Psychotherapeutic Elements in Shamanistic Healing in the Context of Himalayan Traditions

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Introduction

Anthropology and psychiatry have been interested in the phenomenon of shamanism and its impact on the patients from the very early time. A large number of studies have also confirmed the similarity in the task of a shaman and that of a psychiatrist, especially, in the realm of psychotherapy. The shamanism itself has been a subject of much debate and there have also been attempts at separating shaman from healer, medium and other type of folk practitioners. The use of term shaman was initially made in identifying the hunter-gatherers who are believed to make shamanistic journeys to the dreamland by drug or non-drug means. The nature of shaman is believed to have changed in the later horticulturist, pastoralist and agriculturist societies. It is felt that although the later versions of the shamanism entail complexities in the role and ethos, there is continuity in the basic structure and function of the shaman. The capability to experience contact with the culturally postulated supernatural world is primary to the phenomenon of shamanism. The shamans are gifted and powerful members of the society. The selection of shaman may vary from society to society, the range being from inherent qualities to divine selection. Thus, not everybody in the society will become a shaman.

Who is a Shaman?

In a plethora of research works on the shamans, one thing that distinguishes them apart is their ability to transform themselves into an altered state of consciousness. The shamans invariably are viewed by lay people as gifted individuals who have mastered the art of adorcism. In contrast to exorcism which entails expelling intrusive spirit, adorcism involves accommodation and establishment of spirits in the body. The altered state of consciousness of the shamans which is caused due to adorcism in itself has been categorized altogether differently as “phenomenologically distinct from other known ASCs such as rapid eye movement (REM), sleep state, meditative state, and certain drug induced states”. This ability of shamans to get into trance coupled with voluntarism can be identified as the diagnostic marker of shamanism. Thus shamans are individuals who have the capacities of getting into trance at will. Here, trance is the shamanistic state of consciousness, a state wherein the shaman exhibits physical movements (shaking of body, head, hands, etc.), speech transformation and often communication with the culturally postulated divine powers. Furthermore, the trance state of the shaman is marked by sharp lucidity and spontaneous imagery.

In a definition given by Harner, a shaman is defined as “a man or a woman who enters an altered state of consciousness – at will – to contact and utilize an ordinary hidden reality in order to acquire knowledge, power, and to help other persons”. This definition though identifies the phenomena of trance and voluntarism, is little short on the function of the shaman. The fact that the shamans, while in trance state, are considered as functioning to mediate between the culturally-postulated divine powers and the human beings, in order to negotiate the lifestyle, behaviour and deeds of their clients is another important characteristic feature of shamanism. The negotiation skills of shamans in matters of social importance are recognized as sociopsy, in locating the origin of problem in the social fabric of the clients and suggesting alternative lifestyle and interpersonal behaviour; and finally enveloping it all in the framework of divine rule and order makes the shamans extraordinary psychotherapists.
The shamans perform multiple roles, the primary role being that of diviner, counselor and therapist. They make use of and manipulate the cultural codes, metaphors and symbols in their interaction with their clients. The diviner’s role is primarily used in locating and contextualizing the problem. The shaman may ‘see through’ or use mechanical means such as throwing of grains and looking into seeds and myriad other means in arriving at divination of the problem. The divination itself may be inductive, that is, retrospective; intuitive, that is, foretelling and interpretative, that is, between inductive and intuitive. Whatever may be the nature of divination, it is always a performance wherein the shaman and client in addition to the significant others follow the culturally prescribed norms and codes of behaviour, in interactions, arguments and negotiations, and while doing so they together employ culturally known symbols, metaphors and codes making their communication a symbolic communication. The healing nature of this symbolic communication has been extensively studied in anthropological researches.

Himalayan Shamanism

The Himalayan shamanism is distinct in the sense that it exists in the form of localized cults cross cutting social groups. The Himalayan shamanism as a healing tradition exists with all the caste groups as well as across gender unlike other healing traditions which are generally restricted to gender and castes. The shamans themselves vary greatly. As representatives of the culturally postulated benevolent divine spirits, there appears hierarchy among shamans; there are thus higher divine spirits and not so high ones. Furthermore, the higher spirits choose the higher castes as their representatives while the lower spirits choosing the lower castes, though with some exceptions. The world of shamans can be further separated on the basis of whether they are regular, occasional or rare. While the regular ones who sit for trance at least once a week are few (between 1 to 2 percent), the total share of shamans in all categories will be quite large.

The shamans have been compared to psychotherapists as they attend to the cases of sickness, many of which exhibit behavioural disturbances. The people in Himalayan areas, who do not generally have access to trained psychiatrists, especially in rural areas, throng to shamans for help. The popular impression which comes out through print and electronic media is critical and skeptical of the practice of the shaman in matters concerning behavioural disturbances. The question mark does exist as there has never been any systematic study of the therapeutic potentials of the shamans. But if we leave the patients of the shamans for a while and concentrate on shamans per se, some interesting facts come to our notice. The main focus of my paper is on the shamans and their state rather than their patients.

Shamanhood in Himalayas is not hereditary but based on the principles of divine selection. The Indian part of Himalayas, which includes the states of Jammu and Kashmir, Himachal Pradesh and Uttarakhand, witnesses widespread tradition of shamanism. The shamans are believed to be mediums of the divinities. The population of divinity, in itself is hierarchical and diverse. A plethora of divinities are believed to exist supervising the conduct and activities of human beings. Thus, there are superior divinities as well as inferior divinities, but all of them are considered to be powerful and above human level of existence. The male divinities are referred to as devta and the female ones as devi. Besides, there are attendant gods and goddesses known as beers and peers.

All these divinities are basically believed to be benevolent, and if regularly remembered and propitiated bring good fortune and prosperity to the human subjects. In their urge to keep constant communication with the mortal human beings, it is believed that the divinities search suitable ‘bodies’ that will represent them and communicate with the people on their behalf. Thus, one of the explanations for the behavioral disturbances of psychopathological nature is that the person might be the one selected by the divinities to represent them. However, selection by divinities is not the only reason assigned to the cases of behavioral disturbances. There is a belief in the nefarious and obnoxious supernatural forces, like ghosts, demon, witches, evil eye and sundry others. These unwanted supernatural forces believed to look for possible victims and enter their bodies. The therapeutic actions for both categories of supernatural are different. The divinities are to be pleased and pampered but the evil supernatural forces are to be thrown out of the body by ritualistic actions.

When we are referring to the psychopathologies
believed to be caused by the divinities who have chosen a novice shaman to represent them, we are referring to bawal – the state of behavioural disturbances under which a person loses control over his/her words and actions. There are actually no well known diagnostic markers for the bawal state of behavioural disturbances. It is only when such a person makes a visit to the shaman that he is diagnosed as suffering from bawal. Once a bawal person falls under the category of novice shaman or noitor, the symptoms of behavioural disturbance to him/her are explained quite differently than for a person who is psychopathologically abnormal. A psychopathologically abnormal person is referred to a Jhalui but bawal is not such a state. Bawal is not regarded as an abnormal state; it is more like a warning or punishment meted out to a novice by the divinity who wants to make his/her body its abode. The person undergoing bawal state is referred to as a noitor; who becomes a bochwan - full-fledged shaman after completing the tenure of apprenticeship. The gap between noitor and bochwan is considerable, between two to three years. Noitor is a person who has no control over his/her speech. In the local parlance such a person is referred to as one whose ‘tongue has not opened’ (bhak nahi khulna). The bochwan, on the contrary, is the one whose ‘tongue has opened’ (bhak khulna). But what happens between a person shows up signs of a shaman and then actually becomes a shaman is not only the control of speech, although speech control is the dominant element in the art and craft of a shaman. The total lifestyle of a novice shaman undergoes drastic change.

Irrespective of the caste status, the person identified as a possible shaman has to phenomenally change his/her lifestyle to a pious and holy person since he/she has now come under the guarding shadow of the divine powers. Some of the codes of conduct applicable to a novice shaman are as under:

1. Do not plough.
2. Do not share tobacco pipe with others.
3. Do not abuse or use abuses in conversation.
4. Do not take stale meal.
5. Take bath before a meal.
7. Stop eating meal if someone utters of cow or nightsoil.
8. Eat only higher category of meat like ram and goat and not lower category of meat like sheep, pig, chicken, etc.

The observance of the above mentioned rule is quite strict and the purpose of such rules is the recognition of the fact the noitor has now come under the direct shadow of the divinities. The behavioural disturbances as well as the physical symptoms that the novice shows get a logical explanation under the cultural framework. The cultural logic is that being a novice, the noitor often forgets to follow the rules and as a consequence, he/she faces the divine retribution in the form of various physical and mental disturbances. Thus, the physical and psychological symptoms that a novice may be experiencing under bawal would be systematically reported to the master shaman, who himself/herself has passed through this phase. Being someone special, as chosen by the divine powers themselves, makes a noitor worthy and important to the family members, who start taking special care of such a person, as his/her success would bring prestige to the family.

**Shaman as patient**

Let us forget for a moment, the assumed status of the noitor and look at him as a psychologically disturbed person. As a designated bawal, he/she would show varied symptoms, not necessarily following any pattern or sequence. Every time, he/she will show dis-ease, the master shaman would be consulted and he/she will divine the cause of the trouble and give advice. The shaman would acquaint the noitor with the pathways of becoming a shaman. In fact, not only the noitor but his/her entire family comes under the ambit of counseling by the master shaman. What the novice gets in return; constant counseling and advice from experienced shamans who have themselves faced the bawal and have successfully come out of it; and from the therapy management group, which includes their family and friends, they get commitment and constant support.

The entire package, in cases of psychological problem of non-organic nature, can be visualized as cultural specific psychotherapy. Once the novice comes out of the bawal state, he/she becomes a legitimate shaman and gets entrenched in the local cult. As a shaman, his non-normal behaviour gets routinized as the idiosyncrasy of the divinity represented by him/her. The end result is almost perfect rehabilitation of a psychologically disturbed person in the society.
There are thousands of shamans in the Himalayan region, all have undergone the bawal and are now well integrated in the society. The people in this region emphasize the fact that their area is the abode of the divinities and as a result they call it as devbhumi – the land of gods. The gods, themselves are the archetype personalities, males, females, children, agriculturists, cattle grazers, flutists, even Muslims. The plethora of divinities is culturally developed in relation to the needs and requirements of the people and shamanism is one area where the psychologically disturbed people get therapeutic help and rehabilitation. There is thus a need to systematically examine the psychotherapeutic potential in the shamanism of the Himalayas and identify the significant elements. Psychotherapy is a science as well as an art\(^{19,21-24}\). The Himalayan shamanism has the potentials to contribute to both of these areas.

References