Local Cases of Possession and their Cure

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In the Philippines, it is the common belief that various psychological abnormalities known in the West as schizophrenia, depressions, conversions, etc. are caused by spirits. But there is a phenomenon, called by the Tagalogs langkap or sapi (possession), when the spirit himself is believed to enter into a person and, as it were, takes control of his actions and his words. The possessed person in a trance may speak in a totally different voice and may say and do things against his will. When he recovers normal consciousness there is usually amnesia for everything that happened during the trance.

The possessing agents are understood to be of various kinds. Sometimes they are good spirits, saints, or angels. Sometimes they are evil spirits, devils. Sometimes they are neither good nor bad but simply spirits of the dead, usually close relatives. Sometimes they may be nature spirits, lamang-lupa, duende. Depending much upon the character of this possessing spirit, the act of being possessed is welcomed or disliked or even intensely feared. But in any case there is little control over the time or place of possession. In some cases, especially with good spirits, there is a schedule of days and hours for their coming or going.

**PSYCHOANALYTIC VS. FOLK MEDICINE**

Psychoanalysts (especially after Morton Prince) classify the phenomenon of possession as a kind of dissociative reaction, a hysterical splitting of the human psyche into two or more personalities. A portion of the ego acquires as it were a semi-autonomous existence of its own. When triggered by an external event or particular social expectation it takes dominance within the orga-
nism, and thus the possessed person loses his own identity and assumes the personality of the possessor.

Up to now, psychoanalysts (who are mostly medical doctors) have looked on cases of possession as pathological, as "sick." But the phenomenon is so widespread in a place like the Philippines that one can almost look on it as culturally normal.

While these psychoanalysts distinguish clearly between the phenomenon of possession (i.e., the overt, symptomatic behavior) and the cause of the behavior (i.e., the unconscious of the person himself), the common people take the word "possession" in its literal meaning. To be possessed for them means literally to be taken over by another being and to be controlled from the inside by that being. Furthermore they generally assume that the possessing being is he who claims to be. If he says he is the devil, the people accept him as the devil. If he says he is St. Joseph, the people generally accept him as St. Joseph, with the exception of a few rustics who might say it is still the devil masquerading as St. Joseph. Thus many possessing spirits can be discerned. Beside the Catholic saints and angels are the engkanto, kapre, lamang-lupa, duende, demonyo, satanas, etc., in addition to the spirits of the dead. It then becomes a cultural necessity to know who is doing the possessing, partly to know if he is a friend or foe, partly to be able to drive him out by using his name. Here is an example of the phenomenon of possession:

Case I. A high society model, married for about three years, discovered that her husband was having an affair with another woman, who happened to be skilled in the black arts. This other woman sent an evil spirit into the model who as a result began to "lose her mind." For instance, one day she simply took off all her clothes and ran through the streets proclaiming her husband's infidelity. After this seemingly uncontrollable tantrum, she again appeared sane. The family took the model to a local exorcist who strapped her to a chair and tormented her by slapping her face and by applying a piece of wood to her finger tip which caused a feeling of burning. Screaming with pain under the questioning, the spirit inside her confessed its identity as that of a mangkukulam hired by the husband's girl friend and admitted guilt. The husband, thoroughly frightened, begged the wife's forgiveness.

Here is another example with a touch of humor:

Case II. The oldest sister in a family died. While her body lay in a coffin her spirit possessed the younger sister who thus entered a trance. The spirit
of the older sister speaking through the younger sister said, "Mommy, please fix my hair." The mother opened the coffin and combed the girl's hair. The spirit, speaking again through the possessed younger sister, said, "Thank you, mommy."

A third example may remind one of the Gospel story of possession by "a demon that was dumb" (Lk. 11:14).

Case III. A 24-year old man, working in an office, was reportedly possessed by a spirit and as a result could no longer speak audibly. He was brought by a co-worker to a priest for exorcism. Because of his inability to speak aloud, the interview was done in writing. The following is an untouched transcript of their conversation.

Man: My problem is whenever I go to office I feel shame, afraid of something I don't know, I always feel irritated I always think my office-mates always laugh at me. Because of this I cried myself and my family are sufferings, I think bad spirits are entering my body. Father if possible help me as soon as possible so that I'll be in normal life and to be near God.

Priest: How do you know that bad spirits enter your body?
Man: What in my mind always whenever they teased me to my office-mates so I think bad spirits in me so I'll always pray to Him.

Priest: Have you seen or heard or felt the bad spirit?
Man: Yes, I've just heard and feel to myself.

Priest: What do the bad spirits tell you?
Man: I've just feel it.

Priest: What does it feel like?
Man: As if my whole body is very hot and I trembled.

Priest: Have you ever seen a vision?
Man: Not yet in so far as vision is concerned.

Priest: Do you go to Charismatic meetings?
Man: As of now not yet.

Priest: What is your relation to the woman who brought you here?
Man: Formerly she's my officemate and always guide me about lord.

Priest: Do you mind if I ask her to come in?
Man: Yes Father.

Priest: Are you willing to join the charismatics?
Man: Actually I've just know Charismatic but I'll try my best.

LOCAL TECHNIQUE OF CURE

Not all cases of possession want the spirit removed. Some actually enjoy being possessed, especially if the spirit is good, and
they consider it a privilege. But for the undesirable kind, the culture has borrowed or developed ways of coping, which are really exorcistic in nature.

Quite well known is the charismatic approach to exorcism. Following the biblical injunctions, the exorcism is preceded by prayer and fasting. Then the possessing spirit is addressed, “Evil spirit, what is your name?” “In the name of Jesus Christ, I order you to depart from this man.” The method is well illustrated in a book read by local charismatics, Deliver Us from Evil, by Don Basham.¹

Besides this approach there are indigenous approaches. These generally contain two steps, diagnosis and treatment. To diagnose whether a patient is possessed or not there are various tests that can be performed, usually by an albolario or mangtatawas.

One diagnostic test is to place the two hands side by side, palms up, with the little fingers touching. If one finger is longer than the other, the patient is possessed.

Another test is to apply a short stem from the pantakaki plant to the crown of the patient’s head. If he feels unbearable heat he is possessed. In the absence of pantakaki, three matchsticks will do.

Another test is to place a piece of wood or a pencil between two toes and to press the two toes together. The patient, in pain, will cry out the name of the possessing spirit.

The most common test is the use of tawas (alum). Either alum or melted candle is poured into a basin of water. The alum or the candle then forms the shape of the possessing spirit or of the person who is using kulam against the patient.

No matter what method is used to diagnose possession, the usual end product is the confirmation of the fears of the patient that he is possessed. He is thus more ready now to be exorcised.

**TREATMENT**

The spirit is driven out of the patient either directly or indirectly. In the direct process there is a confrontation with the spirit which starts with a severe questioning, “Who are you?” “What do you want from this woman?” “Who sent you?” etc., etc. In some cases, the patient who is often strapped to a chair is struck violent-

ly and repeatedly. Sometimes it is sufficient simply to touch the pantakaki stem to the finger or to the crown of the head to elicit cries of pain. The watching relatives are admonished not to have pity on the person being exorcised because she is not the one suffering but the spirit inside her. Finally the spirit is unable to stand it anymore and asks permission to leave.

In the indirect method, the spirit is first made to transfer to a medium. Then it is the medium who is questioned and given the rough treatment. The patient is thus enabled to suffer through his exorcism vicariously through the medium. The typical exorcists using these methods try their best to project an image of authority and confidence. For instance, one of the more famous exorcists of Sampiloc, an imposing middle-aged man called Amang Frank by his followers, goes around in a habit-like brown dress like that of the Nazarene of Quiapo. These exorcists may demand a minimum payment for their services but for the most part accept what the poor people, their main clients, can afford. Their effectiveness is witnessed to by the fact that the stream of patients is unending. Amang Frank, for instance, has been forced to set up a second clinic in Novaliches and to train two sets of assistant exorcists to help him cope with the patients who flock to him all day.

PSYCHOTHERAPY OF EXORCISM

Clearly, the psychologist who does psychotherapy and the exorcist who drives out spirits are working from two different models. Which is the superior model, the psychoanalytic which sees possession as an unconscious, hysterical splitting of the ego, or the exorcists' conceptualization of spirits permeating the human person then melting away? The answer is not simple. Psychoanalysis has the authority of Western science behind it. But the local exorcists' treatment is effective, much more rapid and cheaper.

For the person needing help, it does not really matter what model his healer follows so long as he can get rid of the possessing "spirits" without any new ones taking their place. Effectiveness is the primary criterion by which they judge a treatment. The therapist, on the other hand, also has his own world view and may feel strongly identified with the scientific evolution of knowledge. For
effectiveness’ sake he may have to act as if he too were following the folk model, but to be true to himself he may have to have a guiding conceptual model differing from the folk model. There is a need to have some kind of theory which can serve as a guide when one attempts to help a person who believes himself possessed and who wants to be freed from the possessing spirit. A theory which pooh-poohs the subjective framework of the possessed person becomes ineffective. The therapist’s problem has to do with simultaneously being true to one’s science while remaining relevant to the patient and thus avoiding being ineffective.

The traditional scientific approach to the knowledge may be said in general to involve four steps: observation, description, hypothesis formation and verification. While still in the exploratory stage (kapa-kapa) of a research topic it is self-defeating to attempt to use the sophisticated research methods of experimental psychology. In the present stage then of research on the possession phenomenon a more clinical approach involving observation; broad hypothesis and verification seems to be the more suitable approach. In time the hypothesis can be narrowed and the verification made more rigid.

Accordingly the present writer, after years of continuing observation, presents the following theoretical framework involving several broad hypothesis as a conceptual model to be verified and as a practical guide to action, since present suffering cannot wait but needs relief now.

A PRACTICAL THERAPEUTIC FRAMEWORK

1. The experience of being possessed is so real that no amount of argumentation can change it. Hence the therapist must work within the imaginal framework of the possessed person which is that of spirits.

2. Actually these imaginal spirits may simply be “thought-forms” constructed by the mind and are for the most part determined by the culture (i.e., Moslem spirits, for instance, differ from Christian spirits but possess people in a similar way).

3. These thought-forms are experienced as semi-separate objects

within the self. In certain emotional situations they overwhelm the total ego, i.e., the ego identifies with its own thought-form. This state of identification is what is called "possession."

4. To break up this state of identification with a thought-form and to banish the thought-form itself to a position where it remains under the ego's control, one can use hypnotism like the local exorcists do without realizing what they are doing.

5. Hypnotism is the key to exorcistic therapy. Hypnotism is that state when the thought-form can be manipulated by direct or indirect suggestion and the self-image can be strengthened so as to become independent of its own split-off thought-form. The local exorcists may use pain and overstimulation to induce hypnosis but there are other ways of altering consciousness without necessarily torturing the patient. Even the method of questioning "Spirit, what is your name?" is already a powerful way of inducing hypnosis by dissociating a part of the ego from the ego. It is a "double bind" question which cannot be answered without putting oneself in the questioner's framework. The only alternative would be to distance oneself from the question to another meta-level of communication, e.g., to answer "I am not really possessed." Such distancing is hardly within the patient's ability while in a highly emotional state.

6. The deliberate use of hypnotism to exorcise does not deny that what is being exorcised is an evil thing, which may be called the devil. The first test of a theory is "Does it work?" and the first test in exorcism is "Does it heal the suffering patient?"

VALIDATION OF THEORY

The following cases will illustrate the "exorcisms" done within this theoretical framework.

Case IV. An 18 year old girl was brought at seven o'clock in the morning by a bishop to this psychologist's office. The girl had been possessed the night before and had entered a trance. In her trance she was brought by duendes to their mansion in Antipolo and invited to eat some rice. Of

the black, white and yellow rice she chose to eat the yellow. On waking up about midnight, in utter confusion, she told her story to the family who early next morning called the bishop, who brought the girl to the psychologist. The psychologist hypnotized the girl (by putting a stone in each hand and using the stone levitation technique) and then with a hand vibrator drove the spirit away. Suddenly the girl regained normal consciousness, vomited, felt greatly relieved, then pointing to what she had vomited said: “That was the yellow rice that they made me eat last night.” A check with the bishop three years later revealed that there had been no recurrence.

The next case illustrates the approach toward a group.

Case V. Five men were simultaneously possessed while doing a Cursillo and were sent by their parish priest to this psychologist. One was convulsing, another could not walk, the others were shaking uncontrollably. Each was accompanied by four helpers to keep them from becoming violent. First, the psychologist told the helpers to let the convulsing man lie down. Then he told this man “Every time you breathe you are breathing out the devil spirit.” The man began to breathe out heavily, “itoo-oo, hoo-oo.” In three minutes, he was quiet and at peace. Then the psychologist put a medal in each of the five people’s hands, telling them that the saint in the medal would be their protector and he would come up to their forehead as a sign that he was driving away all evil spirits. As the hand slowly went up they all entered trance. Everyone present then prayed for their deliverance. Within an hour all five left the office smiling. A checkup four months later revealed them to be back in normal life and work.

The following “exorcism” was done precisely to validate the theoretical framework described above, treating duendes as thought-forms. It was done by the author in front of the psychiatric residents in the psychiatric out-patient ward of the Philippine General Hospital. One of the psychiatric residents had been treating a patient without result for several weeks and wanted to try another form of therapy.

Case VI. A thirteen year old adolescent girl from Cavite was possessed, off and on, by a duende, Haring Sarim, such that she could not continue her schooling. She was put into trance by the author through the simple request, “Close your eyes. We would like to talk with this duende.” In trance the girl spoke in a tiny voice and answered all questions put to her. Finally, the author told the duende, “oh, pity the poor girl. She cannot go to school. And what will she do when she grows up. Sigue na, leave her
and go where you want to go.” The duende agreed. Upon awaking we asked the girl, “What is Haring Sarim doing now?” She answered, “He is packing because he is going away to the land of the Moslems.” The girl returned home, freed from the possessing spirit and six months later was still in a clear condition.

A simple follow-up of the case is not always possible, but in the author’s experience, out of nineteen cases which were followed up, two had had a recurrence though of a milder, more controllable state, while the remaining seventeen reported no recurrences, some even after a lapse of three years.

**THERAPEUTIC TECHNIQUE**

In the course of time spent in working within the framework described above, the writer has reduced his system in the concrete to four or five steps. (Let us designate the therapist as T and the subject as S.)

1. T listens closely to S’ description of the situation. How does S see the dynamics of his predicament? What is necessary to be done imaginally so that he can be freed? If S is unable to speak, his relative can fill in the details.
2. T puts S in an altered state of consciousness. To do this he may use standard hypnotic induction methods, or he may simply talk S into an altered state of consciousness, or may use “magic stones,” “dowsing rods,” etc.
3. While S is in the altered state, T talks the spirit into getting out. Prayers are said, the saints are called, blessings are given. A protecting light is invoked as entering into S to protect him from the return of the spirits.
4. Before leaving, S is given some kind of a task to do, e.g., a pilgrimage to Quiapo, in thanksgiving for his cure.
5. When and if S is capable of accepting it, an explanation of what actually happened in terms of dissociated thought-forms may be given him. Otherwise he is left to understand what happened in terms of his own reasoning or belief system.

**RATIONALE FOR THIS TECHNIQUE**

As one can see, T in this technique always works within the framework of S’ belief system. To tell S: “You have a dissociated
reaction,” does no good at all. Some form of distraction of the rational mind seems to be the essence of hypnotic induction as may be seen from Mesmer’s baquet, Braid’s swinging pendulum, Erickson’s hand-levitation, etc.

On the other hand, T uses S’ ability to dissociate (i.e., to enter hypnosis and to split off parts of the ego) as a tool to make a change in S’ inner life. Once S is in the altered state, shifting the thought-forms becomes as easy as shifting furniture in a room.

The ancient Greek monastic (Hesychast) method of inducing an internal light is meant to convince S experientially that there has been change, and to prevent recurrence. The added task, such as a pilgrimage, voluntarily carried out is a further involvement of S in affirming that he is cured and will remain cured.

Some time is allowed to pass before the more rational explanation is given – in order to afford the patient a chance to experience his new, liberated condition himself. If given too early, the patient is unable to accept the explanation and is likely to be repossessed. Freud also said that it was not enough merely to remove a hysterical symptom by hypnotic suggestion. It was necessary to face the underlying unconscious problem, making it conscious to oneself and working it away.

A REMAINING MYSTERY

In most of the cases that one meets in the psychological clinic, the possession drama occurs entirely inside the possessed subject. The only external manifestation are the subject’s words or behavior. But the author has now met four instances where the drama was not only occurring inside the person but actually manifested itself by external events such as stones being thrown, jewelry stolen and restored, etc. The following case may illustrate the need for extending the theory proposed earlier in this paper.

Case VII. The author was summoned frantically to a house in Kamuning where strange things were occurring around a new twelve year old Samar maid. Stones were being thrown with great force, sand thrown on food. The author saw a child’s pail into which were thrown water, a big stone and a dead mouse. Starting the communication through the use of the dowsing rods and using the girl as a “medium,” the “spirits” turned out to be five “engkanto” from Samar who had followed the girl to Manila
and possessed her by putting her into a deep stone-like trance. The author entered into a bargain with them to give them a house provided they stopped causing trouble. They first refused a shoe box as too small, then accepted a TV box on condition that they be given lunch regularly. The stone-throwing stopped. The next day when lunch was served them, rice was seen scooped from the main rice dish into two of the five plates. The maid explained that three of the five had returned to Samar and that was why only two were eating. The stoning never recurred, but the girl's father took her back to Samar, where contact was lost. These phenomena present a challenge to human understanding.

Is the mind so powerful as to affect material reality, i.e., exercise psychokinesis and the like? Does it do so unconsciously? At this point, one can only speculate that thought-forms are not limited to their existence within the human mind but are somehow able to exist outside it. It is as if hallucinations were to be acted out in reality: they are literally creatures of the mind. Are these then the poltergeists, the duendes, the lamang-lupa, etc. Are they thus real, but in an analogical sense?

Speculation that the human mind can be so truly creative as to make a new level of reality is not new. Tibetan monks call such creatures *tulpa*. To verify or to reject such a view of reality may take time. Ongoing research in psychokinesis is only beginning. One must await the long and arduous scientific process on empirical validation. But meanwhile since human beings suffer the phenomenon of possession, one must do what one can to exorcise them of this affliction, with the knowledge one has, in the way one knows. Rationalization can then follow.