Conference Report
Ethnic Health Initiative

Spirit Release and Mental Health

This well attended conference, the third in the series on spirit release run by the Ethnic Health Initiative, was held at Oxford House, in Bethnal Green, West London.

Introduction

Dr Sashi Sashidharan, a Consultant Psychiatrist from an independent practice, introduced the conference. He highlighted the different ways that a spirit could take possession of the body from a slight influence to a complete take over, where the client afterwards had no memory on what had happened. He confirmed that not all possession is negative but can have sometimes a positive benefit can occur that helps individuals deal with trauma. He did recognise that malign entities can cause considerable distress. Dr Sashidharan then spoke about a study in Mozambique, carried out by a team of medical anthropologists, which showed that 18.6% of the study group had had some experience of possession and 5.6% had had multiple experiences. This study suggested that there was a relationship between these figures and post-traumatic stress disorders within the community.

In Western medicine individuals displaying symptoms of spirit possession are usually diagnosed as schizophrenic but this is often not helpful and can tend to marginalise those with non-western perceptions. Dr Sashidharan then referred to the book "Crazy Like Us: The Globalisation of the American Psyche" by Ethan Watters, which showed how the American conception of mental health, together with the drug companies drive to use psycho-pharmaceuticals, had bulldozed through traditional systems of health and healing, causing enormous issues and problems. In this context trying to understand 'spirit possession' has become problematic because the real causes of this experience are not addressed or understood. Finally Dr Sashidharan, stressed one of the themes that ran through the day of 'humility' in trying to relate to what is happening to individual clients.

The Anthropology of Spirit Possession

The next speaker, Professor Simon Dean, a consultant psychiatrist in Essex, UK, specialising in rehabilitation and liaison psychiatry, drew upon some of his cases where spirit possession might be an explanation. He mentioned a particular case of a boy called Peter, who had dabbled with the Ouija Board at a party and then ended up become paranoid believing that his every move was controlled by a demon. In his case, the only approach that seemed to help was the use of anti-psychotic drugs, as traditional methods had failed to remove the spirit. He mentioned a study from Madagascar which showed that community leaders frequently communicated with spirits for the well-being of their people and that 73% of the individuals believed in spirit possession. Within this culture rationality and scientific knowledge had not changed their view about the important role of 'spirits'. Professor Dean, who also spoke at last year’s conference, referred to the book "Summoning the Spirits: Possession and Invocation in Contemporary Religion" by Andrew Dawson, which drew upon these perceived positive themes of spirit communication.

Professor Dean then went on to underline one of the interesting elements that has come forward from cognitive psychology that perceives a dual mind process within the psyche, generally referred to as 'Dual Process Theory', where both cognitive and associative elements work together to give meaning to reality. It is possible, within this theory, for mind and body to be conceived as two
separate but related elements, implying that we are all innate dualists. He suggested that many psychologists see spirit possession as a way of dealing with stress, particularly with marginalised people, where, ‘spirits’ speaking through the individual could articulate messages from the psyche that would not be acceptable in normal circumstances. Professor Dean went onto relay some type of spirit possession, which included:

- **Enstatic** - where a spirit entered from without
- **Ecstatic** - where an individual journeys to meet the spirits
- **Voluntary** - where there is agreed connection
- **Involuntary** - where a spirit enters uninvited
- **Unconscious** - where there is no memory after the event
- **Conscious** - where there is partial memory after the event
- **Positive** - uplifting feelings after the communication
- **Negative** - where there are issues and problems
- **Gnoseological** - where some knowledge is imparted
- **Therapeutic** - where some form of healing takes place

In the final part of his talk Professor Dean drew upon a qualitative study he had conducted in the Bangladeshi community in East London in 2008. The study entitled ‘Jinn and Misfortune in East London’ examined the perception of the role of jinn spirits as an explanation for psychological disturbances and unexplained physical symptoms. In these cases resort to traditional healers was commonplace, although with mixed results. He cited one particular ‘witch doctor’ who wanted £500 to sacrifice a sheep, as a way of clearing a malign spirit. Within this community both ‘western’ explanations as well as ‘spirit possession’ and ‘witchcraft’, were all considered as part of an understanding for the problems, often stress induced, and when one method was tried and found wanting another was attempted. The most beneficial method, outside of western medicine that helped in a number of cases was ‘prayer’ but he concluded that more studies were needed.

### Jinn and Possession

The next speaker **Dr Najat Khalifa**, a consultant forensic psychiatrist in Nottinghamshire Healthcare NHS Trust, spoke in depth about the Islamic concept of ‘jinn’ spirits and their perceived negative role in mental health. This can be stated as follows:

- Jinn are real creatures that form a world other than mankind or angels
- They are called jinn (Arabic word *ijtinan*: concealing) because they conceal themselves
- They have qualities like human beings, including intellect and freedom to choose between right and wrong and good and bad
- Jinn are creatures that marry, produce children, eat drink and die like other creatures
- Among jinn are believers and non-believers
- They inhabit caves, graveyards, deserted places and darkness
- Their origins are different from mankind coming from ‘smokeless flame of fire’
- Jinn have the power to take on other forms and shapes

With respect to possession by jinn:
Jinn are capable of causing physical harm and mental harm to humans, through possession. Jinn possess an individual for different reasons including revenge, love and deviating the possessed from the path of Allah. Jinn possession can cause the individual to have fits and speak incomprehensible words or a foreign language not known to them. During possess Jinn control the intellect power of the possess in such a way that the possessed is unable to think or speak from his own will or remember his previous sayings.

Dr Khalifa then went on to describe the traditional methods for removing jinn spirits, which required a full belief in both their existence as well as Allah and the knowledge of the Quran. Although working within a 'western' system Dr Khalifa stressed the need to respect the beliefs of patients without necessarily accepting all of their explanations and that by working with religious leaders help can be provided for the best interests of the patient. He stressed that 'western' medicine did not have a cure for schizophrenia and that we needed to approach these fields with humility.

In the final part of his talk Dr Khalifa drew upon a study that compared the beliefs of Muslims in Dhaka and in Leicester. Despite residing in a western society, the Leicester study group had a higher belief in jinn possession than their Dhaka equivalent and considered the most effective treatment should incorporate both religious leaders and doctors working together.

**The Perils of Being Porous:**
*A Psychological View of Spirit Possession and Non-Dogmatic Ways of Helping*

Isobel Clarke, the next speaker, approached the theme of the conference by picking up on one of the ideas presented by Professor Dean on the dualistic nature of the mind.

Clarke said that following what we know about how the brain is wired up, we all acquire knowledge through two separate but complementary systems, one involving direct sensory processing, the other a more elaborate and conceptual. Most of the time these two systems work well together but separate at high and low arousal leading to problems and possibilities. In Clarke’s model where the ‘reasonable’ and ‘emotional’ work together we have ordinary experience; where they separate radically, a state in which anomalous experiences like possession are accessible; the transliminal.

Clarke then went on to outline some of the differences between these two systems particularly under high stress or arousal, where the transliminal tends to dominate the psyche:

<table>
<thead>
<tr>
<th>The Everyday</th>
<th>The Transliminal</th>
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</thead>
<tbody>
<tr>
<td>Ordinary</td>
<td>Numinous</td>
</tr>
<tr>
<td>Clear limits</td>
<td>Loss of boundedness</td>
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<tr>
<td>Access to full memory and learning</td>
<td>Access to propositional knowledge/ memory is patchy</td>
</tr>
<tr>
<td>Precise meanings available</td>
<td>Suffused with meaning or meaningless</td>
</tr>
<tr>
<td>Separation between people</td>
<td>Self: lost in the whole or extremely important</td>
</tr>
<tr>
<td>Clear sense of self</td>
<td>Emotions: swing between extremes or absent</td>
</tr>
<tr>
<td>Emotions moderated and grounded</td>
<td>A logic of 'Both/And'</td>
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When approaching these stress situations from a therapeutic perspective it is important that clinicians validate the client's experiences and not reject them. The therapist needs to be open to all explanations including medical and CBT ones. The aim should be to help the person take control of their 'unshared reality', so closing off openness to invasion. The key steps in the process entail grounding the experience through activity and food, practising mindfulness techniques and using breath control to reduce arousal, because it is when 'arousal' is in an extreme position that problems ensue. The challenge here is to be able to normalise anomalous experience.

Spirit Possession and Healing

Anthropologist, Dr Bettina Schmidt, senior lecturer in the Study of Religions at the University of Wales, chose to focus on the positive effects of possession states. Her subtitle 'How Do Possess People Use Their Experience in a Positive Way' took the theme of the conference into ways that trance states can be used constructively for health and wellbeing. The original focus of this research was the Afro-American religions and, since 2004, how these activities operated within the Brazilian communities. The studies showed that 15-20% of Brazilians practise regularly one of the many Afro-Brazilian religions or Spiritism and a common element was the use of mediumship to facilitate communication between humans and spiritual beings. These activities often involve ritual practises that induce trance states. These activities are considered beneficial to the people who go through them, for exchanges of concept and ideas, between the human and spiritual world, give insight and meaning to health issues.

Dr Schmidt concluded by stating that religion was important to help people cope with abnormal experiences and that any interpretation of experience is embedded in cultural beliefs and moral values.

Talking With Demons:
Dialoguing with Spiritual Experience in a Mental Health Context

The final talk was given by Dr Rufus May and from the perspective of the Spirit Release Forum was perhaps the most interesting. Dr May, a clinical psychologist working in Tower Hamlets and Bradford, approached possession cases through the method of trying to help patients enter into dialogue with that which is afflicting them, in an attempt to help people make peace with the beings they hear and feel. He particularly commends this approach when other methods have not proved successful. His model of our inner world is not too dissimilar to the concepts taught within the SR Forum and is therefore open to to ideas on the role of sub-personalities and their impact on the psyche. He accepts the disowned aspects of the self and the need to begin to integrate them or bring them into conscious reality. An example of this approach, when dealing with a voice that states: 'You are worthless, you would be better off dead' would be to question the underlying message. This could be 'don't feel anymore; don't be anymore' or turned around another way 'don't go on living this life anymore, live a new life.' In these cases the voice itself may be feeling suicidal and welcome recognition that he or she is feeling overwhelmed with pain.

In this approach Dr May commends the therapist to help each aspect of the self clarify its views and give as much information as possible. The two questions that need to be asked are:

1. Who do the voice(s) represent?
2. What problem(s) to the voice(s) represent?

In this process it is important for the helper and the voice hearer to work together. Dr May recognised that these voices point to real life problems both from the past and present, which have been translated into a metaphorical language that have their origins in life challenges. The source of these conflicts can be split off feelings that are unbearable and about traumatic past experiences. This process needs to start when the client is in a condition where they can begin to engage with the source of the voice and consequently often need time to move out of a state of fear for this to begin to happen.

The dialogue approach is very similar to a normal conversation with a either a sub-personality or spirit attachment such as "Who are you?"; "Do you have a name?"; "How old are you?"; "When did you come in the life of (name of voice hearer)" and so on. The sorts of questions would be very familiar with spirit release therapists. However I did question Dr May on whether he had been able to identify or access an Inner-Self Helper or the Higher-Self and he had not sensed the importance of this aspect of the psyche.

The rationale for this approach is that:

- What we ignore persists, what we can look at disappears
- If you are not allowed to do your job you go either underground or in opposition
- A voice can develop when an aspect of the 'self' is rejected or not able to express itself
- The voice is a part of a disowned self
- The voice uses metaphoric language that can be translated to 'the job'

In conclusion Dr May considered these methods helpful particularly when other approaches had failed. The voices give indications about emotional themes that are important to the social development of the voice hearer and that by engaging in these dialogues positive benefits can be brought to the client.

**Overview of the Conference**

This was an opportunity to hear from a wide range of speakers and to network with others. My greatest disappointment, as per last year, was the lack of speakers, who had real experience in working with clients from a non-pharmacological perspective. In this category Dr May was the exception with perhaps also Isobel Clark. However neither of these two gave specific credence to the existence of spirits so the fall-back position was helping a psychological process. It was encouraging that Dr May at least acknowledged the role of sub-personalities within the psyche, which is a step in the right direction. The organiser Ahmed Qureshi, was open to this perception and appeared very willing to co-operate with the Forum in a future conference on a similar theme, where we might present a speaker who could talk from practical experience in working in these fields. Nevertheless that such a conference is being run is certainly to be commended and a chat I had with Dr Khalifa suggested that possession states, were very popular themes within medical journals at the moment.

On the Anthropomorphic front, hearing accounts about activities taking place in Brazil and elsewhere is mildly interesting but I am amazed that this type of study has not been applied closer to home. With the large numbers of spiritualist churches and other organisations like the White Eagle Lodge there is a wealth of information available about the role of spirits within the lives of many
British folk and the positive benefits that these can bring to both individuals as well as the collective. Perhaps it is safer to contemplate a tribal individual going into trance and study them, rather than consider a 'normal' Caucasian businessman doing the same thing.

Overall I was pleased to have attended and would like to thank both the organisers and the presenters for their input.

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