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**Possessed woman from the Dominican Republic**



INSTITUTE FOR THE HISTORY OF MEDICINE, MEDICAL UNIVERSITY OF VIENNA  
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# Frontispiece

Young woman from the Dominican Republic possessed by a spirit. She wears yellow ritual clothes which represent the colour of the spirit Anaísa. These clothes were put on after the “rising of Anaísa in her head”. The expression of her face and voice are totally changed. (Photograph: Yvonne Schaffler)

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# Medicinal Plants of the Bible

Zohara Yaniv

## Historical Notes

The gathering of medicinal plants is one of the oldest branches of the medical profession. At first there was no distinction between the gathering of plants for food and collecting them for medicinal needs. However, man has always suffered from various diseases and disabilities, and through trial and error, has unraveled the medicinal value of plants. In ancient cultures, as well as in indigenous societies of our own time, the shamans, or medicine men, have combined their practical experience with knowledge of witchcraft and various mystical ceremonies, through which they are claimed to have contact with the world of powerful spirits. In this way they were able to cure diseases and injuries and help the people who need them.

## Historical Findings

Archaeological findings at an ancient burial site in Iraq point out the use of several plants that still serve in folk medicine today, some of which are: yarrow, marshmallow, hyacinth, groundsel, thistle and ephedra.

In ancient Babylon medical practice was in the hands of priests. Evidence of the use of medicinal herbs has been found there in many archaeological excavations. Clay tablets bearing medical prescriptions were found in many Sumerian and Babylonian sites. In the collection of laws of Hamurabi, king of Babylon in 1728 B.C., we find evidence of the use of medicinal plants such as cassia, henbane, liquorice, and mint, which continue to be used in folk medicine to the present day. About 400 Assyrian remedies derived from plant and mineral sources are known today. The Assyrians knew of the narcotic properties of the poppy and of the medicinal qualities of mandrake.

Medical prescriptions written on Egyptian papyri have been found to include the various ingredients and their quantities. Ancient Egyptian medicine excelled in its empirical-rational approach, as part of the general

Egyptian frame of mind. The oldest medical document known is the papyrus of Ebers. It dates back to the 16<sup>th</sup> century BC and remained buried until its discovery during the 19<sup>th</sup> century AD, in Luxor, Egypt. It contains 877 prescriptions and remedies based on many plants known in the Mediterranean area.

We have only indirect evidence of the medicinal use of plants during the biblical period. Plants are described in the religious preparation and use of the holy ointment and the burning mix for incense to be used in temples. These include labdanum, tragacanth, myrrh and frankincense. Some poisonous plants are mentioned in the Bible: hemlock, wormwood and bitter gourd. Herbs and spices for culinary use are described: garlic, onion, cumin, hyssop and fennel. And of course perfumes, which were used both for religious and secular purposes such as described in the Song of Songs.

References to medicinal uses of plants in the Bible are usually episodic, with no discussion on the subject as such. For instance, the prophet Jeremiah mentions in three places the use of balm in the treatment of sores (Jeremiah, 8, 22; 46, 11; 51, 8). Various sources indicate that he was referring to resin obtained from styrax. It is assumed that the lack of sustained attention to medicinal plants in the Bible stems from the belief that only the will of God cures mankind of its illnesses. Man should pray to God for health.

In contrast with the Bible, many more medicinal plants are mentioned in the Mishnah (3<sup>rd</sup> century) and the Talmud (5th-8th century). During the Talmudic period the people of Israel had their own tradition of folk medicine, it was rich and inspired by their own tradition and by their neighboring peoples.

Mandragora officinalis was chosen to be presented here as a plant which was very important in biblical times and is still an important medicinal plant – but much less than in the past.

## **Mandragora officinalis. Mandrake.**

Mandrake is a low-growing perennial plant with large, creased, green leaves which appear at the beginning of winter and form a rosette near the base of the stem. In early spring the dark purple flowers appear at the center of the rosette and at the end of summer orange-yellow fruits appear; they are about the size of plums and have a strong scent (Fig. 1, Fig. 2).



Fig. 1: Mandragora (photograph: Ruth Kutalek)

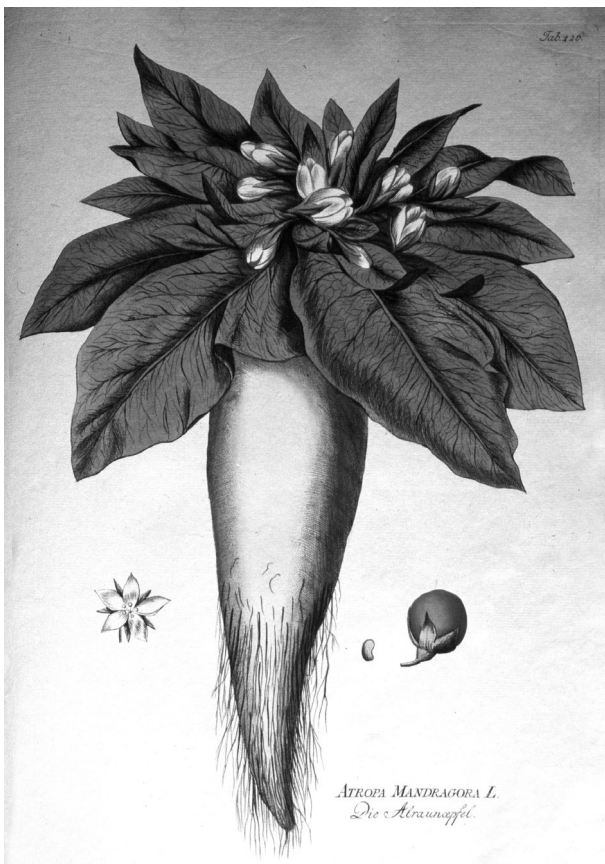


Fig. 2: “Atropa mandragora” from: Joseph Jakob Plenck: Icones ... Vienna 1789, Institute for the History of Medicine

The mandrake is one of the best known plants in ancient folklore and has a reputation as a fertility drug all over the Middle East and Europe, in both medicine and witchcraft. In the Bible it is written: ...“and Reuben went in the days of the wheat harvest and found mandrakes in the field, and brought them unto his mother Leah. Then Rachel said unto Leah, ‘Give me, I pray thee, of thy son’s mandrakes.’” (Genesis, 30, 14), and in the Song of Solomon (7, 13) it is written: “The mandrake gave a smell ...”

The plant has many nicknames in various languages: in Arabic it is called “Satan apple”, “the Devil’s eggs” and “madman’s apple”; in Persian, “dog’s digging”, “lighting root” and “hero’s face”. In ancient Greece the mandrake was known as “Circe’s plant”, named after the witch who brewed the potion which was to turn Odysseus sailors into pigs. The name “mandrake” derives from the Greek “mandragora”, meaning “harmful to cattle”.

## **Folk Medicine**

The Assyrians and the Ancient Greeks knew of the mandrake’s healing powers. Dioscorides, the Sicilian physician of the 1<sup>st</sup> century, presented the first description of anesthesia for an operation by means of a drink prepared by soaking mandrake root in wine. For generations

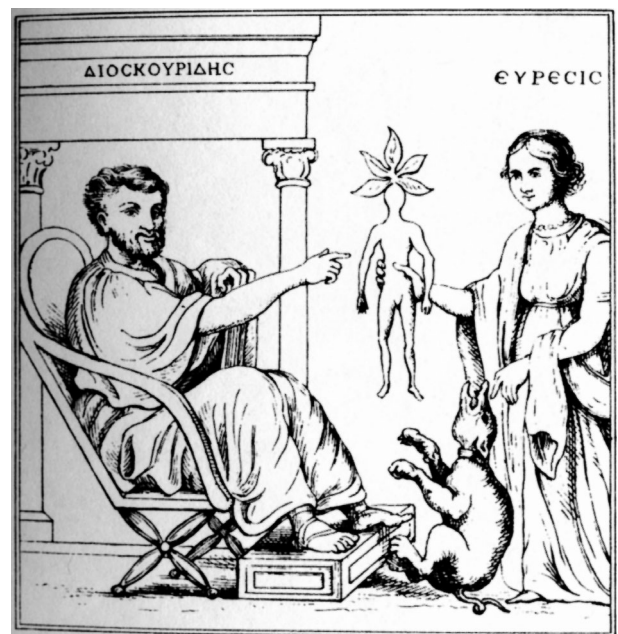


Fig. 3: Dioscurides receives Mandragora from Heuresis, goddess of discovery (Commentarium de Augustissima Bibliotheca Caesarea Vindobonesis, from Hans Biedermann Medicina magica 1972)



to come, this would be recommended as a soporific, tranquillizing and pain-suppressing drug, both as a treatment by itself and preceding painful medical procedures (Fig. 3).

Mandrake gained a reputation all over Europe and the Middle East as a love and fertility potion. It was customary to make carvings, bracelets and necklaces from the roots. Infertile women, believing in the plant's powers, would hold and wear them. During the Middle Ages the root was very rare and expensive, considered worth its weight in gold. It was believed that anyone who uprooted a mandrake would be cursed and suffer punishment. To avoid this curse, a hungry dog would be tied to the root, so that while trying to reach for food, it would do the uprooting and suffer the curse (Fig. 4).



Fig. 4: Collecting mandrake, from: Tacuinum sanitatis in Medicina (Codex Vindobonensis), fol. 22

For generations people regarded mandrake as a remedy for all cures or panacea. This represents the thinking of the Doctrine of Signatures: the root's shape, resembling the human body, was considered an indication of its quality as a cure for all the parts of the body.

Jewish folk medicine of the Middle Ages believed in the power of the mandrake to cure diseases inflicted by Satan and other forces of evil, diseases such as epilepsy and loss of memory. According to this believe, the plant

gave protection to those who carried it against any attack, theft or murder. It was also used in those days to treat ulcers, infections and sores and as a disinfectant and analgesic material.

Among the Arabs, the mandrake is known as a poisonous plant and in fact, it is highly toxic. Large quantities of an extract from its roots can cause blindness, loss of consciousness, retarded breathing and, finally, death. The fruits too, are not to be eaten (except for a short period when they are ripe). Even cattle, sheep and goats avoid them. In spite of all this, the fruits of the mandrake are eaten heartily by farm workers and shepherds during the harvest season. Eating the ripe fruits a few hours before love-making is thought to enhance a man's virility and to cure infertility in women (Fig. 5+6).

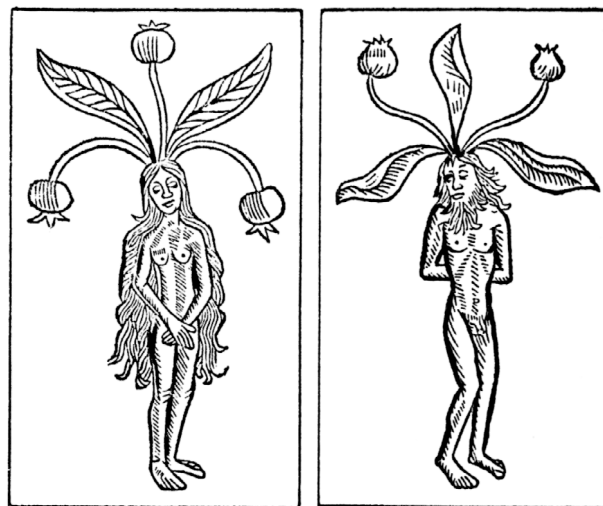


Fig. 5+6: "Female" and "male" mandrake, from: Hortus sanitatis (Johannes de Cuba, 1498)

### Modern Medicinal Uses

The mandrake root contains alkaloids, among which are scopolamine, hyoscyne and atropine. These substances affect the relaxation of smooth muscles. They dilate the pupils of the eyes and accelerate the heart activity, etc. The medicinal properties of these alkaloids are well known, used by modern medicine and usually produced from other species of the Solanaceae family, such as Datura and Hyoscyamus. Nowadays, the medicinal uses of mandrake are very limited because of its side effects, which include hallucinations and poisoning. This is in sharp contrast to its popularity during the past centuries.

# Contributions to Visual Anthropology

## Dominican Folk Catholicism – Healing Spirits Away From Tourism<sup>1</sup>

Yvonne Schaffler

The following contribution is based on a four-month-long fieldwork in the Southwest of the Dominican Republic. It is an abridgment of my master thesis which deals with possession and healing in the Dominican Republic and is meant to be a brief introduction to the local folk – healing system. The material was gathered from participant observations and qualitative interviews when I visited numerous healers between the capital Santo Domingo and an area called Elias Piña, including the towns San Christóbal, Azua and San Juan de la Maguana.

Generally the Dominican Republic is considered more as a tourist paradise than as a place for investigations on folk healing and folk religion. This is presumably the reason why there is little literature on folk medicine referring to the Dominican Republic, whereas there is plenty of material on Haiti. One can find several detailed studies on Haitian folk medicine, but nothing comparable on Dominican folk medicine. Therefore, as far as literature is concerned, I was dependent on a few essays and studies by Dominican authors (Mañon López et al. 1992, Mañon Rossi 1983, Tejeda Ortiz et al. 1993, Zaglul 1980) and a study written by Davis (1987).

During my investigations it emerged that most of the inhabitants of the Dominican Republic are not very proud of their African heritage – a fact that initially made it difficult to enter this field of research. Asking about *vodú* turned out to be problematic because the locals perceive themselves as Catholics, even though they apparently practice *vodúistic* possession rites and other *vodú*-related techniques. However, it is only the investigator who sees a contradiction in these circumstances. In the world of the locals, African and Catholic practices already merged a long time ago. Therefore I agree with Davis (1987, p. 60) to describe the Dominican folk Religion as *folk catholicism* because this



Our logo for this series: Azande children inspecting the camera of a visual anthropologist.

Photograph: Manfred Kremser

expression respects the perceptions of the locals more than the expression *vodú*.

To be able to define the medical system more clearly, it will be necessary to describe more in detail the religious system which is strongly linked to the folk medical system. Even though the Dominican religious system is different to that of Haiti, there are many aspects in common. This is because both countries have parallels in their slave history. In comparison to Haiti, Dominican folk religion, however, is less homogeneous and more distant from its African origins (Andújar 1999, 191). It has less diversity of spirits and more simplified structures, as Davis (1987, 66) maintains. The spirits called *loas* in Haitian folk religion are called *misterios* or *luases* in the Dominican Republic. They mostly appear in the form of Catholic saints and each of them has two names: an African and a Catholic one; for example Belié Belcán and St. Michael are one and the same *misterio*. The locals say that a spirit tends to have the name of a saint when it is painted, while possessing a human it bears its African name. This could mean that as long as a *misterio* is only a painting it is not considered “real” and therefore keeps the Catholic name, whereas in its physical manifestation in the body of a human, it gets the “real” African name back. Nowadays not all of the local people are aware that the second name of a *misterio* has an African origin, some people only know that a second name exists but do not remember where it came from.

God and the Virgin Mary (la Virgen de la Altagracia) play an important role in

Dominican folk Catholicism. On altars one can always find dome pictures of *misterios*, but at least one depiction of God and one of the Virgin Mary is never missing. Unlike Haitians who according to Metraux (1998, 90) interact mainly with the *loas* and not with God himself because he is too abstract, Dominicans often pray and send pleas to the Lord. The Holy Trinity is also a very popular symbol that undoubtedly comes from Cristianity and is often represented by three crosses next to each other, called *calvario* (Fig. 1). Possession of humans can only happen through “normal” misterios, such as ordinary saints (Fig. I–VI, middle page, Fig. 2). However no one can be possessed either by God, or by Virgin Mary, Jesus or the Holy Spirit.



Fig. 1: Three crosses placed next to each other represent the Holy Trinity of Father, Son and Holy Spirit.



Fig. 2: Alberto, the keeper of the *fiesta* (see figures in the middle part), possessed by the *misterio* Papá Candelo. He has prepared a hostia of beetroots and honey which he offers to his guests. The colour of Papá Candelo is mainly red, so the sacrament is red too.

Dominican folk religion is a very open system that has also integrated influences which are neither African nor Catholic, as for example the worshipping of the already extinct indigenous population. Many shrines are to be found which are dedicated to the *fuerza indígena* (indigenous power), embellished with flowers, fruits and figures of native American indigenous people. When discussing Dominican folk religion and folk medicine it is also important to mention that both are extremely inhomogeneous and vary from village to village. Different cults exist and each village has other spiritual preferences, for example, each region considers other spirits to be important.

The causes of disease vary, though they are often seen in connection with spirits. In my master thesis I used the distinction between *natural* (biomedical) and *supernatural* (spiritual) causes of disease. Now I do not use this artificial subdivision any more because spirits are not considered “unnatural” by the local people. Nevertheless, there are diseases caused by spirits and diseases which have other causes. Slight ailments, such as colds, are not considered to be caused by spirits, but more severe diseases are sometimes also not considered to have spiritual causes either. Whether a spiritual cause is given or not may be investigated through oracles or other divination methods which I will describe in more detail below. Sufferings with no spiritual cause are often treated with herbs at home or with the help of a local herbalist or biomedical doctor, whereas diseases with spiritual causes are definitely assigned to folk healers.

Witchcraft is often assumed to provoke illness, particularly if a disease appears very suddenly and / or lasts for a long time. There are various ways of practising witchcraft and they are all summarised under the term “bad influences”. According to my informants it happens, for example, when somebody hires a *brujo* (sorcerer) to send the spirit of a dead man to a person for reasons of vengeance or envy. This can cause the involuntarily possession of this person which can result in madness or serious physical illness (Esteban Deive 1996, 249 f). A kind of spirit that can make people sick is the *bacá*. A *bacá* is a created spirit that serves its owner to protect property, but it can also be sent to somebody to make him / her sick. Each



person who gets in touch with it except its owner becomes physically harmed (Esteban Deive 1996, 257 f). *Mal de ojo* (the evil eye) is especially assumed to cause illness in babies. It happens when somebody looks with envy at a child and makes compliments without including the words “God bless you”. If children become suddenly sick without a physical reason detected by a doctor or healer, *mal de ojo* is in many cases the perceived cause (Esteban Deive 1996, 256, Hauschild 1980, 243 ff). Diseases can also be caused by “dirty blood” or the rapid change between heat and cold (Laguerre 1987, 68). These ideas have obviously been inspired by the theory of humoral pathology which was brought to the country by European conquerers (Ackerknecht 1984, 115, Greifeld 1995, 118). Finally disease can be caused by not paying enough attention to the *misterios*. According to my informants, the *misterios* get angry when they are not taken seriously, when they do not receive enough sacrifices and especially when people do not believe in them. This leads to involuntarily possession as they want to attract attention and this possession can cause physical and mental illness (Esteban Deive 1996, 249). After diagnosing this certain cause of illness, the frequently recommended therapy is to deliberately get in touch with the *misterios* to find out how to deal with spiritual possession. An other way to calm down angry *misterios* is to go on a pilgrimage to repent one’s sins by sleeping on the floor in front of an altar.

People who have experienced displeased *misterios* often become spiritual healers themselves after they are healthy again. This phenomenon seems to parallel Eliade’s (1980, 43) concept of *shamanic disease* in which disease is the initial reason to become a shaman. Many of the healers I interviewed indicated that they first suffered from a severe physical or mental illness before they started their own career as healers. While suffering, they had spiritual encounters with certain *misterios* and were told what they had to do to recover. When they were healthy again, some were given an order by the *misterios* to cure other people, others felt that they had received the gift of healing powers. I would mainly consider people who became healers through this experience as “spiritual healers”, even though I am not able to make a proper classification among healers in general.

However there is barely one healer who can be classified only as either a herbalist or a spiritual healer. Most of them are both and often they also perform divination and help solve life and love problems. There are also some people who on the one hand work as a *curandero* (healer) while on the other practice *brujería* (witchcraft). The latter are called *brujos* (scorcerers) who work “on both hands” as Dominicans say and are considered very powerful.

To diagnose diseases healers often use oracles or other divination methods as already mentioned above. The Dominican interpretation basically is that all methods are effective because of to the helping *misterios*. One very popular method is to diagnose through possession. The healer gets possessed himself by one *misterio* and has it speak through his mouth. The *misterio* is supposed to know exactly what the is patient suffering from and whether the disease is caused by spirits or for other reasons, and is able to explain to the patient himself or to the people accompanying him/her. To invoke the *misterio*, the sound of a little bell, incense, cigar smoke and sacrifices can be used to attract it (Fig. 3). Another popular method is the use of a state of clairvoyance, *vista clara*, as the locals call it. Some healers for various reasons do not like to be possessed and prefer just to be inspired by a

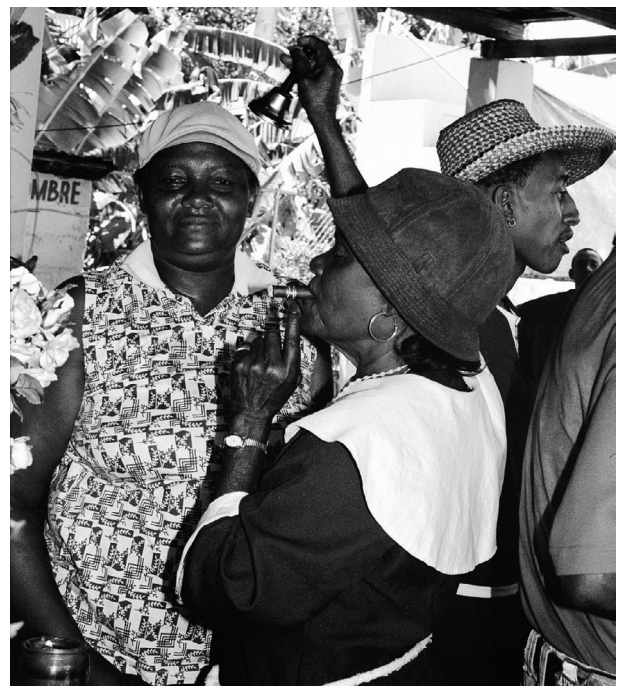


Fig. 3: A woman rings a bell and smokes a cigar to attract the *misterios*.



*misterio*. They put themselves into a slight state of trance, waiting for a divine inspiration to declare a diagnosis. Some healers say that they derive this inspiration by the *misterios*, some claim that God himself inspires them. Not only can the causes of a disease be diagnosed with the help of these methods, but also proper treatment can be investigated. One informant told me, for example, that she tells fortunes by predicting folk medical remedies or biomedical medicine to use to cure her patients. Other methods of divination are reading cards or reading coffee grounds. The latter can be done by using a cup of coffee which is nearly empty but still contains some coffee grounds. Therefore the cup is turned upside down and the coffee dried above an open fire. The dried coffee grounds can now be interpreted. Also a glass full of water with a burning candle behind it can serve as divination (Fig. 4). Objects used to prophesize such as cards, coffee cups or water glasses are considered to function as aids that create links between the people and the *misterios*.



Fig. 4: A healer performs divination by watching a candle.

No matter whether a disease is caused by “bad influences” or not, a person is mostly treated in two different ways (Prinz 1993). On the one hand, symptoms must be controlled (which can be done through herbs or biomedical remedies) and on the other hand, God and the *misterios* have to be called and asked for assistance. Even healers who actually prefer to treat their patients with herbs instead of faith-healing methods own an altar and do not miss spiritual services. *Ensalmar* (praying for health) for example is a frequently used remedy. People often resort to classical prayers as for example the Ave Maria or the Lord’s Prayer, but also

prayers for certain diseases (Esteban Deive 1996, 331 ff). Some healers find it useful to transmit messages and wishes to the *misterios* to gain their assistance. Therefore they write a wish on a sheet of paper and put this paper inside or under a magical object, such as candles, figures of Saints and so-called lightning stones or magnets.

Illness caused by a bad spirit sent by some enemy is called *engaño* (Fig. 5). Exorcism in the case of involuntarily possession by the spirit of a dead man can be done through transmitting the sick-making spirit into another living



Fig. 5: Bottles bought or “rent” in Haiti, containing Haitian spirits. Many Dominicans think that Haitian spirits are more powerful than Dominican *misterios*. The black bottle in the middle contains the Haitian spirit “Papá Bosou Tres Cachos” – Papá Bosou with three horns. These spirits can be used for different purposes.

creature like a chicken. For this purpose, a certain group of *misterios* is invoked: the *fuerza guédé* which is associated with death. The chief of this group is called San Elías or “Barón del Cementerio” (Baron of the cemetery) and is supposed to live at the cemetery. With his help evil spirits can be sent but also be removed as well. Another technique to get rid of an evil spirit is to use a specially prepared bottle which has a kind of a trap inside. The patient has to spit into the bottle about seven times, thereby capturing the bad spirit (Fig. 6).

Applications for protection against “bad influences” are called *resguardos* and can be used separately or combined with other techniques. *Resguardos* can be applied either to prevent illness or, when a person is already sick, to support the effect of other remedies. A very common method of a *resguardo* is the use of a *baño* (bath), a mixture of chemical or



Fig. 6: Bottle to trap spirits.

herbal ingredients which is used on three consecutive days to wash one's body. *Baños* can be applied in different ways, such as attracting positive attributes (luck, love or health ...) or preventing somebody from receiving negative influences (bad luck, disease or black magic ...). The applied liquids are considered to have magical powers and are treated with respect. Also bathing in sacred springs or rivers is considered as salutary. Other *resguardos*, for example, are amulets which contain images of Saints or "magical weapons", such as shark or crocodile teeth. *Resguardos* can also be swallowed: one writes a plea and some magical formulas on a sheet of paper, burns it and swallows the ashes with sugar and water.

My impression of Dominican folk healers is that each one of them has a very individual manner of treating his/her patients. The processes in which patients are treated are not always the same and often follow the intuition of the healer. If a patient decides to go to a healer, this decision is mostly not made because of mistrust against biomedicine; the patient just wants to be sure, that not only the symptoms of a disease

are treated but also the cause. Many diseases are not considered to be "diseases for a Doctor", which does not exclude biomedical treatment, but demands for the treatment by a folk healer. The healer is a person who understands the beliefs of the population and who knows how to deal with "bad influences". A Doctor, on the other hand considers these beliefs as antiquated and underdeveloped. I truly experienced Dominican folk healers as very open and willing to give me information on their spiritual and medical beliefs. I admire their flexibility of incorporating new influences into their traditional system and I look forward to another four-month field trip to deepen my knowledge about their work.

#### Note

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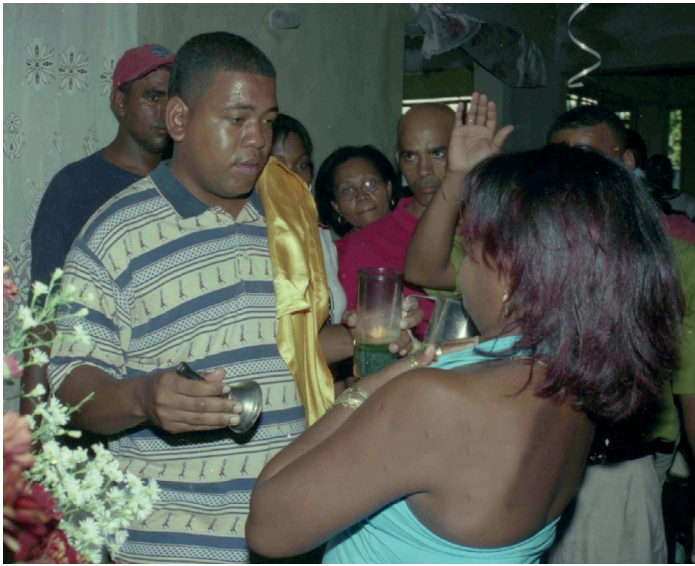


Fig. I: During a *fiesta* for the *misterio* Papá Candelo a young woman feels that the *misterio* Anaísa is “rising” in her head. The man brings ritual cloths in Anaísas colour and rings the bell to intensify the “rising of the spirit”.



Fig. III: The young woman now has fully turned into Anaísa and dances with other participants of the *fiesta*.



Fig. II: The young woman is helped into her ritual cloth.





Fig. IV: Man sacrifices beer to Anaísa.



Fig. V: Anaísa shares the sacrificed beer with other participants of the *fiesta*.



Fig. VI: Anaísa euphorically rises her arms and blesses the celebrating people.

## Book Reviews

**René Dehnhardt (2003): “Schamanismus und Schizophrenie”, Peter Lang: Frankfurt am Main, Berlin, Bern, Bruxelles, New York, Oxford, Wien.**

In essence Dehnhardt revises and interprets the wellknown classical ethnographic literature from the first half of the past century in search of symptoms of schizophrenia among the shamans of North and Central Asia. New literature on shamanism is mentioned only fragmentarily by him. His minimalistic definition of shamanism – as a *Weltbild* which acknowledges the existence of spirits and includes a belief in three layers of the world, the upper world, the lower world, and the middle world, the latter being the domain of humans – does not justify this geographic restriction. In many aspects he remains unconvincing in his demand of a “more precise definition of shamanism” (p.17).

Dehnhardt’s work remains highly hypothetical. With alarming ease he “diagnoses” typical symptoms of schizophrenia from classica of ethnographic descriptions of shamanistic behaviour. After that he compares theses “symptoms” with those of people from the modern Western world, who are not having psychiatric treatment. He seems to believe that he can thereby escape evaluation of the totality of all the components of a psychiatric diagnosis of schizophrenia. The tactic of explicitly sparing all elements of the sociological part of the current definition of schizophrenia (p. 20, 31, 33) enables him to construct parallels with isolated elements of shamanism without considering their historical context within the classic ethnographic accounts.

Dehnhardt makes the reader impatient where he maneuvers through the concepts of psychosis and illness, when he wants to avoid stigmatizing schizophrenic psychosis as an illness (p. 11). Impatience is increased, where he tries to defend Devereux’s concept of the “diseased society” (p. 18), i.e. cultures, which produce and sustain shamanism. Many more passages of the text seem rather strange, among others, the statement that “admiration of the ability of play-acting (*Darstellungsfähigkeiten*) of a schizophrenic” (of a shaman?) is not suitable. Why? Because “he lacks insight into the matter of style” (p. 80)! This statement stays without the slightest hint at the worldwide spread of theatrical training as an element of foremost importance in the training of the shamanistic arts of healing. After this, the reader is not surprised anymore to read that the ability to induce a process of self-healing is not a noteworthy ability (p. 83) at all. Dehnhardt is of course also not interested in the subtle distinction between self-healing and “the induction of a process of self-healing” by a shaman. The reader is at this point not unwilling to put this book on the shelf of “scientific holy water”.

Dehnhardt then mentions briefly telepathy and sudden mastery of foreign languages by patients with schizophrenic symptoms of the Western hemisphere (e.g. p. 85), which raises some interest. In his treatment of the abilities of shamans he has to explicitly avoid the question of reality or irreality of the shaman’s visions / hallucinations of patients and shamans (p. 11), to compensate for the concept of schizophrenia, notwithstanding his acknowledgement of the element of “fail to recognize the outer world” (p. 27) as constitutory to the definition of schizophrenia. Conclusively, telepathy by schizophrenics is disqualified as a mere “disturbance of the demarcation of the self (*Selbstabgrenzung*)” (p. 85). Similarly reduced is the handling of trance und ecstasy (p. 89) as a “narrowing down (*Einengung*) of consciousness”. Dehnhardt does not even try to differentiate between the various forms or states of trance. And he neglects the well documented successes of shamanistic seances. The worldwide practice of the clients testing the shaman’s “psychic” abilities also remains unmentioned. Everywhere in his work there is ample evidence of his lack of field experience in his field of interest.

Even if Dehnhardt in this way cannot succeed in finding credible proof for a close correlation between schizophrenia and shamanism, he may give critics of Western psychiatry some kind of inspiration when he describes successful social integration of some Western persons as healers, religious specialists or consultants, who have or had symptoms typical of schizophrenia. However, it makes one somewhat pensive to read in the introduction, that Berthold Riese, who has accepted the treatise for a degree in ethnology as a *Magisterarbeit*, is of the opinion that schizophrenia is among all illnesses one of the most

clearly defined and most well studied (p. 7). Dehnhardt instead diagnoses no satisfactory state of investigation for schizophrenia (p. 32), for which I herewith want to express my warmest thanks to him.

**Matthias Kaufmann (ed.) (2003): “Wahn und Wirklichkeit – Multiple Realitäten”. Peter Lang: Frankfurt am Main, Berlin, Bern, Bruxelles, New York, Oxford, Wien.**

The introduction of the editor gives good reason for hope. Kaufmann speaks of the incline of certainty in the field of psychiatric diseases, from the rather high certainty of the quotidian consciousness to the skepticism of the Arts and the even greater uncertainty of the Sciences (p.12). And he includes right from the start the possibility of a fundamental criticism of the possibilities of the theory of cognition (p. 11). Kaufmann defines delusion/madness (*Wahn*) as “sclerosis of aspects”, meaning the inability to use contrasting perspectives for knowing reality (p. 16). He quotes Foucault and Szaz in comparing the handling of the mentally ill with the persecution of witches during the middle ages, who try to counteract the mainstream of “scientific holy water” (p.18 f.).

The omnibus volume presents a wide spectrum of approaches to the problem of subjective realities, foremost from philosophical and cognitive viewpoint and secondly from ethnological and other viewpoints. The authors cover a very wide range of themes. Of special interest for ethnologists may be the contributions of Joerden on the judicial handling of other realities, Renzikowski’s article about crimes committed in delusion/madness (*Wahn*), Cappai on “the other reality” of the ethnologist, Schönplflug’s discussion of the cultural dependence of reality, the article on intoxication and reality by Tretter, and towards the question of the commensurability of cultural views on realities by Göller, to mention only a few. The rich bibliographical data supports one’s own further research.

Throughout the book it can be observed by the attentive reader that the contributors coming from a broad scope of fields of science are mostly defending the concept of the “at bottom undivided” reality, the most objectivity brought into the discussion perhaps by the authors interested in the juridical topics. It is up to the individual reader if she or he welcomes this or rather find it boring, since the words “multiple realities” in the title and the enthusiastic and highly differentiating foreword by the editor Matthias Kaufmann could have suggested a more open approach.

In any case this book may give the reader a whole spectrum of different thoughts and ideas to tackle the problem of other realities and inspire research in this field.

**Marianne Nürnberger**

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## **Publications of Our Department 2004**

Kutalek, Ruth; Prinz, Armin: Ethnoentomologie Afrikas. Insekten in traditioneller Therapie und Prophylaxe. (Ethnoentomology in Africa. Insects in traditional therapy and prophylactics) In: Denisia 13, 529-539.

Kutalek, Ruth; Prinz, Armin: Witchcraft and the hand of the healer. Images of distance and proximity. In: Face to Face. Connecting Distance and Proximity. 8<sup>th</sup> Biennial EASA Conference, Vienna, 286-287.

Kutalek, Ruth: Interview with John Janzen. In: Viennese Ethnomedicine Newsletter 6, 3, 30-36.

Prinz, Armin; Kutalek, Ruth: Kulturanthropologische und ethnologische Grundlagen der Medizin. In: Wittmann, Karl (Hrsg.) Der Mensch in Umwelt, Familie und Gesellschaft. Ein Lehr- und Arbeitsbuch für den ersten Studienabschnitt Medizin, 2<sup>nd</sup> edition, Facultas Verlag, Wien, 226-237.



Binder-Fritz, Christine: Interkulturelle Pflege – Interkulturelle Öffnung des Gesundheitswesens. (Intercultural care – intercultural opening of the health care system) In: Zebra Zentrum für sozialmedizinische, rechtliche und kulturelle Betreuung von Ausländern und Ausländerinnen in Österreich. Zebra Sonderheft; Dokumentation zur Tagung “Migration kann ihre Gesundheit gefährden” am 25 Juni 2004 in Graz, pp. 9-12.

Burtscher, Doris: Searching for health care after 10 years of war. The Mende and Kissi in the Kailahun District Sierra Leone. In: Viennese Ethnomedicine Newsletter 7, 1, 3-14.

Burtscher, Doris: Circumcision and initiation among the Seereer-Sin in Senegal. In: Johan J. Mattelaer: From ornamentation to mutilation. Genital decorations and cultural operations in the Male. The Historical Committee of the European Association of Urology, Arnhem, 126-129.

## **Congresses 2005**

Quito, Ecuador May 18–21, 2005, Transcultural Psychiatry Section, WPA, Quito Symposium 2005: Psychiatrists & Healers: Unwitting Partners. A Challenge for Transcultural Psychiatry in Times of Globalization. [www.runajambi.net/TPS-Meeting2005](http://www.runajambi.net/TPS-Meeting2005), General information: [TPS-Quito2005@runajambi.net](mailto:TPS-Quito2005@runajambi.net), [incayawar@runajambi.net](mailto:incayawar@runajambi.net) (Prof. Mario G. Maldonado, Director, Runajambi (Institute for the Study of Quichua Culture & Health)).

Oxford, United Kingdom, June 2–3, 2005 Non-Food as Food. 21st Conference of the International Commission on the Anthropology of Food (ICAF), [jmacclancy@brookes.ac.uk](mailto:jmacclancy@brookes.ac.uk), [hmacbeth@brookes.ac.uk](mailto:hmacbeth@brookes.ac.uk)

Palenque, Mexico July 12–15, 2005, 4th International Ethnobotany Symposion – Ethnobotany Disciplines. <http://www.phcog.org/4thSymp.pdf>

Florenz, Italy August 21–25, 2005, Society for Medicinal Plants Research (53rd Annual Congress) joint congress with Società Italiana di Fitochimica (1st Int Congress), <http://www.farmacia.unifi.it/gacongress2005.html>

Istanbul, Turkey August 21–26, 2005, Yeditepe University: 4th International Congress of Ethnobotany (ICEB 2005) Ethnobotany: At the Junction of the Continents and the Disciplines. <http://www.iceb2005.com/>

Galway, Ireland August 23–26, 2005, Galway Radisson SAS Hotel – COHAB 2005: The First International Conference on Health and Biodiversity, <http://www.cohab2005.com>

Veracruz, Mexico August 24–26, 2005. Food in Ports of the World. 22 International Meeting of the International Commission on the Anthropology of Food (ICAF), [www.uv.mx/adtusi/icafoxii\\_uv](http://www.uv.mx/adtusi/icafoxii_uv). Ricardo Avila: [dhombre@csh.udg.mx](mailto:dhombre@csh.udg.mx), Martin Tena [mtena@cucba.udg.mx](mailto:mtena@cucba.udg.mx)

Kassel, Germany October 21–23, 2005, 18th Conference Ethnomedicine, [www.agem-ethnomedizin.de](http://www.agem-ethnomedizin.de)

Kilifi, Kenya December 4–9, 2005, Locating the Field: The Ethnography of Medical Research in Africa. Please send inquiries and abstracts to: [trials-ethnography@lshtm.ac.uk](mailto:trials-ethnography@lshtm.ac.uk) (Catherine Molyneux & P. Wenzel Geissler) Call for Paper as pdf: <http://www.agem-ethnomedizin.de/download/5.Kilifi-Kenya-Callforpapers.pdf>

Seili, Finland March 16–18, 2006, 4th Biennial Conference of the European Network of Medical Anthropology at Home, see: [http://www.agem-ethnomedizin.de/download/doc3\\_Seili-Finland-2006.pdf](http://www.agem-ethnomedizin.de/download/doc3_Seili-Finland-2006.pdf)



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## **Contributing Authors**



Yvonne Schaffler has studied social and cultural anthropology in Vienna; she is currently working on her Ph.D. thesis on folk medicine in the Dominican Republic.



Zohara Yaniv is Professor at the Volcani Centre for Plant Research, Dept. of Genetic Resources and Seed Research, Israel; in 2001 she was guestprofessor at our department (see Ven 3, 3, 2001).

## **Photograph last page**

Skulls representing spirits of dead persons. The skull on the right side has a photograph attached to it. The owner of the skull/spirit wants it to perform black magic on the depicted person.

(Photograph: Yvonne Schaffler)



Ritual scenery