

## Some Culturally/Religiously bound phenomena

### Lecture 6

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## Learning Objectives – Lecture 6

By the end of the lesson the learner should be able to:

- Define or describe the following culturally and/or religiously peculiar phenomena: Jerusalem syndrome, previous birth experiences, Snake-Handling, Fire-Walking, and mass hysteria.
- Offer tentative 'scientifically' based explanations and interventions;

## 1. Jerusalem Syndrome

- Includes a range of abnormal Strange behaviours related to holy places.
- Often it is a form of fasting – leading to starvation – associated with holy places – particularly Jerusalem.
- It is a form of eating disorder associated with religious motivation.

Kalian et al. (2008). "Spiritual starvation" in a holy space – a form of "Jerusalem Syndrome". *Mental Health, Religion & Culture*, 11(2), 161–172

## Jerusalem Syndrome - History

- The earliest detailed "case" of the syndrome is that of Ranieri, patron of Pisa, who displayed an admixture of piety and unusual behaviour while in Jerusalem in the 12<sup>th</sup> century (Kedar, 2003).
- The first medical descriptions are recorded by Dr Heinz Herman, a pioneer psychiatrist in the land of Israel during the early decades of the 20<sup>th</sup> century (Herman, 1937).
- In modern research, it has been noted that about 18% of the tourists who need psychiatric hospitalization in Jerusalem display significant features of the syndrome (Kalian & Witztum, 1998).
- In extreme cases, involuntary hospitalization is required due to self-endangering behaviour, such as in the case of a male who performed genital self-mutilation (Zislin, Katz, Raskin, Strauss, Teitelbaum, & Durst, 2002).

## Why Jerusalem Syndrome?

"Jerusalem syndrome" is a rather dramatic, cultural–religious phenomenon, rarely displayed by pilgrims and tourists visiting the Holy City. Jerusalem, the "axis mundi" of faith, is perceived as the arena where great events are about to occur. This eschatological core element leads to a situation where boundaries between reality and imagination are blurred. For some vulnerable individuals (mostly with previous recorded psychiatric history), the extraordinary and overwhelming mental experience of facing the holy space of Jerusalem might yield an emotional response that exceeds an adequate reaction.

Kalian et al. (2008). "Spiritual starvation" in a holy space – a form of "Jerusalem Syndrome". *Mental Health, Religion & Culture*, 11(2), 161–172

## 2. Previous Life Experiences

Reported in South Asian Culture; cases verified on the basis of similarity between the deceased and the claimant:

- In birth marks; In behavioural patterns: unusual eating, drinking, sexual habits; phobias; animosities; etc.

And dissimilarities in social status, etc or lack of possible contact btw families of the deceased and claimant.

Tucker, J. B. (2000). A scale to measure the strength of children's claims of previous lives: Methodology and initial findings. *Journal of Scientific Exploration*, 14, 571–581.

### Ogbanje or abiku in Nigeria

- *Ogbanje* (in Igbo) and *abiku* (in Yoruba) refer to people who are believed to cycle rapidly and repeatedly through birth and death.
- A consecutive sequence of births and deaths of infants in the same family leads to belief that the same child is dying and being born over and over again.
- The Igbos believe that ogbanje results from subversion of human destiny by willful alliance of the newborn with deities ;
- The Yoruba attribute many abiku to possession of a pregnancy by spirit pranksters most often referred to as *emere*.

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### Ogbanje or abiku in Nigeria

- Surviving persons manifest abnormalities of psychological life with vivid fantasy life or dreams characterized by the presence of water, orgiastic play with unfamiliar children, and frightening contact with a water goddess—mammy water.
- Labelled children and adolescents often exhibit manipulative, histrionic personality disorder (excessive attention seeking), and other maladaptive behavior. They may also be gifted.

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### 3. Snake-handling Christians

- “And these signs shall follow them that believe ... They shall take up serpents; and if they drink any deadly thing, it shall not hurt them.” (Mark 16:17, KJV).
- Common among some churches in the U.S in some Appalachian states (West Virginia, Kentucky and Tennessee).
- Several have died handling snakes... yet how why does the practice continue?



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### Appalachian states



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### Justification of lack of fulfilment of Prophecy: A psychological Process

- At least 71 people have been killed by venomous snakebites during religious services in the United States.
- The pastor was not holy enough!
- God is not happy with the congregation!

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### 4. Fire-Walking



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## Fire Walking: Anastenaria

- **Anastenaria among Greek Orthodox Christians:** Each May in some northern Greek villagers walk barefoot across a bed of burning wood coals as part of a three-day celebration in honour of Saint Constantine and Saint Helen.
- Similar rituals are present in Spain, Fiji Islands, and among Hindus in Tamil Nadu;
- Also in use in some modern “mind-over-matter” training.

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## Fire-walking: Explanations

- In religious contexts, the feet not being burnt is attributed to divine powers (or the miracle by saints as in the case of the Greek feast);
- In secular contexts, it is used to demonstrate that mind has power over matter;
- However, it is simply possible that because of principles of thermal-conductivity a wet feet contacting softly over embers (rather than fire) may not have sufficient conductivity to cause burn.

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## 5. Mass Hysteria

- Also known as: mass delusion, collective obsessional behaviour.
- “Mass hysteria refers to a spontaneous, *en masse* development of identical physical and/or emotional symptoms among a group of people, who usually share a common attribute e.g. a school, church or village” (p.43).

Nakalawa, L., Musisi, S., Kinyanda E., & Okello, E.S. (2010). Demon attack disease: a case report of mass hysteria after mass trauma in a primary school in Uganda. *African Journal of Traumatic Stress*, 1(1), 43-48.

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## Mass Hysteria in Europe

- In 1374 in Germany, hundreds of people were seized by a compulsion to dance for days, even weeks, without pausing to eat or sleep.
- This epidemic spread like wild fire through North Eastern France and the Netherlands (Waller, 2009)
- In 1518, another explosive case was reported in the city of Strasbourg that affected about 400 men, women and children (Waller, 2008).
- A nun, Mother superior Jeanne De Anges who fell into a dissociative state in which she accused a local priest Father Grandier of plotting with the devil to make her lust for him. Within days, several of her sisters had followed suit, all pointing the finger at the priest, who was consequently charged and burnt alive (Waller, 2009).

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## Mass Hysteria:

A common phenomenon in girl schools in East Africa?

- **Tanganyika laughter epidemic:** In 1962, three girls schools were affected by mass hysteric laughter, affecting up to 50% of students – later also two boys schools; none of the staff were affected;
- In 2008, 20 girls fainted in a school in Tabora while taking an exam;
- Violent running mania in Mbale Uganda in 1968, characterised by a sudden onset of agitation, talkativeness and attempted assault.
- In the 1980's, boarding secondary school girls in Ndejje Secondary School were attacked by mass abnormal dancing gaits.

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## Antecedents to Mass Hysteria

- **Individual trauma:** sexual abuse; threat of parents being divorced; abuse by step-mother;
- **Collective Stress:** strict headmistress, exams, bullying, disliked programme;
- **Conducive environment:** the context is enmeshed with the ‘spiritual’.

Nakalawa, L., Musisi, S., Kinyanda E., & Okello, E.S. (2010). Demon attack disease: a case report of mass hysteria after mass trauma in a primary school in Uganda. *African Journal of Traumatic Stress*, 1(1), 43-48.

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## Dynamics of Mass-hysteria

- “Epidemics of hysteria rely on the power of suggestion, but they are nourished by fear, sadness and anxiety.
- “Victims tend to be subject to severe psychological strain over the preceding weeks or months. One or more then develop a psychosomatic symptom, and those made suggestible by pent-up anxiety quickly follow suit.
- “Women and girls are nearly always over represented among the victims of these outbreaks. In fact a gender imbalance is often a giveaway that the epidemic is not organic.”

Waller, J. (2008). Falling down. *The Guardian* (London). Retrieved on 06/12/14 from <http://www.theguardian.com/science/2008/sep/18/psychology>

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## Possible Interventions for Mass Hysteria

- Do not panic; use science respecting the beliefs of individuals;
- Therapeutic intervention for individuals;
- Trace antecedents by analysing patterns;
- Perform collective rituals: common prayers, building monument if there was a collective trauma; cut-down tree if the tree is causing the ‘attack’!

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## Mass-hysteria - References

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- Kagwa, B. H. (1964). The problem of mass hysteria in East Africa. *East African Medical Journal*, 41, 560-566.
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