Making Selves and Meeting Others in Neo-Shamanic Healing

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Abstract Anthropological accounts of healing tend to draw, either explicitly or implicitly, on the notion of "symbolic" healing initially developed in Lévi-Strauss's seminal article, "The Effectiveness of Symbols." Within this framework, therapeutic efficacy is understood as the result of a transformation of meaning or the manipulation of symbols. This article seeks to challenge and refine this approach by suggesting that the transformative potential of the healing ritual may be located prior to the establishment of symbolic meaning and manipulation in the course of the healing ritual. Through an experientially specific analysis of soul retrieval, a neo-shamanic healing ritual practiced by contemporary Euro-Americans in the United States, I demonstrate that the healing process begins with, and hinges on, a successful encounter with alterity or otherness, which is established in the course of the ritual but extends beyond it. Serving as a counterweight to accounts of ritual healing that emphasize processes of meaning making as anchored in the creation of coherence, the article argues that a fuller understanding of therapeutic or healing processes must also include an appreciation for the transformative effects that discontinuities or disruptions to one's implicitly coherent sense of self can have. [neo-shamanism, phenomenology, self, embodiment]

Whether the concept of healing is qualified by the adjective "ritual" (McGuire 1988), "indigenous" (Kleinman 1980), "religious" (Dole 2004), or "spiritual" (Kakar 2003), most anthropological accounts draw, either explicitly or implicitly, on the notion of "symbolic" healing initially developed in Lévi-Strauss's (1963) seminal article, "The Effectiveness of Symbols." Within this framework, therapeutic efficacy is understood as the result of a transformation of meaning or the manipulation of symbols. This article seeks to challenge and refine this approach by suggesting that the transformative potential of the healing ritual may be located *prior* to the establishment of symbolic meaning and its manipulation in the course of the healing ritual. Through an experientially specific analysis of soul retrieval, a neo-shamanic healing ritual practiced by contemporary Euro-Americans in the United States, I demonstrate that the healing process begins with, and hinges on, a successful encounter with alterity or otherness, which is established in the course of the ritual but extends beyond it.

Neo-shamanism is commonly referred to by practitioners as a healing, therapeutic, or spiritual practice. It was largely conceived and developed in the early 1980s by American anthropologist Michael Harner, who purported to distill and synthesize the core of various shamanic practices into a single healing method accessible to Westerners. Through his workshops, the Foundation for Shamanic Studies (FSS), and magazine *Shaman's Drum*, Harner is often credited with having introduced shamanism to the West. Reviewing the

anthropological literature on shamanism, Atkinson concludes that neo-shamanism is "by far the most significant recent development in the field" (1992:322). Indeed, alongside other complementary therapies, neo-shamanism is growing in popularity in the United States and other Western countries,[1] while indigenous shamanic practices are being increasingly utilized to complement psychotherapeutic and allopathic treatments (Finkler 2004; Nguyen 2008).

Most anthropological studies of neo-shamanism are broadly engaged with questions of secularization and reenchantment, attempting to explain the resurgence of magico-religious practices among supposedly rational and modernized individuals (Heelas 1996; Johnson 1995; Lindquist 1997; Minkjan 2008; Wallis 2003). The therapeutic aspect of neo-shamanism received considerably less scholarly attention, and much of the research that does exist on the topic tends to adopt indigenous explanatory models (Goodman 1988; Harner 1988; but see Lindquist 2004, Winkelman 2000). In spite of this dearth, recent studies on the application of shamanic practices in psychotherapeutic or biomedical contexts suggest that shamanism may "serve certain therapeutic functions that are beyond the reach of modern health care systems" (Lee et al. 2010:57), the scholarly study of which may enrich psychotherapy and biomedicine alike. While the analysis of soul retrieval presented here is a step in that direction, the article aims not only to contribute to our understanding of the particularities of shamanic healing, but also to refine anthropological conceptualization of ritual healing and therapeutic process more broadly.

The term "symbolic healing" was coined by Moerman in 1979 and further elaborated by Dow in 1986, but it was Lévi-Strauss (1963) who set the tone for much of the work that has since been written on the subject. In this article, Lévi-Strauss discusses the therapeutic efficacy of a birthing chant performed by a Cuna shaman over a woman struggling with childbirth, suggesting that by creating homologies between the woman's suffering body, a culturally shared myth, and the content of the birthing chant, the shaman is able to manipulate the woman's physical state through the manipulation of the mythic symbols in his song. Likening this process to that of Freudian psychoanalysis, where healing efficacy is attributed to the bringing of unconscious content into awareness, Lévi-Strauss locates the efficacy of the healing chant in the shaman's ability to make meaningful and coherent the woman's incomprehensible pain. Building on this work in another seminal article, Dow (1986) argues that all forms of healing are dependent on the successful transformation of emotions through the manipulation of symbols, setting the tone for much of the subsequent scholarship on the topic (see Bilu et al. 1990; Desjarlais 1989; Devisch 1990; Greenfield 1992; Luhrmann 2013; Seeman 2010; Somer and Saadon 2000).

The symbol-and-meaning approach, however, has not been without its critics. Some of this critique specifically challenges Dow's model, or Lévi-Strauss's analysis, pointing to cases where the establishment of a shared meaning between patient and healer is impossible or questionable (Kirmayer 2003). This includes such instances as where the patient does not understand the language used by the healer during the ritual (Freeman 1998; Lindquist 2007; Sherzer 1983), is unaware of the meaning underlying some rituals (Kleinman 1980),

or does not understand the behaviors of the healer (Finkler 1980). Another critique points to the fact that the patient is portrayed in this structural account as a passive being upon which healing procedures are being performed, with the patient's own understanding and experience of the ritual left unelaborated (Csordas 1994a; Hollan 2001). Finally, Csordas and Kleinman (1996) simply point to the fact that explaining therapeutic efficacy by reference to homology and symbol manipulation does not have a stronger explanatory force than do indigenous explanations of efficacy.

In spite of this critique, the tendency to neglect the patient's experiential reality in favor of descriptions of ritual procedure is still quite pervasive, leading to what Csordas (1994a) termed "global" or "black-box" explanations, where efficacy is explained by reference to nonspecific psychological mechanisms such as the placebo effect or catharsis, while leaving the actual workings of such mechanisms unelaborated and unexplained. What we are left with, then, are statements in the vein of "what really heals people is the placebo effect/catharsis/altered states of consciousness," but what actually gets "catharted," or the manner by which an alteration of our state of consciousness brings about healing or change, remains unexplained. To avoid this, we must attend to more than just the ritual procedure and bring into our analysis the patient's experience of healing, acknowledging that the recipient of healing is more than an inert body upon whom the ritual sequence is performed.

My analysis of the neo-shamanic ritual draws on this line of argument, by applying a methodological stance that is rooted in embodiment (Csordas 1994a). Embodiment is a methodological orientation which considers the body as a locus from which, and through which, our experience of the world is arrayed and hence as a good analytical starting point. Within this paradigm, bodily acts are not an external manifestation or representation of meaning that lies "beneath" them but are generative and constitutive processes in their own right. By providing an experientially specific analysis of neo-shamanic healing that is grounded in the experience of the body-in-the-world, I demonstrate that the neo-shamanic healing process begins with, and hinges on, an encounter with alterity or otherness and that this happens prior to reflection and the semiotic transformation of meaning in the course of the ritual. The ritual itself is formulated here as a process of self-transformation and self-objectification, which is facilitated vis-à-vis a series of relationships that are created throughout the healing ritual itself and extend beyond it.

Embodiment, Self, and Other

In his critical essay on Lévi-Strauss's Cuna healing analysis, Kirmayer finds fault with the structuralist approach which, in its search for order and abstraction and by setting aside the intrinsic sensual meaning of symbols, neglects to attend to those nonsemiotic social and biological processes that "provide both the medium and the causal structure of healing" (1993:169). He suggests, however, that despite its deficiencies, the essay "remains exemplary because it fits expectations, derived from psychotherapy, for meaningful communication between healer and sufferer" (1993:169). The important point Kirmayer (1992) makes in

this regard, however, is that the generation of meaning cannot be understood exclusively in terms of mental representation and may emerge instead from body processes and experience.

While I agree with Kirmayer that Lévi-Strauss's account remains compelling since it posits a meaningful communication between patient and healer, I would suggest that it makes sense not merely since meaning making is central to its argument, but specifically because—and again, in line with psychoanalytical notions—healing is depicted in this account as a process of making order out of chaos, the ritual drawing its healing potential from its capacity to make coherent the incomprehensible experience of pain and suffering. The idea that healing or therapy work through a process of meaning making where suffering is reframed as meaningful or elements of the patient's life, self, or experience are reshuffled to create coherent narratives is well established in anthropology (Bourguignon 1976; Garro 2000; Mattingly 2010). This is true not only in cases where discursive or narrative analyses are employed, but also in cases of body-centered analyses as well. In a recent essay on Candomble mediumship, for example, Rebecca Seligman (2010) argues that suffering both causes and is caused by "disrupted self-experience" or threats to the coherence of the self on both cognitive-discursive and bodily levels. Healing, she suggests, is a transformative process that hinges on the restoration of a coherent experience of self.

The analysis of the neo-shamanic healing ritual I present here, however, suggests that a fuller account of the healing process must also include an appreciation for the transformative effects that discontinuities or disruptions to one's self can have. These discontinuities are what I refer to in this article as experiential encounters with alterity or otherness and which I argue a methodological orientation of embodiment helps us locate in the course of the ritual. The argument I advance here serves as a counterweight to accounts of ritual healing that emphasize processes of meaning making that are anchored in the creation of coherence as key to the understanding of healing efficacy, arguing that we must pay equal attention to the manners in which disruptions of coherence, or breaks in one's habitual sense of self, can potentiate positive self-transformation, even, and perhaps especially, when such experiences are not consciously articulated or understood at the time of the healing. A detailed and experientially specific examination of how these disruptions to self occur in the course of the neo-shamanic ritual is at the heart of the analysis of the soul-retrieval ritual I present here. Before going further, however, we must first clarify what is referred to here by the much-contested term of self.

The concept of the self has a particularly rich history in psychological anthropology (see Csordas 1994b; Fogelson 1979; Hollan 1992), with much of the literature on the subject focusing on demonstrating the culture-boundedness of the concept of the self and contesting Western conceptions of it as a unitary or coherent entity, arguing that it is, in fact, fluid, situated, and relational (Battaglia 1995; Ewing 1990; Rosaldo 1984; Shweder and Bourne 1984).[2] This has resulted in what Quinn calls "an over-commitment to a contemporary anthropological view of the self as fragmentary, shifting, and inconsistent" (2006:363), a trend that is further reinforced by the fact that anthropologists writing about the self, and particularly so when the self is conceived of as a discursive formation, are in fact writing

about self-representation, or "the individual's mental representation of his own person" (Spiro 1993:109).

Phenomenological conceptions of the self, however, point to an underlying experiential coherence to the self that is, at least partially, anchored in our very embodiment or the experience of inhabiting a physical body that is distinct from those of others (Mauss 1985) and supported by the "flow of embodied, self-related information to the brain and self-regulatory mechanisms that organize this information into a consistent, integrated experience of self at the cognitive level" (Seligman 2010:300; see also Damasio 1995; LeDoux 2002). This is not to say that the self is a thing or an entity but an "indeterminate capacity to engage or become oriented in the world" (Csordas 1994a:5), a process of attunement and orientation to our environment that is enacted through the bodily processes of perception (see Hallowell 1955). It is this implicit, un-cognized, embodied sense of self that is at the center of analysis here, the shamanic healing being conceived of as a process of self-transformation and self-objectification which is facilitated through an experiential and unreflective encounter with alterity or with elements of bodily experience which are implicitly recognized as not-self.

To investigate these processes, I use a methodological orientation that privileges the lived body as a fruitful analytical starting point. My analysis draws primarily on cultural phenomenological approaches that build on the work of Merleau-Ponty. Explicating his theory from the analytical starting point of the problematic of perception, Merleau-Ponty (1962) critiques the empiricist dichotomy of subject-object that posits an objective reality which imposes itself on subjective consciousness. By demonstrating the indeterminate and ambiguous nature of perception (such as in the case of various optical illusions), Merleau-Ponty highlights the important role context plays in the process of perception, demonstrating that our perception of "things" is at least partially determined by how we look at them. Concluding that perception is demonstrably *not* determined by objects, he then argues that analysis cannot start with objects and be traced back to subjects, but instead must start with the very process of perception, the locus of which is the body-in-the-world.

The process of perception itself is preceded by neither object nor subject but is "an originary process rooted in the dialectical relationship of the organism and its environment, which gives birth to both the subject and the object of perception" (Crossley 1996:27). It is for the purpose of studying the embodied process of perception from its starting point (the body) rather than from its end point (objects) that Merleau-Ponty introduces the concept of the "preobjective" or "prereflective." It is important to note that the preobjective by no means exists a priori or independently of culture, as the phenomenological endeavor is engaged with capturing that "moment of transcendence in which perception begins, and, in the midst of arbitrariness and indeterminacy, constitutes and is constituted by culture" (Csordas 2002:61). Within this paradigm, then, bodily acts are not the external manifestations of something else but are generative and constituting processes, and hence it is the bodily acts in themselves that bear the analytical weight. Approaching the shamanic ritual from a perspective of embodiment allows us to attend to elements in the healing sequence that

might otherwise be ignored and to identify loci of healing efficacy without an appreciation of which our understanding of the healing process remains partial at best.

Shamanism, Neo-Shamanism

Although the actual term "shaman" originates with the Tungus-speaking tribes of Siberia (Eliade 1964), the word has become a blanket term, broadly used, both popularly and academically, to refer to any individual who make use of particular trance techniques for healing purposes (Hutton 2001). The universalization of the term can largely be credited to religious historian Mircea Eliade whose comprehensive work, *Shamanism: Archaic Techniques of Ecstasy*, published in 1964, had a profound impact not only on academic debates, but also on popular ones as well. In this broad comparative study, Eliade (1964) points to what he argues to be underlying commonalities between numerous magico-religious practices across the globe, reaching the conclusion that shamanism is a universal phenomenon spanning across cultures and time and possibly predating the Stone Age. Eliade's publication, along with ethnographic accounts produced by American anthropologists who underwent shamanic initiations and made their experiences available to Western audiences, marked the emergence of a renewed interest in shamanism and played a central role in subsequent Western adaptations of these practices, leading to the eventual birth and proliferation of neo-shamanism (Noel 1997; Znamenski 2007).

While such universalizing claims are today largely contested (see Hutton 2001), Eliade's basic argument did much to shape neo-shamanic self-definition, and his work's metanarrative continuous to be reproduced by neo-shamans who consider it the ultimate authority on "native" shamanism (Wallis 2003). The notion that shamanism is a universal and primordial therapeutic/spiritual practice is taken within neo-shamanic circles to indicate that all humans share in a shamanic tradition, regardless of culture, and that furthermore, culture in this context is nothing but a surface detail, a variation on a theme. This, in turn, lends credibility and validity to neo-shamanism as a practice rooted in our common heritage as human beings, rather than being a borrowed or invented tradition.

Eliade's is not the only foundational academic text to have shaped neo-shamans' understanding of their practice, nor the only scholar whose writing on shamanism can be credited with bringing this practice into being. Carlos Castaneda's controversial books on his supposed initiation experiences with the Yaqui magician Don Juan also did much to make shamanic perspectives accessible to broader audiences. Indeed, Castaneda may have been the first to suggest that Westerners themselves could *become* shamans (Drury 1989).[3] However, the person most directly responsible for the flourishing of neo-shamanisms in the West is former anthropology professor Michael Harner.

Drawing on his own fieldwork and shamanic initiatory experiences with the Untusuri Shuar (Jivaro) in Ecuador, the Peruvian Conibo, and several North American shamans, Harner published in 1980 the first in what would become a flood of "how to do" books on shamanism,

The Way of the Shaman. By adapting and decontextualizing shamanic practice from its original cultural grounding, Harner (1980) purported to transform shamanism into a self-help therapeutic and spiritual practice, which he claimed was distilled and synthesized from the very core of all shamanic practices around the world. In his effort, he aimed to effectively "peel off the cultural differences between shamanism in different cultures, and to develop the common core, the fundamentals" (quoted in Lindquist 1997:26). Harner named his method *Core Shamanism*, and following the publication of *The Way of the Shaman* (1980), established the Foundation for Shamanic Studies (FSS). The FSS is currently one of the largest and most successful neo-shamanism schools worldwide, offering a variety of training workshops inside and outside the United States in addition to its initiation of various financial aid programs aimed at "preserving" shamanism throughout the world.[4]

While Harner's *Core Shamanism* is certainly one of the most popular strands of neo-shamanism currently practiced around the world, it is by no means the only one, nor does Harner's vision encompass this extremely heterogeneous and diverse field. In an attempt to map the field, Townsend (2004) draws a useful distinction between what she terms neo-paganism, which includes such nature-oriented and magic-oriented practices such as Wicca, white witchcraft, and Goddess religions and neo/core-shamanism. This division is maintained also by Lindquist (1997), who cites neo-shamanism's lack of adherence to one symbolic system and higher level of flexibility in practice as two of the more important differentiating criteria distinguishing it from neo-pagan practices.[5] While the term "core shamanism" is favored by my own interlocutors, throughout this article I have chosen to use the term "neo-shamanism" when referring to their practice. I have chosen to do so in order to differentiate neo-shamanism from other, indigenous, forms of shamanic practice, as well as to avoid the assumptions belying the term "core shamanism" as used by Harner.

Much of the anthropological debate on neo-shamanism is critical of what scholars consider to be an appropriation and commoditization of traditional or local healing practices by neo-shamans (cf. Wallis 2003; for an indigenous critique of this appropriation, see Churchill 1992; Rose 1992). Neo-shamans are accused of decontextualizing and universalizing shamanic practices, of psychologizing them in a manner that distorts and dilutes their original form (Vitebsky 1995), and of simultaneously marginalizing and romanticizing indigenous people and indigenous shamans in particular. These critiques, which at times take a particularly derisive and condemning tone (Kehoe 1990, 2000), are often rooted in a comparison of neo-shamanism to indigenous shamanisms behind which lies the question of whether neo-shamanism can be considered to be an authentic form of shamanic practice. Rather than further engaging this debate, the underlying assumptions of which can themselves be questioned as reifying a kind of cultural primitivism for which neo-shamans themselves are condemned, I consider neo-shamanism in this article not as a diluted imitation of shamanism, but as a practice in its own right which is anchored and contextualized in the culture within which it operates, regardless of its supposed origins.

Psychologization, which scholars consider to be a distortion of indigenous forms of shamanism, is indeed a defining characteristic of neo-shamanism, as is its claim to universality.

However, I would suggest that these characteristics need to be understood not in reference to indigenous shamanism, but as a coherent framework within which a practice makes sense to its practitioners, and a manner in which "shamanism" has been effectively recontextualized within familiar Western cultural forms. The sweeping critique of neo-shamans as deluded and inauthentic, as "plastic medicine men" (Kehoe 1990) who romanticize indigenous people and appropriate their religious practices, is likewise untenable considering the considerable heterogeneity within the neo-shamanic field today. Clearly, such a critique has its place and corresponds to some cases but certainly not to all. Even within the limited sample of participants in my study, a considerable variation was evident insofar as people's understandings of, and degrees of engagement with, their shamanic practice.

A Contemporary Shaman

This article is based on fieldwork I conducted between June 2009 and December 2010 with neo-shamanic practitioners in Southern California. In additional to participant observation of multiple neo-shamanic workshops and of dozens of private neo-shamanic healing sessions, I conducted open-ended interviews with workshop participants and clients that underwent multiple therapy sessions. Over 30 hours of interviews were conducted with the shamanic healer alone, with whom I worked closely throughout the duration of fieldwork. Elena, a woman in her early sixties, had been practicing and teaching shamanism for over 10 years, two of which had been in Southern California. A psychotherapist and clinical social worker by training, Elena became a shamanic practitioner in the mid-90s in Europe, where she studied for several years in one of the leading schools for shamanism under the tutelage of a former collaborator of Michael Harner. While neither Elena nor her students are officially part of the FSS school, Elena trained extensively with the FSS and sees her practice as largely drawing on the teachings of the school, particularly on the principles of what Harner terms *Core Shamanism*.

A successful and charismatic healer, Elena's clients are typically referred to her by friends and family members, and she regularly has a small group of students training with her to become healers themselves. She works both privately and runs shamanism workshops, which her students typically organize for her as a form of apprenticeship. People who attend the workshops may continue to work individually with Elena, and vise versa, but not necessarily. Her psychotherapeutic training is evident in her work, and throughout my many hours of observation, I have found her to be an extremely sophisticated therapist. In accord with the principles of Harnerian core shamanism, Elena does not don any special dress that is associated with any particular indigenous shamanic tradition, and the "native-like" elements of her practice are limited to her use of a rattle, a drum, and such "power objects" as a crystal or a likeness of her spirit guide. Elena does not refer to herself as a shaman, nor as a neo-shaman, preferring instead what she considers to be the unassuming and descriptive title of "shamanic counselor," a term used by most people with whom I interacted.[6]

Elena's clients and students come from a variety of social backgrounds. However, the majority of them are white, educated, and belong to the middle or upper-middle classes.

Significantly more women than men participate in courses and seek therapeutic intervention. The majority of people I spoke with considered neo-shamanism to be a therapeutic technique and engaged in shamanic practice pragmatically, whether they chose to adopt the shamanic cosmology of spirit worlds or conceived of their experience in purely psychological terms. While some considered neo-shamanism to also be a "spiritual practice," all of my interlocutors insisted neo-shamanism had nothing to do with religion, faith, belief, or any form of worship, and while spirits were accorded the respect one would give an honored teacher or elder, they were not considered to be of a divine or sacred nature.

The majority of Elena's clients do not adopt neo-shamanism into their lives beyond their engagement in shamanic journeying in the course of therapy sessions. In the course of my fieldwork, I have come across persons with a large array of psychological complaints or displaying problems, ranging from the more debilitating to the more mundane. Perhaps due to her extensive previous training as a conventional psychotherapist, Elena's practice had a pronounced therapeutic character. I found that even for her and her close students, who insisted that neo-shamanism was more than a mere therapeutic technique but rather a "spiritual practice," engagement with shamanism was primarily limited to the therapeutic sphere, with therapy extended to what is commonly termed in certain "spiritual but not religious" circles as "personal growth," broadly understood in this context as a project of self-betterment and self-realization.

In spite of the prevailing popular image of the "spiritual but not religious" as flippant and superficial "seekers" and neo-shamans as "Indian wannabes," this has not been my experience with the great majority of my interlocutors, who made no attempt to appropriate any "native" cultural elements in their practice and appeared level-headed in their approach to healing and therapy. The appeal that this practice had for most persons I spoke with, it seemed to me, was not in its exotic allure or the longing for the primitive but in the fact that it proved unusually efficacious, often in cases when other conventional or verbal therapies failed.

Soul Loss and Soul Retrieval

At the heart of any shamanic healing is the "shamanic flight" (Eliade 1964) or journey to the spirit world. The spirit world, or what neo-shamans call the "nonordinary reality," is understood to be a tripartite universe, divided into lower, middle, and upper worlds. Upper world journeys are typically conducted to gather information and answer questions and lower world journeys to seek healing and power, but souls may be retrieved from either world. In order to access the spirit world, neo-shamans alter their state of consciousness by listening to the sound of a monotonous drum (either recorded or live) while lying still on their backs and wearing a blindfold. This effectively blocks most of the sensory input from the physical environment, as the volume of the drumbeat (earphones are used when recorded) is loud enough to prevent the journeyer from hearing even her own voice as she narrates her experiences. The experience of the journey itself is multisensory—visual, auditory, and kinesthetic—and consists of the shamanic practitioner traversing various landscapes and interacting with spirit guides, typically in the form of either humans or

animals. The shamanic journey is distinct from other forms of guided imagery, as it unfolds spontaneously and without external guidance. Prior to the actual journey, various prerituals are often performed, such as rattling, lighting candles, and burning of sage.

The journey for soul retrieval is carried out in cases of soul loss, something from which, according to Elena, virtually all people suffer. Soul loss is a state in which a part of one's soul is torn, usually as a result of trauma, and leaves one's body. The opportunities for soul loss are numerous, as the definition of trauma is sufficiently wide to include instances as horrific as child sexual abuse alongside such trivial incidents as a sudden fall. A great variety of interpersonal interactions (typically, those resulting in some psychological discomfort) may also result in soul loss. Elena likens the concept of soul loss to that of psychological dissociation, where an aspect of the self, which the patient must dissociate from to maintain the coherence of the self, becomes a point of psychological fragility. Just as the opportunities for soul loss are innumerable, so are the effects of soul loss on one's life. Those can range from an inability to "cope" with certain things (such as a persistent fear of authority), to depression, chronic lack of energy, or in extreme cases, the manifestation of physical illness. A complete loss of one's soul would result in death.

The entire soul-retrieval ritual is typically completed within a few days to one week and requires a total of three shamanic journeys to be performed by shaman and patient. The ritual sequence proper begins with a journey performed by the shaman, during which the lost soul is found and brought back (typically held in the shaman's tightly clenched fist).[7] The shaman then introduces the retrieved soul into the body of the patient by blowing it into the chest and top of the head. Following this, the patient remains lying, with her hands on her chest, while the shaman gently drums and verbally welcomes the soul back to the patient's life. Shortly after, both the shaman and the patient listen to the (recorded) narration of the journey. At this time, the patient might recall certain past events that may correspond to the messages or events in the journey, or not. This concludes the first part of the ritual.

The next stage is performed by the patient and is a brief journey in which she asks a spirit teacher (preferably a tree) what she must do in order to "root the soul into her." At this point the patient might meet, for the first time, the retrieved soul in its "corporeal" form. The messages from this journey are meant to provide the patient with some practical or concrete instructions as to what needs to be done immediately following the soul retrieval to successfully assimilate the soul. The instructions received vary drastically from person to person. This concludes the second part of the ritual.

If the patient did not meet the soul during the "rooting journey," she is sure to meet it during the next one. This third journey can be performed shortly after the second one, a few days following it or even a week later. Its purpose is to establish an encounter between patient and soul and to allow the soul to explain to the patient the reasons it had left in the first place. During this journey, the soul also tells the patient what she must change in her life or behavior in order to truly welcome the soul back into her life and embody it completely.

Often, certain rituals are assigned that are to be performed by the patient in her daily life for varying periods of time.

A Case of Soul Retrieval

While the insights used in my analysis are the fruit of interviews conducted with multiple shamanic practitioners and persons undergoing shamanic healing, in order to achieve a coherent and fine-grained analysis of the ritual process itself, I focus on a single, representative case of soul retrieval. Anna, a middle-aged neo-shamanic practitioner, underwent soul retrieval during a healing workshop. While she did not attend the workshop to address any particular problem, following her experience, Anna concluded that the traumatic event her soul retrieval addressed was a repeated experience of child sexual abuse, which she had never told anyone about but remembered vividly. Interviews with Anna were conducted immediately following her soul retrieval and twice more, in intervals of about one month. Analysis of the ritual is carried out in three stages. These do not correspond to three distinct temporal or structural "breaks" in the ritual healing itself, but rather are aligned with the three relationships that are fostered in the course of the ritual.

First Relationship — Patient and Shaman

Within the neo-shamanic framework, healing is conceived of as resulting almost exclusively from the direct interaction between the patient and her spirit helpers. The shaman's role is normally cast as mediatory at best. In her analysis of soul retrieval among neo-shamans in Europe, Lindquist (2004) accords the shaman a greater role in facilitating the healing process, which she conceives of as a joint reconstruction of traumatic past memories. This reconstruction happens, according to Lindquist, before and after the actual journey, as patient and shaman discuss the patient's life history and her experiences during the journey, as well as during the journey itself, as the patient interacts with the soul in a manner that allows her to "change the scene of the memory further and thereby attain a new experience of the past" (2004:166). It is through the reconstitution of past memories, Lindquist suggests, that the self is ultimately transformed.

I agree with Lindquist that important interpretive work does take place in the course of soul retrieval. However, I have found that a considerable portion of the healing work takes place long before this negotiation of meaning by either shaman or patient. Lindquist's analysis centers on the portions of the healing process where narratives (the patient's life story and events of the journey) are reframed to create a new, coherent, and positive story of the patient's life. Moments in the ritual sequence that are nonverbal, however, are neglected. My analysis here focuses on exactly such a moment, a moment which is accorded no analytical import by Lindquist, when the shaman returns from her journey with the recuperated soul and blows it into the patient's chest and head. My realization that this was in fact a critical moment in the ritual process came following Elena's repeated insistence that the reinterpretation of the patient's memories was not crucial to the success of the healing: "You are missing the point," she informed me; "People don't heal because we change their

memories or because of some reinterpretation of their trauma. They heal because before the soul retrieval something was missing in them, and when they get the soul back, they feel complete again. They feel something has returned to them." Interviews with Elena's patients who had undergone soul retrieval confirmed her assertion. A majority of the people I interviewed seemed to have felt, at the moment of the soul's supposed introduction into their chests, an immediate, bodily sensation, which they interpreted as an indication that the recuperated soul was being reincorporated into their bodies. In Anna's words:

> N: how did you know the soul retrieval worked?

> A: well, I felt it.

> N: Did you feel something when she blew the soul into you?

> A: I felt it, yeah. I felt tingling.

> N: where she put the soul or everywhere?

> A: no, everywhere.

The spontaneous experience of "tingling" in the body described by Anna following the shaman's blowing of the soul into her chest is a very common one. Many of Elena's patients reported feeling tingling, mild electrical currents, warmth, "energy," or a pleasant heaviness in their bodies in the moments immediately following the introduction of the soul into their bodies. It is important to note that these sensations seem to manifest spontaneously and are not verbally instructed for by the shaman at any point. The immediate and spontaneous nature of the experience of the soul as a tingling or warmth suffusing one's body indicates to us that the sensation is not a representation of the presence of the soul as a preexisting object, but rather a constitutive performance of it, manifested *in the body* and *by the body* at a prereflective level. The soul, then, is not an already existing object, which the shaman introduces into the person through a series of symbolic actions, which are then (even if not consciously) interpreted by the patient. It is the patient as a *body-subject* that constitutes the soul, objectifying it and pulling it out of the indeterminacy of experience in the course of the ritual. The soul comes to life at the moment of its supposed introduction into the body, and it is within this spontaneous manifestation that we glimpse Merleau-Ponty's *preobjective* (1962) objectifying the soul into this particular shape (in this case, a feeling of warmth, tingling, or heaviness) and not another.

The spontaneous manifestation of the soul in the form of tingling, warmth or "currents" does much to affirm to patients that the healing they are undergoing is indeed taking place. That these sensations manifest spontaneously and without reflection, and that the experience tallies with prevalent cultural notions about the nature of souls or spirits as "energy bundles" or ethereal substances, also confirms to patients that what they are sensing is the presence of something which is foreign to them, an element of otherness, an experience that cannot be attributed to the normal operation and constitution of the body-self.

After blowing the soul into the patient's chest, the crown of her head, and the chest again, the shaman proceeds to use her rattle, gentle bells, and a small Tibetan bowl over the patient, who remains lying on the ground, "soaking the soul" into her body. These are gentle, soothing sounds, and patients often report feeling as if they are "floating," "not really in the room," or in a deep state of calmness, while others feel as if they are being held, caressed, taken care of, or themselves holding and containing their newly returned soul. The shaman explains:

> E: . . . then I sing. It's almost like a lullaby. You sit there, you rattle them gently, you use the bells, you use the bowl, you give these sounds. You take them away. They are not immediately getting up and are back in this reality. They are just lying there, almost like a woman that has just given a birth to a baby. And they are just lying there and holding the baby, if you like. You are actually putting the seed in and letting it grow . . . and then they are just lying there and soaking that in.

As this indicates, and in line with Lindquist's assertion, the relationship established between patient and shaman is indeed of greater importance for the success of shamanic healing than neo-shamans themselves suggest. However, what the data presented here also suggests is that the import of this relationship cannot be exclusively understood in terms of its dialogic potential to reconstruct and reframe the patient's memories. The gesture of blowing the soul into the patient's chest and head by the shaman is a powerful one, not only in its intimacy and the particular physical proximity it creates, but also in its consequence, as the catalyst for creating the experiential reality of the soul as a foreign "thing" entering the patient's body. In light of this, the shaman's likening of the soul to a baby in the quote above echoes something of import about the process of soul retrieval, since the soul indeed comes to life in the space between two bodies, between the shaman's lips and the patient's chest, its coming into experiential being a function and result of the patient's opening to the shaman's touch.

After blowing the soul into the patient, the shaman disengages and retreats, leaving the soul behind to be incorporated into the patient's body-self. The subsequent rattling and use of the bells and bowl reestablishes a distance between the patient and shaman. The monotonous, earthy, low rumbling sound of the rattle as the shaman passes it inches away from the patient's body and head not only establishes a kind of sound buffer between shaman and patient, but also serves to help the patient to more fully attend to her own still body as the sound of the rattle effectively cuts her away from other external stimuli. The bells and the bowl that follow, with their metallic, bright and glittering tones, fleeting sounds that seem to come from nowhere, typically induce in patients a feeling of lightness, of floating, the calm of a gentle lull, as they are left to assimilate their newly recuperated soul.

The actual recuperation of the soul and the process of its introduction and incorporation into the patient's body—events within the ritual sequence that are practically absent from Lindquist's narrative-centered analysis—thus reveal themselves to be of paramount importance for the progression of the healing process. By ignoring these moments, Lindquist's analysis of the ritual process is limited to its effects on the patient's self-representation, the

healing potential of the shamanic ritual cast in terms of reframing patients' stories about themselves and their lives. What an analysis grounded in a perspective of embodiment allows us here, however, is a window into the experiential grounding of such potential change, as it is anchored in a disruption of one's habitual sense of self through an encounter with otherness at that same embodied and prereflective level. Returning to Elena's emphatic claim, then, by the end of this stage in the ritual sequence, the patient feels that "something has returned to them." Appropriately, the next steps in the ritual center, not on the interaction of the patient and the shaman, but on that of the patient and the recuperated and now objectified soul.

Second Relationship—Patient and Soul

In a book titled *Empathy and Healing*, Skultans reminds us that "the act of ethnographic mirroring of narrative experience by the fieldwork" (2007:15) can elicit additional (potentially painful) emotions from informants, recalling the story of Odysseus, who stoically faced the many misfortunes in his life only to break down in tears when hearing his life story recounted by a blind minstrel. The significance of our past experience, Skultans tells us, is only fully appreciated when uttered through the lips of another. It is this apparent paradox that is at the heart of the second relationship established in the course of the ritual, the relationship between the patient and the retrieved soul.

The patient's first interaction with the soul usually takes place during the "rooting journey," shortly after the soul's recuperation by the shaman. Although Anna does not exchange words with the soul during this journey, the encounter has a strong impact on her:

> When I sat under the tree and I saw her, Nofit, I was so heart broken. I cried. I cried. I came back [from the journey], and I couldn't stop it, I just kept crying. I couldn't stop my crying. And then, when I was talking [in the group] I was crying, and my heart was in my throat . . . and it's hard for me to sing, but that's what they told me to do . . . . And I was crying when I was singing. I don't know where the voice was coming from, Nofit. Everybody was crying with my voice.

During the journey, Anna's spirit helpers instruct her to perform a daily ritual over a period of eight days, in order to "root the soul in her body"; she is to sit with her eyes closed, either by an actual or an imagined tree, and call the seven-year-old soul to her; she is to then nurture the soul, take care of her, tell her how beautiful and capable she is, and sing her a lullaby (a specific one that Anna was familiar with). Again, Anna's strong emotional reaction to the soul is not unusual. Most of the patients I interviewed reported having some emotional reaction to their retrieved soul upon first meeting with it in its human form. While most reported feelings of tenderness, care, love, or sadness, for some, interaction with the soul was difficult and strained. Sarah, a woman in her mid forties with no previous experience of shamanism, came for a private consultation due to mounting feelings of anxiety and "being lost." She had received two souls during her soul retrieval. With the first, a four-year-old, she found that she could "connect" and interact easily, but with the second, a 14-year-old, she found she

could not form a similar bond, the soul remaining detached and aloof in the course of their interaction. Her inability to warmly interact with her 14-year-old soul was disconcerting to Sarah. In her journey, she was given a daily ritual to perform for a week, welcoming both souls into her life. While she could not understand why she was unable to interact comfortably with the soul, after several days of performing the ritual Sarah found herself being able to relax with the soul and embrace her. After a week of performing the ritual, I interviewed Sarah, who now came to the conclusion that her difficulty in interacting with the soul was due to the fact that she was unprepared to reintegrate into her life that aspect of herself which the soul in fact was—in this case, her "ability to say no to people." She then surmised that the 14-year-old soul may have departed in the first place since it was at that age that her grandmother, a beloved mother figure, died. However, these understandings came quite late in the process and only after Sarah was able to successfully form a relationship with the soul. Indeed, it is the multiple interactions with the soul that the shaman considers to be the key to a successful healing:

> Then [after the "rooting journey"], you journey and talk to the soul and ask, how are you coming to help me? What changes do I need to make in my life that will make you feel welcome? That is where the healing happens. Because they go and meet the soul and ask it, why did you leave? For themselves. It may be the same message they will hear [as was given to the shaman in her journey] . . . so yes, it is that energy that comes back [referring to the actual retrieval of the soul], but it's also their activeness in the work that makes it more powerful, the embodiment becomes more concrete.

Anna's account of bursting into tears when meeting the soul for the first time, Sarah's difficulty in relating to her 14-year-old soul, and Elena's insistence that it was during the interaction with the soul that "the healing really happens," bring to the fore the centrality of the paradox of the specular image to the healing process. At the core of this paradox is the notion that the coherence via objectification of the self is achieved through a process of self-alienation. While for Lacan (1977) this is a source of paranoia, for Merleau-Ponty (1964) the specular encounter is the grounds for identification with the other, as the child's newfound ability to project himself into the specular image now allows him to also project it into the bodies of others. According to Merleau-Ponty, a schism is introduced at the moment of specular recognition, when the child realizes that the mirror image is *of* himself but not identical *to* himself. This schism, between "of oneself" and "to oneself," which remains a source of alienation throughout our lives, however, is also what enables us to project our own bodily awareness beyond the immediacy of our bodily experience and actively incorporate the other's perspective into our own body. It is this specular encounter, the shaman indicates, the patient's meeting of herself as an other, that enables her to have empathy for herself:

> After a week, the person journeys to the soul that you have brought back, and asks the soul, how are you going to help me? . . . When they do the journey, meet the soul and hear from the soul saying, the little child saying, if you do this, I will feel welcome, it will please me, then they have a different commitment. They make a commitment to please the child, because they see the child, they have an empathy for themselves, they are nurturing themselves. They are taking care of the little child that has come back. They make a commitment to do, to live differently.[8]

The shaman's assertion is supported by the fact that the more interested and committed patients were to get to know and to interact with their retrieved souls, to converse with them, and to make them feel welcome in their lives, the more likely they were to experience the soul retrieval to have been efficacious and to identify changes in their lives and behavior which they believed resulted from the healing:

> A = That song [the lullaby] was given to me. And I do sing it occasionally, and I cry when I sing. Yeah. But I am seeing her all the time around me, with the platted hair. And when I think about her, I want to cry, and I want to hug her. Because she was very innocent and very frightened…the process that I went with the seven-year-old was very significant. Because it really did touch me a lot. Even now I want to cry…I think it's my reaction to it is significant. That I am reacting, there is so much sadness coming up for me. And the effects of it, that all this time, it has haunted my life. And I want to be free of it. The guilt, the shame, this I'm not pretty, I'm not good enough. This authority thing. These are very significant and I feel I want to free myself from them.

It is by meeting herself as other in the course of the rooting journey that Anna is able to both have empathy for herself and eventually accept and incorporate the otherness of the retrieved and objectified soul back into her self. When I interviewed Anna two months later, she felt the soul retrieval had a significant impact on her life:

> I used to be more sensitive. I just feel much more standing tall on my own. That I am okay on my own. I am much more action-orientated, rather than just dreaming about things. I am less procrastinating, less fearful about actioning things. Definitely, I have, in myself, in my body, I feel more courageous and less… when I imagine myself in a doctor's office, I am not seeing myself talking to the doctor like I used to. I am seeing myself actually telling the doctor what my issue is and wanting results. Wanting good answers […] And I feel in myself comfortable to even demand, I want an answer to my questions. You know? So I feel very powerful in that sense, since the soul retrieval. Something has shifted in me. I feel comfortable talking about money. So something has shifted in me. Because they [the spirit teachers] said authority and money, I treat them the same. So I have a feeling something has happened for me.

In her recent study of imaginal cultivation among American Evangelicals, Luhrmann (2013) suggests that learning to imaginally interact with a God experienced as loving may have positive health implications. Specifically, she found that experiencing God as a loving presence in one's life through repeated imaginal interaction (such as prayer) was associated with various indicators of well-being. To explain the efficacy of such a relationship, Luhrmann draws on object-relations theory and the work of Heinz Kohut, suggesting that the establishment of an imaginal relationship with a loving God is comparable to the internalization of the caring and empathetic figure of the psychotherapist by the patient in its effects on long-term therapeutic success: in both cases the patient's incorporation of the therapist/God as an "internal object" results in a transformation of this parental, caring figure into a constant loving companion in the patient's life and the creation of a nurturing relationship within which the patient can shape herself.

While the neo-shamanic case resonates with the Evangelical one, insofar as healing is facilitated by the creation of a long-term relationship with an internalized other, unlike God in the Evangelical case, the soul the patient encounters in the journey holds a dual position in relation to the patient—it is at once a genuine other, an alter ego with whom the patient has a meaningful interaction and a specular image of herself, another me. This puts the patient in a dual and interesting position, whereby she is at once caring and cared for, serving, after a fashion, as a therapist to herself. I would argue that this duality highlights an important element in soul-retrieval healing, and possibly in healing more broadly, and that the encounter with the other which is crucial to the success of the healing process is not simply an encounter with alterity but an experiential encounter with the very alterity of the self. It is this aspect of the neo-shamanic journey that is at the center of the next relationship analyzed.

Third Relationship—Patient and the Sacred

While the last relationship I examine here might not be easily observed within the ritual sequence, it is crucial to the success of the ritual as a whole. Not representing any particular moment or an interaction with a distinct alter ego, the relationship explored here lies in the global experience of the shamanic journey, in the encounter with radical alterity, or what I refer to here as the "sacred." Explaining the efficacy of shamanic healing, Elena tells us:

> When you go to altered state, when you allow yourself to totally let go with the sound of the drum . . . You are bypassing your critical mind. I always say, I point to the forehead, and I say, this is your logic and intellect in front, and the back is your subconscious. And there is a curtain, a board, that is between them. And when you are able to go totally into altered state, you bypass that. So, the messages you hear from the spirits . . . the messages that they give, because they know us, they make the messages congruent with that deep belief system in me. Secondly, when I hear it on that deep hypnotic level or altered state of consciousness, something shifts in me, because my behavior comes from that deep messages that I have there. So when another message comes and takes over from that, it's almost like it comes and cleans the old message and a new message is replaced there. Sometimes I use the metaphor of the blackboard, I say, imagine that your subconscious, the back of your mind, is a blackboard. Things are written there. And when you journey those old messages get wiped out and new messages get written. So people come back and . . . very naturally, they tend to, kind of behave differently, or act differently. But we are not conscious of it. We just do it.

In accord with our analysis so far, the healing process is conceived of here by Elena as immediate and prereflective, anchored in the ethnopsychology of the psychodynamic subconscious. Specifically, the success of the shamanic journey is predicated on a reaching beyond, or bypassing of a barrier, a "letting go" of the "critical mind" that allows the messages given by the spirits in the journey to directly alter the patient's unconscious negative beliefs. The ability to "let go of the critical mind," which would allow one to receive the messages given by the spirits is dependent on the ability to achieve the particular altered state of consciousness of the shamanic trance.

In his classical study on trance and altered states of consciousness, Neher (1961) argued that the particular rhythmic drumming typically used by shamans caused a shift in brain wave patterns (from beta to alpha and theta) associated with deep relaxation and dreaming states (but see Rouget 1985). Such EEG findings, coupled with the fact that the shamanic trance also seems to make people more susceptible to suggestion, led some scholars to conceive of the shamanic journey's efficacy in terms of self-suggestion (see Winkelman 2010). While this tallies with one aspect of Elena's own account, conceiving of the shamanic journey as self-hypnosis lacks actual explanatory force insofar as the therapeutic process is concerned and runs the risk of overly focusing on the verbal aspects of the journey, at the expense of its other experiential features (this is particularly problematic considering that in many instances, little or no verbal interaction takes place during journeys, which patients nonetheless experience as effective). I would suggest that rather than conceiving of the shamanic trance merely as a means to an end, we must treat it as a technique of the body (Mauss 1979), in and of itself, and investigate how its particular experiential characteristics affect the course of healing. By doing so here, I demonstrate that the experience of entering into a shamanic trance plays a central role in the therapeutic process, specifically by facilitating another "intersubjective" (or rather, in this case, intrasubjective) encounter between the patient and what I refer to here as the sacred. I trace this by drawing on elements of "control" and "movement" in the experience of the shamanic state of consciousness.

As a global experience, the shamanic trance state is characterized by "stillness" or lack of motion. The person journeying lies on her back, relatively still throughout the journey, and is deprived of most sensory cues, including sight, sound, and touch. When describing their sensations upon successfully entering into a shamanic trance, many people report feeling numbness in their bodies, a floating sensation, or a lack of awareness of the precise boundaries of their bodies. Within that, the drumbeat is the only exogenous sensory stimulus available to the journeyer, and it is also the only "element" in the trance experience that is not only moving, but is also ever moving.

Returning to Elena's metaphors, it becomes clear how this particular technique of the body, once mastered, can bring about a "letting go of the critical mind." The "critical mind" here refers to our ability to reflect or to analyze, an act that entails the halting of one's stream of consciousness or train of thought and the act of objectifying and examining it. This halting motion is negated, however, by both the continuous motion of the drumbeat which, so to speak, urges us to keep on going, as well as the state of sensory deprivation and passive body posture. The state of sensory deprivation and relaxation negates the "critical," reflexive "move" in a similar manner to which the continuous motion of the drumbeat does: as the drumbeat creates the sensation of a stream-like motion in the body, so the state of relaxation and sensory deprivation promotes a sense of space-less-ness that a reflexive "halting" would disrupt. If we move from the metaphor of motion to that of muscle tone, then the reflexive move requires a tensing up which the tension-less position cultivated in the shamanic trance discourages. I suggest here that it is the ability to enter into this particular body state, what the shaman refers to as the "bypassing of the barrier in the mind," that constitutes an encounter with the "sacred" as a radical other. The other here, however, is

not an externalized, objectified figure, but the very experience of the self as foreign to itself, the experience of self *as* other.

Csordas (2004) argues that "alterity is the phenomenological kernel of religion," an "elementary structure of existence" (2004:164), which not only accounts for our tendency to produce religions, but also makes religion itself an inevitable part of human existence. Csordas identifies the alterity of embodiment itself as this kernel of religion, drawing on the observation that we experience our bodies as at once familiar and foreign to ourselves, indeed, at once self and other, suggesting that the objectification of this feature of embodiment gives rise to the "sacred" as a cultural phenomenon. Discussing the Catholic Charismatic practice of "resting in the Spirit" (2004:169), where supplicants report experiencing a heaviness of limbs as they are overcome by the divine presence, Csordas addresses the interplay between the sensations of *heft* and *lift*[9] that we inevitably experience as embodied beings to explain the manner in which the "sacred" comes into being in the course of this particular practice: "This thinglike *heft* of our bodies in conjunction with the spontaneous *lift* of customary bodily performances defines our bodies as simultaneously belonging to us and estranged from us, and hence the alterity of self is an embodied otherness. While resting in the Spirit, the heft that is always there for us indeterminately and preobjectively is made determinate and objectified." (2004:169).

Returning to the shamanic journey, we can recognize the manner in which this intimate embodied alterity is both highlighted in the course of the healing and plays a crucial role in its facilitation. While neo-shamans do not conceive of their practice as religious, the shamanic trance, as a technique of the body, amplifies the alterity inherent to the self, making it "determinate and objectified." The "heft" Csordas (2004) talks about is the "letting go" the shaman aspires to, which is also the experience of an alterity that is at once intimate and radically alien. The fact that it is the self which is experienced as the sacred other, and not an objectified, external figure, aligns with the New-Age ethnopsychology that posits the self as the seat of the divine (Lindquist 2004). This experience of self as other that we observe here is also tantamount to an elaboration of alternatives on a global scale, as the patient experiences, in effect, *another way* of being herself and another way of being with others. After all, "what the voices of others can do for us that we cannot do for ourselves, is that their otherness which enters into us makes us other. They can arouse a dialogically structured response in us, they can create possibilities of change within us that we cannot create with ourselves alone" (Skultans 2007:15).

The transformative potential of the shamanic journey, then, lies not in a reinterpretation and reobjectification of memories or meaning nor in the manipulation of symbols that somehow correspond to a deeper strata of the patient's psyche, but to the global experience of self as other that amounts to an opening of a new phenomenological "horizon," a new way of being, and a glimpse of a new possibility of being with others. The particular technique of the body implemented by neo-shamans, the shamanic trance, effectively objectifies the alterity that is always already part of our makeup as embodied beings, creating a relationship

that is perhaps the most paradoxical of the three we have reviewed thus far, one that is an opening to an alterity that is at once radically intimate and radically alien.

Conclusion

My interest in understanding the therapeutic efficacy of soul retrieval and of shamanic journeys more broadly was sparked by the observation (coupled with many of my interlocutors' assertions) that often, healing occurred without comprehension, that counter to the intuition we have inherited from Lévi-Strauss and from Sigmund Freud before him, making the incomprehensible meaningful was not always the key to the realization of transformation. As a counterweight to accounts of ritual healing that emphasize processes of meaning making that are anchored in the creation of coherence as key to the understanding of healing efficacy, in this article I have argued that a fuller understanding of therapeutic or healing processes must also include an appreciation of the transformative effects that discontinuities or disruptions to one's implicitly coherent sense of self can have. Specifically, I have demonstrated that disruptions of coherence, or breaks in one's habitual sense of self can potentiate positive self-transformation, even, and perhaps especially, when such experiences are not consciously articulated or understood at the time of healing.

This was made possible by employing a methodological orientation of embodiment and by providing an experientially specific account of patients' healing processes. Shifting the analytical focus from narratives of self-representation to the implicit experience of body-self enabled us to locate those moments in the soul-retrieval ritual that were not verbalized or clearly delineated in the ritual procedure and yet were critical to the establishment of the healing potential of the shamanic ritual. Analysis of these moments, which necessarily remain invisible in an account centered on narratives of self-representation such as Lindquist's (2004), indicates that the transformative potential of soul-retrieval ritual is rooted in experiential encounters with indeterminate alterity, otherness, or the establishment of moments in which the self is experientially rendered not-self.

This has implications for our understanding of neo-shamanic healing in particular, as well as for the anthropology of healing and therapy more broadly. While anthropological analyses of therapy and healing as processes of meaning making and self-making tend to identify ruptures or breaks to self-coherence as both a source and cause of suffering, considerably less attention has been given to the potential of such ruptures to promote well-being. One notable exception is to be found in the work of Varela et al. (1992), whose attempt to bring a perspective of embodiment into debates about the self within cognitive science identifies Buddhist mindfulness/awareness practices as a particularly fruitful theoretical and practical starting point in investigating the nature of the self. It is the decentering of the self, Varela et al. argue, something which is facilitated through meditative practices that allow for moments of nonidentification with the self as it is habitually experienced, that accounts for the positive transformative capacity these practices have, such as in reducing anxiety and enhancing compassion. While persons undergoing shamanic healing do not seek

to renounce their attachments to the self, it is within those brief encounters with alterity, within the surprising presence of difference, when attachment to the self is momentarily shaken, that the transformative potential of the ritual can be located. The implications of this to the anthropology of healing point to the need for anthropologists to push beyond conceptualizations of healing process and efficacy as transformations of meaning that are anchored in creating coherence of either life- or self-representations, highlighting the need to not only attend to other, nonverbal, aspects of the therapeutic encounter, but to attend also to those elements of healing that serve to disrupt rather than cohere.

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Notes

1. A recent survey by the National Center for Complementary and Alternative Medicine indicates that approximately 38% of adults and nearly 12% of children in the United States are using some form of complementary and alternative medicine, shamanism specifically included (NIH, 2008).

2. Similar claims have been made by cognitive scientists, who suggest that the experience of having a unified, stable, and coherent self is an illusion, the self, or cognizing subject being "fundamentally fragmented, divided, or nonunified" (Varela et al. 1992:48).

3. Znamenski (2007) cites several other "inspirational texts" of neo-shamanism, such as the writings of Joseph Campbell, Carl Jung, and various Native American biographies.

4. Two other anthropologists who have done much for the promulgation and popularization of neo-shamanic practices are Felicitas Goodman (see 1988) and Joan Halifax (1988).

5. Townsend further differentiates between core and neo shamanism. However, in doing so, she seems to adopt Harner's own definition of core-shamanism, which she describes as an experiential method based on "the core features which underlie all shamanism." Under the category of neo-shamanism, Townsend catalogues what appears to be any other Western version of shamanic practice: "an eclectic collection of beliefs and activities . . . based on a constructed metaphorical, romanticized 'ideal' shaman concept" (2004:4). Such practices as Seiðr or Celtic shamanism, which profess to draw on "ancient cultural traditions" are also included in this category. This distinction, however, is problematic, since by adopting Harner's own definition of core shamanism as the actual essence or core of indigenous shamanisms, the debate regarding the validity of this very claim is being ignored. For this reason, I position Harnerian core shamanism under a more general category of neo-shamanism.

6. Referring to oneself as a "shaman" is perceived as conceited, while "neo-shaman" denotes a qualitative differentiation between "shaman" and "neo-shaman," which is likewise rejected.

7. No account is typically provided by the patient regarding the possible cause of soul loss prior to this journey.

8. While souls frequently appear as children, as in the cases presented in this article, I have observed many instances in which recuperated souls were of adult age. I have not observed a systematic difference in the manner in which persons interacted with souls according to age.

9. Csordas's use of the terms *heft* and *lift* follows R.M. Zaner (1981).

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