.
- Takahashi Y. (1990). Is multiple personality disorder really rare in Japan? *DISSOCIATION*, 3 (2), 57-59.
- Teja, J.S., Khanna, B.C., & Subramanyam, T.S. (1970). Possession states in Indian patients. *Indian Journal of Psychiatry*, 12, 71-78.
- Temkin, O. (1945). *The falling sickness: A history of epilepsy from the Greeks to the beginnings of modern neurology*. Baltimore: Johns Hopkins University Press.
- Thomas, K. (1971). *Religion and the decline of magic*. New York: Scribner's.
- Thurston, H. (1952). *The physician phenomena of mysticism*. Chicago: H. Regnery Company.
- Torrey, E.F. (1986). *Witchdoctors and psychiatrists: The common roots of psychotherapy and its future*. Northvale, New Jersey: Jason Aronson.
- Trethowan, W.H. (1976). Exorcism: A psychiatric viewpoint. *Journal of Medical Ethics*, 2, 127-137.
- Trevor-Roper, H.R. (1956). *The European witch-craze of the sixteenth and seventeenth centuries and other essays*. New York: Harper and Row.
- Varma, V.K., Bouri, M., & Wig, N.N. (1981). Multiple personality in India: Comparison with hysterical possession state. *American Journal of Psychotherapy*, 35, 113-120.
- Varma, L.P., Srivastava, D.K., & Sahay, R.N. (1970). Possession syndrome. *Indian Journal of Psychiatry*, 12, 58-69.
- Vogel, C. (1935). *Begone Satan!* Collegeville, Minnesota: Celestine Kapsner, St. John's Abbey.
- Walker, D.P. (1958). *Spiritual and demonic magic from Ficino to Campanella*. London: Warburg Institute, University of London.
- Walker, D.P. (1981). *Unclean spirits: Possession and exorcism in France and England in the late sixteenth and early seventeenth centuries*. Philadelphia: University of Pennsylvania Press.
- Walker, A.M. & Dickerman, E.H. (1991). "A woman under the influence": A case of alleged possession in sixteenth-century France. *Sixteenth Century Journal*, 22, 535-556.
- Ward, C. (1980). Spirit possession and mental health: A psychoanthropological perspective. *Human relations*, 33(3), 149-163.
- Ward, C. & Beaubrun, M.H. (1981). Spirit possession and neuroticism in a West Indian Pentecostal community. *British Journal of Clinical Psychology*, 20, 295-296.
- Weinberg, S. (1992). *Dreams a final theory*. New York: Pantheon Books.
- Whisson, M.G. (1964). Some aspects of functional disorders among the Kenya Luo. In A. Kiev (Ed.), *Magic, faith, and healing up* (pp. 283-304). London: Collier.
- White, A.D. (1955). *A history of the warfare of science with theology*. New York: George Braziller.
- Wijesinghe, C.P., Dissanayake, S.A.W., & Mendis, N. (1976). Possession trance in a semi-urban community in Sri Lanka. *Australian and New Zealand Journal of Psychiatry*, 10, 135-139.
- Wittgenstein, L. (1953). *Philosophical investigations*. London: Macmillan.
- Yap, P.M. (1960). Classification of culture-bound reactive syndromes. *Australian and New Zealand Journal of Psychiatry*, 3, 172-179.
- Yates, F. (1964). *Giordano Bruno and the hermetic tradition*. London: Routledge and Kegan Paul.
- Yates, F. (1979). *The occult philosophy in the Elizabethan age*. London: Routledge and Kegan Paul.
- Zilboorg, G. (1935). *The medical man and the witch during the Renaissance*. Baltimore: The Johns Hopkins University Press.
- Zilboorg, G., & Henry, A. (1941). *A history of medical psychology*. New York: W.W. Norton.