The persistence of traditional healers in the 21st century and of anthropology’s struggle to understand them

Kim McCaul
South Australian Crown Solicitor’s Office

Abstract

The persistence of traditional healers in contemporary Aboriginal society is based on the persistence of a worldview that includes non-physical causality and non-physical conscious agents. Anthropology, based as it is in Western culture, does not engage with the experiential foundation for this worldview but limits itself to descriptive accounts or seeks to interpret it through psychological or sociological prisms. This article makes a case for an experiential anthropology and for the analytic use of the out-of-body experience and related research as a useful model by which to interpret Aboriginal accounts of dreams. It suggests that this could lead to a re-evaluation of the practice of traditional healers and open new avenues for cross-cultural engagement in a contemporary environment where traditional Aboriginal culture is increasingly sidelined from public policy discourse.

Introduction

As I write this paper in early 2008 the public imagery of Aboriginal people is dominated by media reports and official inquiries into dysfunction in remote Aboriginal communities: domestic violence, sexual and substance abuse are depicted as endemic, rampant and frequently in disturbing detail. The emotions evoked by these accounts are of utter hopelessness, despair and grief especially when we contemplate the ability of the current generation of children to create a different life for themselves after growing up surrounded by trauma.

At the same time, the South Australian Museum just ran successive exhibitions of contemporary Aboriginal culture, with an emphasis on connection to country: 1) Following Garkman, an exhibition of Yolngu culture, focussed on the frog (garkman)
Dreaming and its significance to a particular Yolngu clan group; and 2) Ngurrara an exhibition of a giant painting prepared by Western Desert people as part of a native title claim. Both exhibitions reflected Aboriginal people’s intimacy and affection with their land. Both conveyed aesthetic beauty and deep spiritual values underlying the creation of the art work on display.

In their telling, neither of the two images I have just outlined seems to intrude on the other. The media accounts of dysfunction make no mention of aesthetic beauty and deep spiritual values. The museum displays give no hint of sexual abuse and rampant violence. It is as if we cannot hold these two images in our minds at the same time, yet in Aboriginal communities they co-exist side by side.

Just as we struggle to conceptualise in one breath social dysfunction with spiritual insights, so I would suggest we struggle to find a legitimate conceptual place for traditional healers in contemporary Aboriginal society. It is surprising that anthropologists have paid little attention to the contemporary role of traditional healers. The defining work on the subject, still, is Elkin’s study, first published in 1945, but based on work during the 1930s and 40s (Elkin 1994). While his account of the supernatural feats of the “Men of High Degree” may still fit with aspects of contemporary practice, the social circumstances in which this practice takes place are dramatically different.

Interestingly, it is Aboriginal people themselves who have taken the initiative to publicise the role of their healers. Notably, the ngangkari (the Pitjantjatjara word for traditional
healer) of the Anangu Pitjantjatjara Yankunytjatjara lands of South Australia’s far north produced a documentary film (in 2002 entitled simply *Ngangkari*) and a book (*Ngaanyatjarra et al* 2003) that offer their account of the work they do.

In this article I will focus on what I think is one important reason why anthropologists have not pursued this seemingly fascinating area of study, namely the difficulty our conceptual framework creates for us in dealing with the metaphysical content of traditional healing practice. I also argue for a rethinking of our approach to allow a more meaningful engagement and demonstrate this through a critique of anthropology’s common conceptualisation of dreams, a key tool in the traditional healing practice of Aboriginal people.

**The persistence of traditional healers**

Throughout this paper I talk about “traditional healers” or simply “healers”. In so doing I intend those terms to include what others may refer to as “men and women of high degree” or “clever men and women”. The purported powers and functions of traditional healers are well documented (Elkin 1994; Hume 2002). Healers use a combination of medicinal plants, physical manipulation and energetic and psychic healing. They may also have other powers, often referred to as “magical” in the literature, such as making rain, influencing wildlife or causing enemies harm, all through psychic means, the use of songs or the invocation of spiritual beings.

It is readily apparent that the practice of healers arises from a worldview that is substantially different from that in which Western medical science practices. While conscious that I am
generalising, I suggest for the purpose of this argument that at the institutional level of Anglo-Australian culture (education, government, medicine, church), the spiritual view of life is limited to a more or less abstract notion of god, perhaps a concept of a personal soul and possibly angels, at least for that part of the population who are practising Christians.¹ On the whole, and leaving aside here the many alternative medicines used by Anglo-Australians, none of these cultural beliefs play a significant role in Western medical practice.

Western cultural discourse is dominated by a mechanistic or linear view of cause and effect. For example if someone has a car accident, any investigation would look for a direct cause: maybe a flaw in the car, the person was speeding or drunk, or an animal suddenly leapt out on the road. Similarly, if someone gets sick medical practitioners look for the illness in the shape of a virus or other physically present cause. Ultimately, most scientific discourse does not conceive of consciousness as existing independently of the physical body, nor of it having the ability to influence physical matter other than the physical body that, from the Western cultural perspective, creates it (Cohen & Rapport 1995:4-5).

In Aboriginal societies on the other hand, spirits and unseen forces of all kind are ubiquitous and consciousness, while not talked about by any such term, is clearly understood to exist separately from the physical body. There are spirits of the dead, of the Dreaming ancestors, of nature (fauna and flora) and of various other types (see e.g. Clarke 2007; Hume 2002; Kenny 2004; Marett 2000; Poirier 1996). There is (usually) no one god, but there are many spiritual beings that are more
powerful than humans and who, while they may enrich human society, for example by revealing songs and ceremonies, are always dangerous if offended or treated carelessly. Causality too, is generally not linear. If we look at the example of the car accident again, people may well recognise a direct cause, for example that the car was faulty. Nonetheless, for many Aboriginal people there will also have to be a further underlying cause as to why the car crashed at that time with those people in it. It is often assumed either that other humans practised sorcery or that the driver had offended some spiritual beings that caused the accident. The following observation by Howitt, now more than 100 years old, is still significant:

It is not difficult to see how, amongst savages having no real knowledge of the causes of disease, which is the common lot of humanity, the very suspicion of such a thing as death from natural causes should be unknown. Death by accident they can imagine, although the results of what we call accident they mostly attribute to the effects of some evil magic. They are well acquainted with death by violence, but even in this they believe ... that a warrior who happens to be speared in one of the ceremonial fights has lost his skill in warding off or evading a spear, through the evil magic of someone belonging to his own tribe. But I doubt if, anywhere in Australia, the aborigines, in their pristine condition, conceived the possibility of death merely from disease. (Howitt 1996: 357)²

This notion of reality continues to have very real consequences. In 2002 the South Australian coroner conducted an inquiry into the deaths of a number of young
petrol sniffers on the Anangu Pitjantjatjara lands. He had been urged to do so by the father of one of the deceased who wanted people in the community to understand that it was the petrol that was killing the kids. The cultural notions of causality described by Howitt were still strongly in place and meant that, even if someone died with a can of petrol in their face, the cause was not seen as being the petrol. The cause had to be malicious magic by some enemy of the family. Thus “revenge” violence was rife for self-inflicted deaths.

It is in this context that traditional healers still play important roles, not only in traditional areas but also urban centres. Western Desert ngangkari regularly attend urban Aboriginal health clinics in Adelaide, Port Augusta and other towns in South Australia. In recent native title inquiries I saw Aboriginal people from communities who no longer have their own healers nonetheless recall the amazing abilities these people had when alive and acknowledge the equivalence of contemporary healers from other communities. These contemporary beliefs in the abilities of traditional healers are clearly related to the fundamental cultural view about the constitution of the human being and the wider world as being multidimensional, that is involving energies and consciousness on dimensions other than the material. As such, they are part of the same cultural schema as the belief that petrol-sniffing related deaths are caused by sorcery.

My argument in this article is that it would be inappropriate to simply dismiss the entire bundle of beliefs equally. Doing so would be ethnocentric and therefore undermine our ability to claim genuine engagement with Aboriginal people and culture.
It would also compromise us as anthropologists in providing translations of Aboriginal culture that can meaningfully inform the policy and process of our culture’s engagement with contemporary Aboriginal societies, including around issues such as petrol sniffing. Healers persist in contemporary Aboriginal society, because their practice and discourse resonates with the experiential reality of Aboriginal people. This invites the challenge to achieve greater understanding of that reality.

The anthropological dilemma

Classical ethnographies on traditional healers are primarily descriptive accounts of their practice and alleged abilities (e.g. Elkin 1994; Howitt 1996; Roth 1897; Spencer & Gillen 1899). Elkin’s account stands out because he expresses genuine respect for traditional healers. Others are often dismissive and belittling, starting from the premise that the healers are impostors who dupe their naïve constituents into believing that, for example, an object they have secreted into their mouth and pretended to suck from the patient’s body actually is the illness, or the magic object causing the illness. In those accounts, the healers are at best considered successful because of the psychological impact they have on their patients in a kind of placebo effect. At worst, they are considered manipulative, seeking their own advantage in the gullibility of their people.

Rarer, and probably less anthropologically informed, is the idealised image of the healer as an enlightened and spiritually superior person (Havecker 1987; Lawlor 1991).
In my view, the work of researchers who are *a priori* dismissive of Aboriginal metaphysical beliefs suffer from ethnocentric limitations, while the more idealistic approach suffers from a lack of social scientific rigour. Neither analysis includes an experiential dimension. In this article I argue that we can construct an account in which the abilities of traditional healers do not need to be denied, but which nonetheless does not lead to romantic idealisation.

The biggest obstacle to framing an appropriate experiential approach is a fundamental paradigmatic clash, or incompatibility, between the Aboriginal worldview and that of Western scientific culture. It is an intellectual gulf that divides the so-called civilised world from Indigenous peoples around the globe, namely the understanding of the nature of reality and human consciousness.

In this paper I focus on the cultural conceptualisation of dreams, which I consider emblematic of this divergent understanding. It is useful to place our current cultural interpretation of dreams in historical context:

[S]ince medieval times in Europe, owing to the role played by the church as censor of the imaginary, dreams and dreaming, which had been so prized during antiquity, were gradually banished from the public sphere, their social uses denied. According to the French historian Jacques Le Goff, after the Middle Ages we witnessed the emergence of a society “whose dreams are blocked, a society which, in the realm of dreaming, has become disoriented.” [citation omitted] The notion of the person as composite and separable so that one’s soul or spirit can temporarily leave the body for
dream wanderings, which was still prevalent in the Middle Ages, came to be considered heretical and, later on, irrational. In his Traité de l’homme, which he started writing in 1633, Descartes proposed a theory that quickly became official in the West and endures to this day. He suggested that dreams are products of the mind and fully psychic events, and that the mind or spirit is bound to the body [citation omitted]. As anthropologists most of us are heirs to this Cartesian tradition, which makes it rather difficult for us, not only to understand other traditions, representations, and practices with respect to dreams and dreaming, but also to consider these seriously and at face value. (Poirier 2003:108-109)

More broadly, the question of what I here call a multidimensional constitution of reality has caused debate in anthropology at least since Lang’s arguments about the appropriate interpretation of spirit beliefs in Indigenous societies at the end of the 19th century (Jedrej & Shaw 1992). In 1935 the Dutch anthropologist Duyvendak predicted that because of the advent of parapsychology, anthropologists of the 20th century would be more careful in their judgment of shamans, medicine men and witchcraft than were those of the 19th century who tended to dismiss such cultural elements as superstitious foolishness (Fischer 1940:2). The Italian anthropologist Ernesto De Martino, following along those lines, draws substantially on parapsychology in his 1948 attempt to establish the likely authenticity of some of the “magical” phenomena observed by anthropologists among Indigenous people around the world (De Martino 1997). More recently, Turner (1992, 1994), based on her own fieldwork experiences,
argued that anthropologists needed to accept the reality of spirits in light of overwhelming experiential evidence.

In spite of these and other attempts to expand social scientific inquiry beyond purely physical dimensions (e.g. Hume 2002) it is fair to say that anthropology remains sceptical. I, however, am choosing to follow the approaches of Turner (1992, 1994) and Hume (2002) in suggesting that there may actually be something in the experiences people are reporting. One of the shortcomings of those approaches, however, is their lack of framework by which to analyse such experiences.³ I have elsewhere proposed a comprehensive model that could be applied to an anthropology of consciousness (McCaul 2003, 2006) and do not intend to repeat the detail here. Instead I will focus on the way in which this model could be applied to the study of dreams as a case in point.

**Dreams**

I discuss dreams as a salient example of the paradigmatic gap between European and Aboriginal society. Other defining elements, such as beliefs in spirits and spiritual energies in nature, are drawn in by a discussion of dream conceptualisation, which in my view is at the heart of the differing worldviews. Tonkinson neatly summarises the situation:

> A different kind of tension, but potentially very important in the land claims process is that between Aboriginal conceptions of reality and Western legal precepts. For example Mardu people with whom I have worked in the Western
Desert described how, during dreams, they would sometimes travel in dream-spirit form to their homelands. In this way they were able to maintain what they would regard as a physical presence in their country no matter where they were actually living. Significantly, these dream-spirit journeys enabled them to continue their vital role in fulfilling the religious imperative of ‘looking after country’. The Mardu would be in no doubt that this cultural element satisfies legal requirements for evidence of ‘continued occupation’ of traditional territory. However, in a court of law or a Tribunal hearing, operating according to Western legal precepts, such ‘presence’ would surely be regarded as at best metaphysical, hence of dubious validity in that it cannot be subject to proof or disproof. (Tonkinson 1997:7)⁴

I do not think the conceptual tension identified by Tonkinson is limited to being with Western legal precepts. In Western scientific discourse generally, dreams are firmly anchored to the human mind and body. Depending on whether one’s emphasis is biological or psychological they are viewed as arising in the grey matter of the brain or the subconscious mental processes of the individual. This interpretation is adhered to by researchers of all persuasions, including those who examine lucid dreaming, i.e. the ability to gain awareness in and control over one’s dreams (Gakenbach & Bosveld 1989; LaBerge & Gakenbach 2000). There really is no conceptual opening to allow for “dreams” as having an equivalent kind of energetic reality to waking experiences. So traversing traditional territory or encountering deceased relatives (another frequent dream experience in Aboriginal Australia, e.g. Poirier 1996), according to standard scientific discourse, are by force
limited to being expressions of psychological desires. This follows naturally from the overarching paradigm of most scientific consciousness research which stipulates that consciousness resides in the physical brain (Cohen & Rapport 1995:4-5) and therefore can neither leave the brain on nocturnal journeys nor continue to live disembodied from it.

By contrast, Aboriginal societies, like the Europeans of antiquity, generally attribute “dreams” to activities of the human spirit which leaves the human body and travels about while the body is sleeping. While this is considered a common human ability, traditional healers are usually especially adept at this. These special people engage in important business on their spirit journeys. They may be fighting spirits who are bringing disease to the community, conducting rain making rites, obtaining new ceremonial songs and dances and generally interacting with the powerful “Dreamtime” ancestors (Berndt 1947; Hercus & Koch 1996; Hume, 2002; Howitt 1996; Lommel & Mowaljarlai 1994; Marrett 2000; Poirier 1996; Tonkinson 1970).

Waking and dream life as experienced by Aboriginal people are closely interrelated. Psychological approaches readily acknowledge that waking experiences may influence our nocturnal life, but for Aboriginal people the reverse is perhaps even more significant. Lohmann (2003a:11) uses the concept of “night residue” to describe what he interprets as the transfer of schemas from the sleeping state of consciousness to the waking state. While I consider this a useful analytical tool in some cases, I think it offers an unsatisfactory explanation for such a complex series of events as the following:
Some years ago, the monsoon being late in arriving, the rainmaker visited Kutal [a rainmaking site] in his dream. He arrived at the site, and to his great dismay realised that the sacred object had disappeared and he therefore could not meet the [Dreamtime] serpent. After returning to his camp he became seriously ill, having been deeply affected at the very core of his identity. He suspected that the elders of the neighbouring community had visited Kutal in a kapukurri [dream] and stolen the object from there. His classificatory brother visited the place in a dream to look for additional clues and noticed a new pile of sand. Upon awakening he informed the rainmaker of this who immediately returned to Kutal in a dream. Finding the mound of sand he disinterred the sacred object. Some days later the rain finally arrived. Having recovered his health, he did not hesitate, on a visit to the neighbouring community, to reprimand those who he suspected of having buried the sacred object and so barred communication with Kutil. (Poirier 1996:213, my translation)

This account describes physical repercussions from dreams, such as the sickness of the rainmaker and the rebuking of the neighbours. The concept of “night residues” may perhaps explain how images of misfortune can lead to illness by way of somatisation, and how social disharmony may result from the cause of negative dream experiences being attributed to other people. It does not, however, shed any light on the conception of a shared dreamscape, an environment that is clearly perceived to have solidity similar, or even equal to that of the physical universe. This view underpins the rainmaker’s assumption that others visited the place and removed the
object, and the brother’s ability to visit the same place and identify clues that are then pursued again by the rainmaker.

This notion of an existing, shared reality is also reflected in the account of joint dreams in which two or more individuals share experiences, a common occurrence according to Poirier’s work and also reported by Pitjantjatjara *ngangkari* (traditional healers), as in the following account:

*Anangu* doctors work with the spirit of the sick person, both when he or she is awake and when he or she is asleep. *Ngangkari* work at night when all is quiet, gliding among people’s sleeping spirits similar to the way an eagle soars. *Ngangkari* have special tools called ‘*apanpa’*. *Ngangkari* travel in their spirit bodies at night, meeting up and conferring with each other. *Ngangkari* do not travel like this in ones and twos; they gather in large groups from extensive areas (Ngaanyatjarra et al 2003: 15)

How do we make sense of these accounts? Is such a group spirit journey an example of collective hallucination? Was Tylor correct when he suggested that Indigenous (he used the term “primitive”) people could not tell the difference between dream and reality (Jedrej & Shaw 1992:1)? Are such discourses simply social constructions, related publicly to assert or maintain a role of influence?

At present, anthropologists would be forced to adopt one of the above, or a similar interpretation, because one thing is clear: the experience cannot be real. That is unless we alter the paradigm by which we seek to understand “dream” experiences.
The out-of-body experience

More than 30 years ago Mitchell wrote that “the only basis for rejecting the evidence of psychic research is prejudice and diehard stubbornness…” (Mitchell 1974:46) and more recently Radin compellingly showed the laboratory evidence for a number of so-called psychic phenomena (Radin 1997). These include telepathy and the ability of the mind to produce effects in matter without the use of obvious physical devices (psychokinesis). The significance of this kind of research, which has been conducted since the late 19th century, is that it “requires us to expand our world view from a world that is only material to one that also has mind as some kind of independent reality in itself, capable of sometimes doing things that transcend ordinary physical limits” (Tart 1998:76, emphasis in original). The manner in which many in academia still dismiss such research without actually engaging with it, suggests an instinctual, culturally imbued resistance to its implications. As such it risks being a form of anti-scientific fundamentalism.

The so-called “out-of-body” experience (“OBE”) does not enjoy the same scientifically tested validity. I argue, however, that it offers a viable model for anthropology and that, as far as theories about “dreams” are concerned, it has as much scientific support as any other.

I must acknowledge that this proposition is still highly unconventional. The following passage provides a clear account of the current scientific position on the out-of-body experience:

The out-of-body experience does not enjoy the same scientifically tested validity. I argue, however, that it offers a viable model for anthropology and that, as far as theories about “dreams” are concerned, it has as much scientific support as any other.
Throughout the history of OBE research, two general perspectives have guided both research and theory. On one hand, some researchers have suggested that “something” literally “goes out of the body” during an OBE. Alternatively, others see the experience as “imaginary” in nature. I refer to the former perspective as the projection model and to the latter as the psychological model. … The dominant model in OBE studies, by far, is the psychological one. In fact most recent OBE research has investigated the assumptions of the psychological model in one way or another (…). There are many reasons for the domination of this model. One is the fact that contemporary psychology, as well as science at large, is hesitant to propose explanations that contradict current paradigms. But in all fairness, it should be noted that little evidence exists to support the projection model; furthermore, this model presents myriad obstacles to scientific testing. In contrast, the psychological model is far more amenable to systematic investigation. (Alvarado 2000:200-201)

Obviously here I am proposing what Alvarado calls the projection model, that is the assumption that people actually leave their physical body in some other vehicle of manifestation. It is a working hypothesis that, in my view, is especially appropriate for anthropologists because it actually accords with the conceptualisation of the majority (although not necessarily all) of the world’s Indigenous peoples (see e.g. Jedrej & Shaw 1992; all contributors in Lohmann 2003b). On the basis of data from the Human Relations Area Files (HRAF), Shiels finds that “OOBE [Out-of-Body-Experience] beliefs appear in about 95 percent of the world’s cultures and that they are striking in their uniformity even though the
cultures are diverse in structure and location” (Sheils 1978:697).

One question that arises for me is this: On what basis would I assume that the many Indigenous and non-Indigenous people around the world who report these experiences are mistaken in their beliefs about them? The primary reason, it seems to me, is culturally based disbelief. In Western culture “scientific people” do not generally believe in these kind of experiences. To that extent, anthropology’s initial engagement with this sort of data is not built on genuine science but on cultural instinct.

As Alvarado in the above quote points out, scientific experimentation with the out-of-body experience is challenging. There are a number of reasons for this, but the principal ones are the difficulties of producing physically measurable effects during such an experience. Nonetheless, at least two experiments did succeed in providing interesting, albeit not conclusive evidence.6

The most significant laboratory studies of the out-of-body experience were conducted by the psychologist Charles Tart. In his studies, individuals with the self-declared ability to leave their body were asked to do so and identify certain targets that they were not physically able to see. In his initial groundbreaking study, a young woman correctly identified a randomly generated target number on the last of five nights of experiments. The number had been placed in such a position that it was impossible for the subject to access it by any physical means (Tart 1968). In a subsequent study a middle aged man did not succeed in identifying numbers, but he did correctly observe and report on unexpected facts that he could
not have observed physically, namely that the lab technician was away from her position and conversing with a person later identified as her husband (Tart 1997). By experimental measures these were the most compelling tests conducted by Tart, although some of his other studies were also interesting if more ambiguous. Clearly they do not carry much weight by scientific standards of replicability.

It is my argument, however, that if we combine this experimental data with the numerous autobiographical accounts of people who have had out-of-body experiences and written about them in detail (e.g. Borges & Costa 1999; Buhlmann 1996; Eby 1996; Engel 1995; Howell 1988; Lischka 1989; Monroe 1978, 1992, 1994; Vieira 1997, 1999) we are entitled to adopt the working hypothesis that people do have the experience of being conscious while temporarily separated from their physical body. It certainly provides the most satisfactory explanation for the kind of experiences reported above by Poirier and the ngangkari.

In summary, I am proposing that we engage with Indigenous accounts of “dreams” on their own terms as far as treating them as real out-of-body experiences is concerned, that is we accept that people are indeed leaving their physical body in another vehicle of manifestation and engaging with other people, both alive and “dead” on other dimensions of existence. The hypothetical premise for this approach is that consciousness can exist apart from the physical body, both while we are still alive and after the death of the physical body. In those conditions it exists on another dimension, or energetic frequency (Buhlmann 1996; Monroe 1978; Vieira 1999).
Consequently, I refer to this as a multidimensional approach to consciousness.

This does not mean, however, that all other understandings of “dreams” have to be discarded. Vieira (1999:532-534), a key proponent of the projection model, suggests that there is a continuum of experiences; starting with purely oneiric imagery, in which the images are happening to a dreamer who has no self-awareness, shifting to states of semi-lucid dreaming where people have moments of self-awareness and decision making skills and culminating in experiences of complete lucidity and self-consciousness of being outside the physical body.

The current anthropological convention of denoting this entire continuum with the one term, “dream”, prohibits us from distinguishing the variety of experiences actually occurring. To improve our analytical tool-kit we should draw on the literature of both the out-of-body experience and lucid dreaming research and also consider conducting self-research of our own nocturnal experiences. While there are some precedents for introducing personal extraordinary experiences into our ethnographies (Goulet & Young 1994a; Stoller 1987), introducing our dream-life, or perhaps OBEs, is still rare (Zurfluh 1981).

**Implications of the proposed approach**

What benefits are there for anthropologists in adopting a model that, while defensible, is certainly still located at the scientific fringes? Goulet and Young (1994b) argue that accepting the reality of spirits and denying their existence categorically are both equally unscientific attitudes, because
neither view is ultimately verifiable. They believe “that neither such conclusive evidence for or against the existence of spirits, nor a belief in spirits, is required to attend to and make sense of a wide range of extraordinary experiences” (Goulet & Young 1994b:325). They aspire to models that suffer neither from “going native” nor from “methodological atheism”. I agree that one can make social scientific sense of extraordinary experiences without adopting a multidimensional perspective. However, any analysis based on an acceptance of non-physical consciousness as an experiential reality naturally starts and ends with a fundamentally different vision of human existence and as a result will open up entirely new avenues of inquiry.

An initial benefit will be a different kind of engagement with our informants. During a visit with a ngangkari, which I will describe in more detail below, I explained to the interpreter that I considered “dreams” to involve out-of-body experiences in which I left my physical body in another. He became very animated at this mutually shared interpretation and it established a positive basis for our interaction. While I have not yet had an opportunity to test this assumption in the field, I suggest that approaching informants on this topic from a basis of a mutual understanding would open up conversations that may not become available if they detect scepticism of their interpretations on our part.

Working with a multidimensional hypothesis also increases the potential of anthropology’s contribution to the scientific discourse of consciousness research, albeit that such research
on the whole does not itself adopt that hypothesis. In an interview in the 1970s on the subject Margaret Mead argued:

The trouble with this whole field [of parapsychological research is] … they either want to prove that it is true, or that it isn’t true … They already have their conclusions … they don’t want to find out exactly what is there … It is this kind of thing that I regard as totally unscientific. You have to realise that in culture after culture the gifted sensitive always doubts himself. You know I advocated, and I still am advocating … that the sensitives are a special type of people … they occur with about the same frequency in every culture whether they are picked up or not … The seeming disparity between cultures is accounted for by whether the culture does pick them up or not. (Mead in Schwartz n.d.: 16)

There are a number of relevant points in this quote. First is the comment about researchers wanting to prove that “it” is true or not true and entering the field with certain preconceived conclusions. The “it” in that passage is undefined, but from the wider context refers to psychic phenomena generally. In this paper I am suggesting that we can adopt a particular hypothesis, and that adopting this hypothesis will put us in a better position to “find out exactly what is there” than the currently dominating hypothesis, which could essentially be summarised as assuming that there is nothing there; nothing that is apart from cultural imagination, metaphor or symbolism.

In approaching this subject in a more open minded way, but also with a solid grounding in the relevant literature (and ideally self-observations), anthropology could make significant
contributions to the study of the as yet little understood out-of-body experience. Anthropologists have potentially privileged access to cultures that value people who Mead calls “sensitives”, which I interpret as individuals with a heightened sense of perception and introspection. The apparent facility of many Indigenous people to induce out-of-body experiences offers a fertile ground for research, valuable to anthropology and more broadly our understanding of human consciousness.

Revisiting traditional healers from a multidimensional perspective

I would now like to bring the discussion back to the traditional healers of Aboriginal Australia and the imagery with which I started this paper. In our imagination, traditional healers clearly belong to the sphere of the museum exhibitions to the extent that they are associated with deep spiritual values and close intimacy with land (see e.g. Lommel & Mowaljarlai 1994; Ngaanyatjarra et al. 2003). Commentary on community dysfunction rarely evokes images conveying any sense of the existence of Indigenous healing processes. The focus is usually on some sort of outside intervention to address the issue. In a recent discussion of the tensions of Western processes of justice and health with those found in Aboriginal customary law, especially where the former try to incorporate the latter, Sutton (2006) actually identified traditional healers as part of the problem.

Traditional Aboriginal healers may publicly oppose surgery and blood transfusions, teach that injections do not work, deny the germ theory of disease and thus effectively proclaim the safety of
squalor, encourage delay in hydration treatment for infants suffering severe diarrhoea, and advertise their own treatments as being highly efficacious in the face of evidence of massive Aboriginal ill-health. Despite this, such healers are still employed by a government-funded health delivery system that is based on science and its reliance on empirical evidence and methodological doubt. … Well-meaning whitefellas who support traditional doctors in their quest to peel back the postcolonial power differential have to face the fact that, with the likely exception of palliative care and possibly that of mental health care, traditional healers who promulgate such views as I have mentioned are likely to constitute a danger to the already disastrous health of the communities. (Sutton 2006:162-163)

I think this passage is problematic on a number of levels. Firstly, the basis for the comments about healers opposing medical practice is unclear. There may of course be some individuals in that position, but I do not believe it is appropriate to generalise without qualification. The ngangkari publication (Ngaanyatjarra et al. 2003), also cited by Sutton, emphasises their special focus on mental health and speaks consistently about cooperation between Western medical practice and healers. It also acknowledges their limitations in dealing with new diseases such as diabetes, and conditions caused by drug and petrol abuse. Similarly, Aboriginal health services that regularly use ngangkari in South Australia do so in conjunction and as an enhancement to Western medical practice. The fact that the Aboriginal population suffers massive ill-health is no more evidence for the inefficiency of traditional healers than it is for the inefficiency of Western
medical practice, which is actually the dominant health practice even in remote Aboriginal communities. Rather, in my opinion, it is the result of life-style choices “made” by many contemporary Aboriginal people.  

More significantly, the above depiction does not really engage with the practice of healers and implicitly dismisses their methodology as irrelevant to health-care. One key feature of this methodology is of course the OBE. The following quotes are from four different ngangkari interviewed for the ngangkari publication of the Ngaanyatjarra Pitjantjatjara Yankunytjatjara Women’s Council:

During the night, when they were all asleep, the spirit bodies of the ngangkari would start to rise up from their sleeping bodies and soar upwards. Now, you know how people fly around in aeroplanes and drive around in cars? Well, for Anangu, and for Anangu ngangkari, when they are asleep at night, their spirits move around in a similar kind of way. The ngangkari could be men, women or children. Their spirit bodies begin to fly around and to visit the sleeping spirits of other people to make sure all is well. … The spirit of a sick person is usually too ill to fly properly, and often it crashes into trees. This is when the ngangkari’s night time work is very useful, because they will see the injured spirit holding onto the trunk of the tree, or rather, not on the trunk of the tree, but fallen on the ground at its base. The ngangkari will come up and rescue the spirit. In doing so, the ngangkari is able to recognise who it is and will say, ‘Oh, this is such-and-such. He is not well. Poor thing, he needs help here.’ So the ngangkari will pick up the spirit and take him to the body and ask the sleeping person to wake up. ‘Wake up.
Your spirit is not well. Sit up and I’ll put you to rights.’ The person will sit up, the ngangkari will replace the stricken spirit, and all will be well again very soon. By the next day the person will be quite better. This is a very special skill which us ngangkari alone have. (Ngaanyatjarra et al 2003:33-34)

Just say a sick man approaches a wati ngangkari around a certain time of day. The ngangkari won’t know the exact time but he’ll look at the sun and he’ll say, ‘Come and see me tomorrow when the sun is in the same position again.’ The sick man will reply, ‘OK, no problem.’ He’ll go and sit in he shade for the rest of the day. That night, the ngangkari will go out in his marali spirit body and heal the sick person through his spirit body. Meanwhile the sick man will be sleeping in his wiltja - shade shelter. By the next morning he will be well again. (Ngaanyatjarra et al 2003:37)

I became a ngangkari when I was only a child. At a young age I learnt how to travel to the sky in my spirit body. Ngangkari always do this. It is one of our very special skills. My father used to take me up and we would often travel around the skies together in our spirit bodies. (Ngaanyatjarra et al 2003:40)

This was in the early days when we were still living in the bush … I was travelling around in my marali - spirit body - quite often at the time. I gained more skills when I was travelling around in my spirit body because when ngangkari do that, they get to see and hear sick people calling out for help. People, children and adults, ask for help in their dreams. Their spirit calls out for help, and our spirit bodies
hear them and go to them. (Ngaanyatjarra et al 2003:60)

These accounts of spirit journeys are a far cry from the kind of laboratory work conducted by Tart, but they are not dissimilar to some of the autobiographical accounts by self-professed OB experients (Borges & Costa 1999; Monroe 1978; Vieira 1997). For the purposes of my argument here it is not essential that we accept the veracity of these accounts, but that we do not simply dismiss them because they do not conform to our notion of reality. Maybe there is something in the traditional healers’ perspective on the human constitution and health and in the perception of their clients that they are benefiting from seeing them. The fact that they do not necessarily share our understanding of health and disease does not automatically discredit their own. This is not cultural relativism, nor is it an argument motivated by a “quest to peel back postcolonial power differentials” (Sutton 2006:163). Instead it is a call for an unbiased approach to understanding another culture, including its subtler (albeit highly significant) aspects and in so doing developing more effective models of engagement.

The OBE and the experiential reality it conveys of non-physical dimensions plays a significant role in constructing the Aboriginal worldview and as such is an important topic of anthropological research. The fact that anthropologists do not fully understand or even believe in phenomena such as the OBE does not need to be a bar to anthropological research. On the contrary it places us in an ideal position to seek to identify “what exactly is there”, to use Mead’s words again (Schwartz n.d.:16).
A key to such research, in my view, is being candid about relevant experiences that we as anthropologists may have had, such as the following, which while not involving OBEs still challenged my understanding of myself.

In 2006 I paid $50 for a consultation with a Yankunytjatjara ngangkari who was visiting Adelaide. The visit took about 15 minutes and went something like this. The ngangkari was in a room together with an interpreter. I was asked to take off my T-shirt and sit on a chair. The interpreter told me that the ngangkari would inspect the status of my spirit to make sure it was properly in place. He would also check if I had any negative energies attached to me. The ngangkari approached me from behind. He rubbed my back in a couple of spots, my shoulders and my chest. He walked to a door that led outside to, I was told, throw out some negative energies he had extracted. At the conclusion I was told that my spirit had been slightly out of alignment with my body, and the ngangkari had put it back in place. I should avoid hot drinks as they might frighten my spirit out again. That was it. We exchanged some pleasantries and I left, feeling somewhat “underwhelmed”. I had expected something more dramatic, perhaps akin to Rothwell’s account of his consultation that involved sucking and removal of bad blood (Rothwell 2003). As with Rothwell, however, my experience did not finish after the consultation. As I walked back to the office I felt light-headed, and somewhat fragile. I went home early that day and straight to bed. The following day I still felt a little odd; there was a sense of inner peace, but I also still felt fragile as if some sort of inner, psychological, reconfiguration was taking place. I do not
have any explanation for these sensations. From my own perspective I certainly could not associate them with any of the specific actions that the *ngangkari* had taken on me. Yet, it would be disingenuous to deny their experiential reality.

As others before me I would advocate drawing on those experiences in our ethnographic discourse to help us understand the emic perspective of our informants but also to broaden our understanding of the human condition as it applies across cultures (Goulet & Young 1994a).

In doing so, it invites a new inquiry into the potential health-care capacities of healers, even if that means facing the challenge of the ambiguity surrounding their status. Just as social dysfunction and deep spiritual values seem to coexist in Aboriginal communities, so the traditional healers may be powerless to assist with some issues, and maybe as Sutton suggests even complicate matters by introducing a different perspective on health. Yet perhaps they can also provide other insights and models that could make significant contributions if engaged with appropriately. A key challenge is not to mistake the subtle, low-key nature of their work for inaction, nor to simply lose sight of it in the face of the overwhelming images of social dysfunction surrounding their practice.

**Conclusion**

I have proposed a renewed engagement with some of the more esoteric aspects of Aboriginal culture, based on an unbiased approach and borrowing from certain areas of consciousness research. While the phenomena associated with traditional healers may seem esoteric, I do not think that
their significance can be underestimated when it comes to us trying to understand the contemporary social problems that we are witnessing in communities.

The real risk that I see with the current discourse in Aboriginal affairs is that many of the loudest voices speak in absolutes. Rhetoric on one side suggests that all past attempts of allowing traditional law and custom to play a role in Aboriginal self-management, be it in health or justice, have failed and that the time has come for an outside intervention that is not slowed down by good but misguided intentions of cultural respect. On the other side people are advocating a maintenance of the status quo, with some extra funding for essential services.

The side people take in that debate seems to be determined by where they place causality for the many terrible social dramas that are reported from Aboriginal communities. For some the cause seems to primarily rest in Aboriginal culture, while for others it is a direct result of the colonial experience. There are of course those who feel that whatever the original cause, circumstances are such that a radical intervention is required to provide any chance of ending the cycle of dysfunction for the coming generations. While I personally subscribe to a version of this last view, I still believe that there is scope for more nuanced engagement between cultures. Meaningful engagement with the role of traditional healers is a case in point. As people who seem to have special abilities in achieving OBEs, they play a key role on the traditional processes underpinning social change in Aboriginal society (Glaskin 2005; Poirier 1996).
It is generally agreed that virtually every aspect of traditional Aboriginal society was governed by interpretations of the Dreaming laws. These were of course handed down by word of mouth, but they were also a living body of laws, continuously interpreted and developed by those people who had access to the Dreaming ancestors, usually achieved by way of “dreams”, or as I have suggested here, possibly OBEs.

In my view, millennia of a life so substantially influenced by dream experiences are likely to lead to individual and social actions that are based on motivations, intentions and priorities that would be very hard to comprehend by people whose life is largely uninfluenced by such experiences. In other words, in embracing aspects of the now dominant culture, Aboriginal people may do so in ways that do not meet the expectations of members of that dominant culture, based on motivations and intentions arising from non-physical priorities. It seems to me that, if we intend to engineer change, which is arguably what many policies aimed at Aboriginal communities are designed to do, then we should at least be mindful of “dreams” as a key ingredient to social change in Aboriginal culture.

Notes

1. Of course there is a substantial number of people who believe in life after death, ghosts and reincarnation and there are a number of popular television shows on these topics. Nonetheless, at the institutional level, which plays a crucial role in our social reproduction, these beliefs are not generally accepted or used in decision making.

2. Howitt’s use of the term savages is clearly offensive today. The fact that it was acceptable at the time he wrote is evidence of the attitudes with which some anthropologists
approached the societies they studied, and does not bid well for an unbiased engagement with those societies.

3. Turner (1992) in fact questions whether such a framework is at all possible.

4. It transpired that Justice French of the Federal Court actually considered these dream spirit journeys to be supporting evidence for the maintenance of connection with country in finding that the Mardu people hold native title. *(James on behalf of the Martu People v State of Western Australia [2002] FCA1208, paragraph 8).*

5. This is of course again a generalisation. There are a significant number of modern Europeans who hold these kind of beliefs, but as stated earlier I do not see those engaged with at the institutional level.

6. Not conclusive of the occurrence of an actual OBE. The only alternative explanation, however, (barring outright fraud) would still involve some sort of extrasensory perception.

7. It is of course a moot question to what extent Aboriginal people are choosing their current life-styles and to what extent they are thrust upon them due to social, cultural and economic factors arising from colonisation.
References


Howitt, A.W. 1996 [1904] *The Native Tribes of South-East Australia*. Canberra: AIATSIS.


Anthropology's prioritization of the emic perspective (insiders' or research participants' view) allows us to document and bring forward the voices of people who are often muted in the design and implementation of policies and, therefore, not adequately represented in existing service models (Deitrick et al. 2010; Johannsen 1992). Many anthropologists approach their research as a collaborative process, using methods to promote the participation of a wide range of stakeholders (Lamphere 2004), and in some cases, even allowing the people they work with to play a leading role in Strategizing national health in the 21st century: a handbook. Yet Tylor's approach to religion as a mode of explanation and understanding (and his implicit comparison with science) persists to the present day, undoubtedly because the earlier questions about illusion and ultimate reality, and the ethical issues with which they are associated, remain open to debate. At the turn of the 21st century, topics at the forefront of anthropological research on religion included moral imagination, cognition, subjectivity, secularization, the changing relations of church and state, religion and science, religious pluralism, migration and pilgrimage, religion and ecology, ethics, and social justice. Anthropologists have struggled, perhaps more than other social scientists, with the temporal dimension of our research and writing. We have often been guilty and have castigated.