

Editorial

The influence of religion on psychiatric theories and practicesGoffredo Bartocci, *Editor-in-Chief*WCPRR Jul/Oct 2006: 106-113. © 2006 WACP
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This issue of the WCPRR groups together a topical selection of lectures delivered and discussed during the Joint Meeting *Toward Multiculturalism: Cultural Exclusion and Cultural Integration in an Age of Global Insecurity*, which was held in Providence (RI) USA, October 13-17, 2004 and jointly organized by the *Society for the Study of Psychiatry and Culture* and by the *Transcultural Psychiatry Section of the World Psychiatric Association*.

I have found myself underscoring the importance of the Joint Meeting in Providence on several occasions. During said meeting it was in fact concertedly decided to inaugurate the *World Association of Cultural Psychiatry*, an international and free-standing association capable of giving international visibility and of stably representing both our colleagues and the cultural psychiatry special interest groups within national societies. Furthermore, another fact that led to the publication of this issue occurred when a large group of speakers accepted our invitation to analyze the influence exercised by religious beliefs on their psychiatric theories and practices. The aim was to detect the possible ways in which a number of theologically organized theories on the origin and the purpose of life, the existential way of approaching both the material and immaterial world, the expectations on the end of mankind, the beliefs on the origin of diseases and on the ways to treat both physical and psychic disorders, might contribute in shaping the specific situation in which an individual takes it upon him/herself to relate to another person who is seeking his/her help in overcoming a psychological disorder that is perceived as such.

These were the topics discussed in Providence in three Sessions that were grouped together under the heading: *The Influence of Monotheistic Religions on Psychiatry*, and that were scheduled according to the following order:

General Introduction to the Symposia on the Influence of the Monotheistic Religions on Psychiatry
(G. Bartocci)

Session I - CHRISTIANITY

- 1) *The Influence of Catholic Religion on Italian Psychiatry*. (G. Bartocci, N. Lalli, GG. Rovera);
- 2) *The Influence of Catholic Religion on Spanish Psychiatry*. (J. Obiols-Ilandrich);
- 3) *Prayers and Healing in the Christian Tradition*. (A. Favazza);
- 4) *Witchcraft: Fact or Fantasy?* (R. Prince);
- 5) *Delusion of Guilt and the Attitude of Christian and Islamic Connections towards 'Good and Evil' and the Responsibility of Men*. (T. Stompe, S. Bauer).

Session II – ISLAM

- 1) *The Popular Conception of Madness, Jinon, in the Context of Socio-Economic and Historical Development in Islamic Societies.* (R. Al-Baldawi);
- 2) *Ethnic and Racial Discrimination and Common Mental Disorder among the Workforce: Findings from Cross-Sectional EMPIRIC Study of Ethnic Minorities in the UK.* (K. Bhui, S. Stanfeld, K. McKenzie, S. Karlsen, J. Nazroo, S. Weich);
- 3) *Influence of Traditional and Islamic Values on Mental Illness Expression in North African Migrants in France* (R. Bennegadi);

Session III – JUDAISM

- 1) *The Influence of Jewish Culture on Psychoanalysis: Sigmund Freud as a Jew - an Inconfortable Portrait.* (M. Ascoli, V. Iannibelli, V. De Luca);
- 2) *The Mystical Roots of Psychoanalytic Theory.* (S. Dein);
- 3) *Strictly Orthodox Jews and their Relations with Psychiatry and Psychotherapy.* (K. Loewenthal);
- 4) *The Influence of Jewish Culture on Cultural Psychiatry: Personal Reflections.* (R. Wintrob);
- 5) *Why Orthodox Jewish Men and Women Don't Dance Together: Jewish Humour and Its Influence on Psychiatry.* (S. Wolin).

A fourth Session, *Religion, Spirituality Cultural Psychiatry*, organized and chaired by S. Wolin and D. Savin, raised new elements thus enriching the initiative with the following presentations:

- 1) *Native American Spirituality and its Relevance in the treatment of Alcoholism.* (R. Kraus, T. Miller);
- 2) *The Effectiveness of Religious Coping Through Faith and Ritual In Maintaining Resiliency Among Israel's Ultra-Orthodox Body Handlers Following Terrorist Attacks.* (Z. Alexander);
- 3) *A Community Study on Emotional Distress among Arab and Jewish Israelis over the Age of Sixty.* (R. Kohn, A. Shemesh, I. Levav, T. Blumstein, I. Novikov, N. Geraisy);
- 4) *Influence of Religious Extremism on Mental Health and Mental Illness.* (H. Hamadani).

The fact that the first three Sessions exclusively focused on the connection between psychiatry and the three major monotheistic religions is only due to organizational reasons. I therefore hope that our colleagues who believe in any other religious creed might be prompted by this issue into completing the overview with their contributions on their specific local situations (Note 1).

Dr. Micol Ascoli has kindly accepted to be the coordinator of the issue and has managed the correspondence with the speakers in Providence, thus providing our Rome-based editorial office with a logistic support from London.

Said correspondence highlighted the fact that some of the Authors, having already published their papers elsewhere, sent in entirely new articles while other Authors simply revised their initial papers with a view to making them better suited for publication. Additional articles were also contributed by Prof. Fakr El-Islam and by Prof. Ines Testoni and forwarded to the editorial office of the WCPRR and are published in this issue as they are very much in line with the topics contained herein.

This is the sequence of events that led to the publication of this issue which, thanks to the revision done by the Authors, does not result in a retrospective review of the proceedings of the conference but rather in a collection of contributions towards a common research project.

As for me, although I recently contributed to the introduction and publication of the December 2005 issue of *Transcultural Psychiatry* titled *Spirituality and Religion*, I soon realized that the drafting of this introduction raised many more problems than I had initially expected. In fact, while the Editorial in the issue of *Transcultural Psychiatry* introduced a collection of papers already written by the Authors who wanted to find an opportunity for publication, the introduction to this issue of the WCPRR was rather prospected as a framework in which to reiterate and reinforce a research methodology.

A research method in the study of religious experience and its correlates

This issue can trace its remote roots in the method presented in *The Variety of Religious Experiences* by William James. Since this text was first published, it has in fact become increasingly evident that all individual religious expressions are grounded on specific transcendental peak experiences arising from equally specific contextual situations. It follows therefore that the method used herein simply focuses more on the honesty of the Authors' experiences than on their devotion to God-inspired dictates and, above all else, on the Authors' capability to release themselves from the tethers, no matter how attractive these may be, of the exclusiveness of their cultural cradle. The aim is therefore to guarantee a plurality of experiences and reflections sufficient to avoid the theoretical reductionism pursuant to a learned projection of events hinging upon single religious beliefs.

In connection to this, I remember that Prof. Luigi Frighi, while discussing with Prof. Raymond Prince the possibility of establishing an International Society for the Study of Religious Experience based in Italy (Note 2), insistently repeated that research on the religious dimension could only be the outcome of cooperation between several people from different cultural backgrounds so that they might offer a method of observation, narration and interpretation of the religious phenomenon that might not only be interdisciplinary but also multi-dimensional: "Any time a consistent explicative thread to a religious phenomenon is found, other research approaches immediately appear which are equally relevant as the first and it becomes difficult to understand which one should be taken up. Probably all of them, and this is why we need an association of different people, more specifically a Society for the study of religious experience", he insisted, "a place in which to fine-tune and pass down methods and knowledge... exactly as is done, with great success albeit with different objectives, by religious institutions".

Which thread should be followed up in the short-lived professional existence of a scientist? The thread of history? The study of the psychogenetic reaction to unexpected events? The power of social conditioning? The legal norms forbidding any "offence" against the official state religion? Altered states of consciousness? The suggestion created around a charismatic figure kissed by the grace of God? What disciplines are to be privileged? Clinical psychiatry, phenomenology, psychoanalysis, neurosciences? Probably all of them taken together. (Note 3)

Among the various attempts made at unifying under a common language the efforts of the two spheres of study represented by medical psychiatry and a god-inspired theurgy, I would like to highlight the conference that I had the pleasure to attend at the Monastery of St. Catherine, Mount Sinai (Egypt), *Religion Spirituality and Psychiatry*, organized by the Egyptian Psychiatry Association and co-sponsored by the WPA and by the WHO, October 15-18, 2003.

The peculiarity of the venue created the perfect framework for the cultural approach taken in the conference which, although sponsored by scientific associations, ended up by abdicating in favour of theological dictates instead of promoting reliance on religion-free practices. As outlined in the introduction to the Conference, the role of a monotheistic God and the religion devoted to Him was envisaged to represent the essential template for all forms of knowledge: "Seven thousands years ago Egyptians believed in one God, the After World and that our deeds will be balanced in the day of Judgement. This led James breasted to consider the Egyptian culture as the dawn of consciousness".

To hypostatize the functional complexity of mental networks into a single (monotheistic) notion of God, seen as being the template for the way of both affectively relating to metaphysical "objects" and of shaping the individual epigraph which internally moulds the notion of God, immediately appeared to be a method that was all but transcultural, as it did away with all

criteria underlying the cultural (as well as neural) relativity of religious experience, thus representing the risk-ridden ante-chamber to the hierarchical superiority of a faith on another one. Moreover, the St. Catherine Conference also put forth more food for thought during the discussions that unfailingly occur in-between scheduled presentations and which highlighted the conviction among many of the eminent discussants that there is a *political* necessity to promote, through the channel of psychology, a *strong spirituality* also throughout the cultural fabric of Western civilizations, which was evidently considered to be too weak in this sense. The advantage of this cultural operation was to provide Western populations with a cultural (religious) cohesive force that might prove to be as effective as the one that succeeded in grouping geographically scattered populations under a single theological banner such as, for example, in the Islamic world. (Note 4)

And now what? How can we assess the cost-benefit ratio of the strategic validation of extramundane cultural beliefs by scientific associations and, what's more, for *socio-political* reasons? What might be the consequences of the cultural endorsement and enhancement of religious notions on individual and mass psychology and general psychopathology, and to boot, also validated by scientific and not theological associations? (Note 5)

Science & Faith: the Ironies of Globalization

A further incentive to place the focus of this Editorial on the new epistemological approach taken by the Authors contributing hereto was drawn from a ground-breaking article that analyses and outlines different political, social and marketing factors hinging upon transcultural psychiatry. I am referring to *Beyond the 'New cross-cultural Psychiatry: cultural biology, discursive psychology and the Ironies of Globalization'* (Kirmayer, 2006), in which the Author singles out several loci of intra-mundane control that play a crucial role in negatively affecting the development of cultural psychiatry.

Prof. Kirmayer focuses upon a triad of notions which must be acquired in order to exercise our profession: *Culture, Biology* and the *Context of Practice for theory in cultural psychiatry*.

As is prosaically expressed in the paper, it will be the interplay of power between different political, cultural and industrial agencies that will determine what form of psychiatry shall be adopted in the future: "Increasingly, research is controlled by pharmaceutical companies with vested interests in proving the value of their new products [...] In addition to the direct control of research and the production of knowledge, pharmaceutical companies exert tremendous influence on contemporary medical education and practice. Most funding for psychiatric meetings comes from pharmaceutical companies [...] Cultural psychiatry has come to occupy an ironic position vis-à-vis these international systems of power and prestige. For example, cultural psychiatry is one source of ideas for how to effectively market medications. [...] At the same time, it also involves a reconfiguring of other forms of suffering in ways that suit the interests of the pharmaceutical industry."

Now, by simply replacing the nominal predicate of companies from *pharmaceutical* to *theological*, we pave the way for the introduction of a fourth notion: the *notion of religion*.

On deciding to introduce the notion of religion in our epistemology, it comes out clearly that, among the ironies of globalization, lies a specially hard let-down for the West: at the time when the West deems and projects itself as the centre of gravity of cultural globalization processes, it concomitantly starts to show signs of decadence in its characteristic Enlightenment-inspired values, to the point of risking a regression of the current psychological climate towards stances that are more consistent with pre-Galilean times. (Note 6).

More specifically, modern-day neo-spiritualist hybridisation has driven transcultural sciences towards a “do-gooder” version of multiculturalism featuring a considerable amount of tolerance for “diversity”, at least so long as said diversity proves to be capable of adjusting to the spiritual guidelines established by the West. This approach to multiculturalism was echoed by the Vatican’s tendency to enhance the dialogue between religions and between *Science and Faith*, both of which were forcefully promoted under the papacy of former Pope John Paul II.

The ongoing war in the Middle East and its branching out into acts of global terrorism and the emergence of a British passport-bearing terrorist disrupted this tendency and created a counter-opposition between two different conceptions of multiculturalism: on the one hand, the party of *appeasement* which was ready to come to terms with any conception of the world whatsoever and, on the other hand, the more belligerent party which was less willing to surrender any of the powers already acquired by Western civilization, spurred by the conviction that it possesses an anodyne culture rich in universally applicable democratic values and religious truths.

Rather than taking sides with one or the other of these two factions, I think our actions should gravitate around the statement made by Kirmayer: “In the global *agora*, culture itself becomes a commodity and serves as a marketing strategy”. In other words, cultures are never politically inert dimensions but lend themselves to be used as a strategic means capable of exercising a marketing-type of effect on ideas, just as Coca Cola imposed its marketing strategy for taste.

The leit-motif binding together the different articles collected in this issue is precisely the objectification of the effects of silent theological marketing policies on psychiatric theory. We now come to know that the concealed devotion showed by the charismatic players in the history of psychiatry to theological dictates has contributed to maintaining a remarkable theoretical ambivalence vis-à-vis the location of the individual locus of control: a historically determined psyche or divinely established spiritual agencies?

Now, following up on the discourse on the freedom of will, on surrendering our actions over to divine agencies, on shirking all ethical responsibility of human behaviour, on the displacement of the end of time in the illusion of a *Parousia*, seems to be more fitting for philosophical and theological disputes, or medical ethics, or mass sociology than for clinical psychiatry. However, it so happens that the supernatural dimension is currently being incorporated in thaumaturgical and exorcistic practices and is pervasively resorted to by new and culturally impacting figures with the aim of healing both physical and psychic disorders, thus permanently grafting treatment paradigms into therapeutic practices that are not grounded on any of the founding elements of medicine (Bartocci & Littlewood, 2004).

The interbreeding between culture and medicine has nonetheless produced a positive side-effect: it has facilitated the study of the important connection between religious culture and biology. Once we generally recognize that “culture is a biological category”, envisaging thereby the real possibility of a *biological intergenerational transmission* moderated, enhanced or reversed through cultural practices, we risk crossing the threshold of a colossal *cultural paradox*. Modern culture, which once developed under the vestige of the anti-magic dispute which argued against the possibility of (immaterial) intentions affecting biological matter, today in fact re-proposes its belief in the possibility of spontaneous extramundane manifestations capable of acting directly on biological matter: miraculous healings, the sheltered existence of the devout, the all-around protection guaranteed by faith.

The cultural paradox does not simply consist of the patent theoretical inconsistency between the different ways of conceiving the world but also of the marketing and valorisation of highly unlikely beliefs which have a direct impact on the social fabric: whereas there exists a common social acknowledgment of the possibility that divine Agencies (i.e., the notion of God) might alter the course of decisions, behaviour, historical events, illness and death, at the same time scientific

propositions suggesting that religious culture could be a factor capable of modifying the very structure of neural networks (Tseng, 2001; Castillo 1995) are scarcely accepted among society. With this I do not intend to solve this cultural paradox by relying on the primacy of biology but rather to underscore the epistemological weak spots that hinder the effectiveness of cross-cultural research. However, although on the one hand it is generally accepted that “the tendency to portray mental health problems as exclusively determined by biology (or, even more reductively as genetic) is an ideological move that serves certain political and economic interests ” (Littlewood & Lipsedge, 1997), it does not come out half as clearly that the tendency to portray various forms of extramundane forces as the “genetic” agency capable of providing Man with the correct ethics and the right practice in order to free him from all existential conflict and even from disease, serves the political and economic interests of the ideologies promoting them.

What are the factors that make it so difficult to achieve a greater synergy between the practice of cultural psychiatry and the religious domain? What are we afraid of? The Inquisition or to fail in our work? (Note 7)

To fear a professional failure is realistic, especially if we consider the objective difficulty of conducting research on the psychological processes that determine and ensue from religious experiences. We might even say that performing a scientific investigation on the ontology of the supernatural dimension is tantamount to conducting astronomical research on black holes. Unfortunately, the comparison with black holes in astronomy is not merely a metaphor: we lack the binoculars that made it possible to discover Jupiter’s satellites. Despite the amazing progress made in the field of neuroscience, this discipline is still not in the position of making a quantum leap forward in proving the activity of neural matter in the production of the psyche: the “mystery” of the formation of the *qualia* of the “redness of red” (Crick & Koch, 2003). The difficulty currently facing evolutionary psychiatry simply comes down to having to solve the enigma of a *cortical paradox* which cannot only rely on neuroscience in order to be solved. As a matter of fact, it is not easy to monitor in a laboratory the evolutionary steps of a neural mind as it grows, perfects its synaptic performance, processes perceptions and responds to these perceptions and acquires ever-more refined *qualia* on the sense of life, on the sense of being and not being. The realization of the category of nothingness, of the infinite, of the Absolute, seems to have produced a synaptic jam that gave expression, on the outside, to the most unpredictable forms possible. Cultural psychiatry is endowed with the epistemological statute empowering it to investigate beyond the restrictiveness of in-vitro laboratory tests and to track the bio-psycho-cultural process that gradually led from a *feeling of deity*, expressing the hope of freedom and the possibility of transcending the restrictions of the present, to the realization of the actual existence of an *extramundane agency*.

Trying to Escape both from Paradox and Irony

At this point, I think it is operationally correct to re-propose our reflection on the “prescriptive prophetic discourse” (Littlewood & Lipsedge, 1997) according to which the “program of action ought not to be determined from above by reformers, be they prophetic or legislative” but through a lengthy knowledge-acquiring process and a rigorous analysis of both the EXTERNAL factors regulating the osmosis between secular-scientific and theological notions (*context of practice*) and of the INTERNAL bio-psycho-dynamic processes that lead to the building of certainties on the existence of extramundane agencies (biological, cultural, etc.).

Research focusing on these three notions as well as on the notion of religion is becoming increasingly important in our work: it is surely not by chance that also Prof Wen-Shing Tseng, in his capacity of President of the 1st World Congress of Cultural Psychiatry deemed it opportune to

follow the inaugural plenary session devoted to *Migration and Refugees in the world today: the tasks for cultural psychiatry*, with a second plenary session entitled: *Ethnicity, religious faith and mental health: the need for mutual understanding*.

As soon as we try to pursue that mutual understanding which is the founding principle of our discipline, we immediately find ourselves using the term *mediation*, which is becoming increasingly recurring in scientific, religious and political articles as well as in the Mass Media: “If there is any possibility of bridging or reducing the vertical division of the world between North and South, it lies in the capacity to continually discuss and dialogue with a view to recognizing, accepting and overcoming our respective differences” (Note 8).

The article continues by illustrating a paradigmatic example: a message of tolerance is conserved in a corner of the ancient mosque of Saint Sophia in Istanbul which, better than any other appeal against the fanaticism of terrorism, communicates the possibility of integrating different civilizations. When, in 1435, the Sultan Mehmet conquered Constantinople, he turned the largest church of Christianity into a mosque and refrained from destroying all the symbols of the pre-existing faith. Thus, the dome of the apse still features a golden mosaic of the Virgin with Child, surrounded on the two sides by black circles framing the Arab inscription of the name of Allah and of the Prophet Mohammed. The Sultan Mehmet did not destroy that image of Christian tradition but only limited himself to chastely cover it up with a veil.

Unfortunately, scientists are faced with an additional difficulty: they cannot continue lowering and lifting the veil from the objects of their intervention, nor can they conceal behind a pall the mundane origins of the ontological evolution of the sacred dimension. All scholars of the science of cultural psychology are called upon to conduct in-depth investigations on the significance of placing a taboo on mundane areas and on the repercussions of God-imbued psychological climates on individual states of mental health. There are pressing requests being made on cultural psychiatry to induce it to be as accurate as possible in defining the confines between hallucinatory illusions and hope, between a pathological compulsion to repeat and a hearty respect for traditions, between the dictates of ideological fanaticism and actions arising from the wish to live a better life.

Of course, the level of these enquiries exceeds the possible solutions that might be found by a scanty group of cultural psychiatrists but I do think it possible to contribute to the enormous hermeneutic effort that has been made by many civilizations by putting our clinical data to work to at least shake off the shoulders of psychiatry an overly convenient stance: “Religious beliefs are regarded as merely one of a series of cultural values which passively fill in the structure of mental illness which itself results from physical causes” (Littlewood & Lipsedge, 1997).

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Editor-in-Chief

NOTES

1) Oriental “religions”: Buddhism, Confucianism and Taoism are defined as spiritual philosophies, to be differentiated from the revealed religions, and thus cannot be equated with monotheistic religions. See the review of *Asian Culture and Psychotherapy; Implications for East and West*. by W_S Tseng, S.G. Chang, M. Nishizono (2005) in *WCPRR*, V.I (II) 2006. . Also African religions should be treated separately and possibly by local authors.

2) For more in-depth information on the attempt to establish an Association for the Study of Religious Experience in Italy, see: Bartocci G, Rovera GG, Lalli N, Ascoli M. *The History of the Bucke Society for the Study of Religious Experience: a good start never ends*. (*Transcultural Psychiatry*, in press).

3) An example of the pluralistic method is the one promoted in a non-specialized text: “*The Two Cultures and a Second Look*” by Charles P. Snow (1963). With a view to finding a compromise between the freedom of expression endorsed in literature and the restrictions imposed by scientific method, the Author solved the apparent contrast between the approach of a poet and that of a scientist by identifying a common driving force: the humanistic drive towards the achievement of worldly truths. It is a method that might be paraphrased by applying it to the modern-day comparison of the two major keys of interpretation of the world: theology and science.

4) The assertion of the need to build a strong spirituality in the West is clearly expressed in the book: *Without Roots*, by M. Pera & J. Ratzinger (2006) , which is reviewed herein.

5) The superimposition of social and cultural psychiatry is an accepted bias in Italy where the expression “socio-cultural” is still widely used to indistinctly indicate a number of phenomena that should instead be differentiated.

Also internationally, there is the frequent tendency not to differentiate between the characteristics of cultural and social psychiatry.

The WPA suggested the possibility of changing the name of the Transcultural Psychiatry Section into the Sociocultural Section. This possibility was included on the Agenda of the business meeting of the TPS Symposium that was held in Rome in 1997 and was rejected. Later, at the WPA International Congress, Florence, November 10-13, 2004, during the meeting of the Chairs of all the Sections, the Secretary of Sections announced the possibility of a top-down clustering of some of the Sections. As this possibility could also concern the TP Section, I made a contribution to highlight the fact that the TP Section, which I chaired at the time, possessed a sound scientific tradition and production and that we would refuse such a clustering if it were to modify our epistemological statute.

6) Past are the times in which it was possible to exercise a multicultural and relativist practice of faith: the monarch Frederick II, during a devastating earthquake in Palermo and seeing the terror in the eyes of his guests who had fallen on their knees, expressed himself as follows: “Each one of you can indeed invoke the Being that he worships and in whom he believes”. (*Federico II, Immagine e Potere*. Bari, Marsilio 1995, edited by M.S. Calò-Mariani & R. Cassano, page 15)

7) Even in the microcosm of everyday clinical practice, it has become increasingly unseemly for the therapist to show his/her scarce belief in religious creeds (whatever they may be).

8) In *La Repubblica*, 19 August 2006: *The New Crusade of Communication (La Nuova crociata della Comunicazione)*, by Giovanni Valentini

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