

CHAPTER X

The Effectiveness of Symbols

THE FIRST IMPORTANT South American magico-religious text to be known, published by Wassén and Holmer,¹ throws new light on certain aspects of shamanistic curing and raises problems of theoretical interpretation by no means exhaustively treated in the editors' excellent commentary. We will re-examine this text for its more general implications, rather than from the linguistic or Americanist perspective primarily employed by the authors.

The text is a long incantation, covering eighteen pages in the native version, divided into 535 sections. It was obtained by the Cuna Indian Guillermo Haya from an elderly informant of his tribe. The Cuna, who live within the Panama Republic, received special attention from the late Erland Nordenskiöld, who even succeeded in training collaborators among the natives. After Nordenskiöld's death, Haya forwarded the text to Nordenskiöld's successor, Dr. Wassén. The text was taken down in the original

language and accompanied by a Spanish translation, which Holmer revised with great care.

The purpose of the song is to facilitate difficult childbirth. Its use is somewhat exceptional, since native women of Central and South America have easier deliveries than women of Western societies. The intervention of the shaman is thus rare and occurs in case of failure, at the request of the midwife. The song begins with a picture of the midwife's confusion and describes her visit to the shaman, the latter's departure for the hut of the woman in labor, his arrival, and his preparations—consisting of fumigations of burnt cocoa-nibs, invocations, and the making of sacred figures, or *nuchu*. These images, carved from prescribed kinds of wood which lend them their effectiveness, represent tutelary spirits whom the shaman makes his assistants and whom he leads to the abode of Muu, the power responsible for the formation of the fetus. A difficult childbirth results when Muu has exceeded her functions and captured the *purba*, or "soul," of the mother-to-be. Thus the song expresses a quest: the quest for the lost *purba*, which will be restored after many vicissitudes, such as the overcoming of obstacles, a victory over wild beasts, and, finally, a great contest waged by the shaman and his tutelary spirits against Muu and her daughters, with the help of magical hats whose weight the latter are not able to bear. Muu, once she has been defeated, allows the *purba* of the ailing woman to be discovered and freed. The delivery takes place, and the song ends with a statement of the precautions taken so that Muu will not escape and pursue her visitors. The fight is not waged against Muu herself, who is indispensable to procreation, but only against her abuses of power. Once these have been corrected, relations become friendly, and Muu's parting words to the shaman almost correspond to an invitation: "Friend *nele*, when do you think to visit me again?" (413)²

Thus far we have rendered the term *nele* as shaman, which might seem incorrect, since the cure does not appear to require the officiant to experience ecstasy or a transition to another psychic state. Yet the smoke of the cocoa beans aims primarily at "strengthening his garments" and "strengthening" the *nele* himself, "making him brave in front of Muu" (65-66). And above all, the Cuna classification, which distinguishes between several types of

medicine men, shows that the power of the *nele* has supernatural sources. The native medicine men are divided into *nele*, *inatuledi*, and *absogedi*. The functions of the *inatuledi* and *absogedi* are based on knowledge of songs and cures, acquired through study and validated by examinations, while the talent of the *nele*, considered innate, consists of supernatural sight, which instantly discovers the cause of the illness—that is, the whereabouts of the vital forces, whether particular or generalized, that have been carried off by evil spirits. For the *nele* can recruit these spirits, making them his protectors or assistants.³ There is no doubt, therefore, that he is actually a shaman, even if his intervention in childbirth does not present all the traits which ordinarily accompany this function. And the *nuchu*, protective spirits who at the shaman's bidding become embodied in the figurines he has carved, receive from him—along with invisibility and clairvoyance—*niga*. *Niga* is “vitality” and “resistance,”⁴ which make these spirits *nelegan* (plural of *nele*) “in the service of men” or in the “likeness of human beings” (235-237), although endowed with exceptional powers.

From our brief synopsis, the song appears to be rather commonplace. The sick woman suffers because she has lost her spiritual double or, more correctly, one of the specific doubles which together constitute her vital strength. (We shall return to this point.) The shaman, assisted by his tutelary spirits, undertakes a journey to the supernatural world in order to snatch the double from the malevolent spirit who has captured it; by restoring it to its owner, he achieves the cure. The exceptional interest of this text does not lie in this formal framework, but, rather, in the discovery—stemming no doubt from a reading of the text, but for which Holmer and Wassén deserve, nonetheless, full credit—that *Mu-Igala*, that is, “Muu’s way,” and the abode of Muu are not, to the native mind, simply a mythical itinerary and dwelling-place. They represent, literally, the vagina and uterus of the pregnant woman, which are explored by the shaman and *nuchu* and in whose depths they wage their victorious combat.

This interpretation is based first of all on an analysis of the concept of *purba*. The *purba* is a different spiritual principle from the *niga*, which we defined above. Unlike the *purba* the *niga* cannot be stolen from its possessor, and only human beings and animals own one. A plant or a stone has a *purba* but not a *niga*. The

same is true of a corpse; and in a child, the *niga* only develops with age. It seems, therefore, that one could, without too much inaccuracy, interpret *niga* as "vital strength," and *purba* as "double" or "soul," with the understanding that these words do not imply a distinction between animate and inanimate (since everything is animate for the Cuna) but correspond rather to the Platonic notion of "idea" or "archetype" of which every being or object is the material expression.

The sick woman of the song has lost more than her *purba*: the native text attributes fever to her—"the hot garments of the disease" (1 and *passim*)—and the loss or impairment of her sight—"straying . . . asleep on Muu Puklip's path" (97). Above all, as she declares to the shaman who questions her, "It is Muu Puklip who has come to me. She wants to take my *niga purbalele* for good" (98). Holmer proposes translating *niga* as physical strength and *purba* (*lele*) as soul or essence, whence "the soul of her life."⁵ It would perhaps be bold to suggest that the *niga*, an attribute of the living being, results from the existence of not one but several *purba*, which are functionally interrelated. Yet each part of the body has its own *purba*, and the *niga* seems to constitute, on the spiritual level, the equivalent of the concept of organism. Just as life results from the cooperation of the organs, so "vital strength" would be none other than the harmonious concurrence of all the *purba*, each of which governs the functions of a specific organ.

As a matter of fact, not only does the shaman retrieve the *niga purbalele*; his discovery is followed immediately by the recapture of other *purba*, those of the heart, bones, teeth, hair, nails, and feet (401-408, 435-442). The omission here of the *purba* governing the most affected organs—the generative organs—might come as a surprise. As the editors of the text emphasize, this is because the *purba* of the uterus is not considered as a victim but as responsible for the pathological disorder. Muu and her daughters, the *muugan*, are, as Nordenskiöld pointed out, the forces that preside over the development of the fetus and that give it its *kurgin*, or natural capacities.⁶ The text does not refer to these positive attributes. In it Muu appears as an instigator of disorder, a special "soul" that has captured and paralyzed the other special "souls," thus destroying the cooperation which insures the integrity of the "chief body" (*cuerpo jefe* in Spanish, 430, 435) from which it

draws its *niga*. But at the same time, Muu must stay put, for the expedition undertaken to liberate the *purba* might provoke Muu's escape by the road which temporarily remains open; hence the precautions whose details fill the last part of the song. The shaman mobilizes the Lords of the wild animals to guard the way, the road is entangled, golden and silver nets are fastened, and, for four days, the *nelegan* stand watch and beat their sticks (505-535). Muu, therefore, is not a fundamentally evil force: she is a force gone awry. In a difficult delivery the "soul" of the uterus has led astray all the "souls" belonging to other parts of the body. Once these souls are liberated, the soul of the uterus can and must resume its cooperation. Let us emphasize right here the clarity with which the native ideology delineates the emotional content of the physiological disturbance, as it might appear, in an implicit way, to the mind of the sick woman.

To reach Muu, the shaman and his assistants must follow a road, "Muu's way," which may be identified from the many allusions in the text. When the shaman, crouching beneath the sick woman's hammock, has finished carving the *nuchu*, the latter rise up "at the extremity of the road" (72, 83) and the shaman exhorts them in these terms:

The (sick) woman lies in the hammock in front of you.
 Her white tissue lies in her lap, her white tissues move softly.
 The (sick) woman's body lies weak.
 When they light up (along) Muu's way, it runs over with exudations and like blood.
 Her exudations drip down below the hammock all like blood, all red.
 The inner white tissue extends to the bosom of the earth.
 Into the middle of the woman's white tissue a human being descends. (84-90)

The translators are doubtful as to the meaning of the last two sentences, yet they refer to another native text, published by Nordenskiöld, which leaves no doubt as to the identification of the "white inner tissue" with the vulva:

sibugua molul arkaali
 blanca tela abriendo
sibugua molul akinnali
 blanca tela extendiendo

sibugua molul abalase tulapurua ekuanali
 blanca tela centro feto caer haciendo⁷

"Muu's way," darkened and completely covered with blood owing to the difficult labor, and which the *nuchu* have to find by the white sheen of their clothes and magical hats, is thus unquestionably the vagina of the sick woman. And "Muu's abode," the "dark whirlpool" where she dwells, corresponds to the uterus, since the native informant comments on the name of this abode, *Amukkapiryawila*, in terms of *omegan purba amurrequedi*, that is, "woman's turbid menstruation," also called "the dark deep whirlpool" (250-251) and "the dark inner place" (32).⁸

The original character of this text gives it a special place among the shamanistic cures ordinarily described. These cures are of three types, which are not, however, mutually exclusive. The sick organ or member may be physically involved, through a manipulation or suction which aims at extracting the cause of the illness—usually a thorn, crystal, or feather made to appear at the opportune moment, as in tropical America, Australia, and Alaska. Curing may also revolve, as among the Araucanians, around a sham battle, waged in the hut and then outdoors, against harmful spirits. Or, as among the Navaho, the officiant may recite incantations and prescribe actions (such as placing the sick person on different parts of a painting traced on the ground with colored sands and pollens) which bear no direct relationship to the specific disturbance to be cured. In all these cases, the therapeutic method (which as we know is often effective) is difficult to interpret. When it deals directly with the unhealthy organ, it is too grossly concrete (generally, pure deceit) to be granted intrinsic value. And when it consists in the repetition of often highly abstract ritual, it is difficult for us to understand its direct bearing on the illness. It would be convenient to dismiss these difficulties by declaring that we are dealing with psychological cures. But this term will remain meaningless unless we can explain how specific psychological representations are invoked to combat equally specific physiological disturbances. The text that we have analyzed offers a striking contribution to the solution of this problem. The song constitutes a purely psychological treatment, for the shaman does not touch the body of the sick woman and administers no remedy.

Nevertheless it involves, directly and explicitly, the pathological condition and its locus. In our view, the song constitutes a *psychological manipulation* of the sick organ, and it is precisely from this manipulation that a cure is expected.

To begin, let us demonstrate the existence and the characteristics of this manipulation. Then we shall ask what its purpose and its effectiveness are. First, we are surprised to find that the song, whose subject is a dramatic struggle between helpful and malevolent spirits for the reconquest of a "soul," devotes very little attention to action proper. In eighteen pages of text the contest occupies less than one page and the meeting with Muu Puklip scarcely two pages. The preliminaries, on the other hand, are highly developed and the preparations, the outfitting of the *muchu*, the itinerary, and the sites are described with a great wealth of detail. Such is the case, at the beginning, for the midwife's visit to the shaman. The conversation between the sick woman and the midwife, followed by that between the midwife and the shaman, recurs twice, for each speaker repeats exactly the utterance of the other before answering him:

The (sick) woman speaks to the midwife: "I am indeed being dressed in the hot garment of the disease."

The midwife answers her (sick woman): "You are indeed being dressed in the hot garment of the disease, I also hear you say."
(1-2)

It might be argued⁹ that this stylistic device is common among the Cuna and stems from the necessity, among peoples bound to oral tradition, of memorizing exactly what has been said. And yet here this device is applied not only to speech but to actions:

The midwife turns about in the hut.

The midwife looks for some beads.

The midwife turns about (in order to leave).

The midwife puts one foot in front of the other.

The midwife touches the ground with her foot.

The midwife puts her other foot forward.

The midwife pushes open the door of her hut; the door of her hut creaks.

The midwife goes out . . . (7-14).

This minute description of her departure is repeated when she arrives at the shaman's, when she returns to the sick woman, when the shaman departs, and when he arrives. Sometimes the same description is repeated twice in the same terms (37-39 and 45-47 reproduce 33-35). The cure thus begins with a historical account of the events that preceded it, and some elements which might appear secondary ("arrivals" and "departures") are treated with luxuriant detail as if they were, so to speak, filmed in slow-motion. We encounter this technique throughout the text, but it is nowhere applied as systematically as at the beginning and to describe incidents of retrospective interest.

Everything occurs as though the shaman were trying to induce the sick woman—whose contact with reality is no doubt impaired and whose sensitivity is exacerbated—to relive the initial situation through pain, in a very precise and intense way, and to become psychologically aware of its smallest details. Actually this situation sets off a series of events of which the body and internal organs of the sick woman will be the assumed setting. A transition will thus be made from the most prosaic reality to myth, from the physical universe to the physiological universe, from the external world to the internal body. And the myth being enacted in the internal body must retain throughout the vividness and the character of lived experience prescribed by the shaman in the light of the pathological state and through an appropriate obsessing technique.

The next ten pages offer, in breathless rhythm, a more and more rapid oscillation between mythical and physiological themes, as if to abolish in the mind of the sick woman the distinction which separates them, and to make it impossible to differentiate their respective attributes. First there is a description of the woman lying in her hammock or in the native obstetrical position, facing eastward, knees parted, groaning, losing her blood, the vulva dilated and moving (84-92, 123-124, 134-135, 152, 158, 173, 177-178, 202-204). Then the shaman calls by name the spirits of intoxicating drinks; of the winds, waters, and woods; and even—precious testimony to the plasticity of the myth—the spirit of the "silver steamer of the white man" (187). The themes converge: like the sick woman, the *nuchu* are dripping with blood; and the pains of the sick woman assume cosmic proportions: "The inner white tis-

sue extends to the bosom of the earth. . . . Into the bosom of the earth her exudations gather into a pool, all like blood, all red" (84-92). At the same time, each spirit, when it appears, is carefully described, and the magical equipment which he receives from the shaman is enumerated at great length: black beads, flame-colored beads, dark beads, ring-shaped beads, tiger bones, rounded bones, throat bones, and many other bones, silver necklaces, armadillo bones, bones of the bird *kerkettoli*, woodpecker bones, bones for flutes, silver beads (104-118). Then general recruitment begins anew, as if these guarantees were still inadequate and all forces, known or unknown to the sick woman, were to be rallied for the invasion (119-229).

Yet we are released to such a small extent into the realm of myth that the penetration of the vagina, mythical though it be, is proposed to the sick woman in concrete and familiar terms. On two occasions, moreover, "muu" designates the uterus directly, and not the spiritual principle which governs its activity ("the sick woman's muu," 204, 453).¹⁰ Here the *nelegan*, in order to enter Muu's way, take on the appearance and the motions of the erect penis:

The *nelegan*'s hats are shining white, the *nelegan*'s hats are whitish. The *nelegan* are becoming flat and low (?), all like bits, all straight. The *nelegan* are beginning to become terrifying (?), the *nelegan* are becoming all terrifying (?), for the sake of the (sick) woman's *niga purbalele* (230-232).

And further, below:

The *nelegan* go balancing up on top of the hammock, they go moving upward like *nusupane* (239).¹¹

The technique of the narrative thus aims at recreating a real experience in which the myth merely shifts the protagonists. The *nelegan* enter the natural orifice, and we can imagine that after all this psychological preparation the sick woman actually feels them entering. Not only does she feel them, but they "light up" the route they are preparing to follow—for their own sake, no doubt, and to find the way, but also to make the center of inexpressible and painful sensations "clear" for her and accessible to her consciousness. "The *nelegan* put good sight into the sick woman, the *nelegan* light good eyes in the (sick) woman . . ." (238).

And this “illuminating sight,” to paraphrase an expression in the text, enables them to relate in detail a complicated itinerary that is a true mythical anatomy, corresponding less to the real structure of the genital organs than to a kind of emotional geography, identifying each point of resistance and each thrust:

The *nelegan* set out, the *nelegan* march in a single file along Muu’s road, as far as the Low Mountain,
 The *nelegan* set out, etc., as far as the Short Mountain,
 The *nelegan*, etc., as far as the Long Mountain,
 The *nelegan*, etc., (to) Yala Pokuna Yala, (not translated)
 The *nelegan*, etc., (to) Yala Akkwatallekun Yala, (not translated)
 The *nelegan*, etc., (to) Yala Ilamalisuikun Yala, (not translated)
 The *nelegan*, etc., into the center of the Flat Mountain.
 The *nelegan* set out, the *nelegan* march in a single file along Muu’s road (241-248).

The picture of the uterine world, peopled with fantastic monsters and dangerous animals, is amenable to the same interpretation—which is, moreover, confirmed by the native informant: “It is the animals,” he says, “who increase the diseases of the laboring woman”; that is, the pains themselves are personified. And here again, the song seems to have as its principal aim the description of these pains to the sick woman and the naming of them, that is, their presentation to her in a form accessible to conscious or unconscious thought: Uncle Alligator, who moves about with his bulging eyes, his striped and variegated body, crouching and wriggling his tail; Uncle Alligator Tiikwalele, with glistening body, who moves his glistening flippers, whose flippers conquer the place, push everything aside, drag everything; Nele Ki(k)kirpanalele, the Octopus, whose sticky tentacles are alternately opening and closing; and many others besides: He-who-has-a-hat-that-is-soft, He-who-has-a-red-colored-hat, He-who-has-a-variegated-hat, etc.; and the guardian animals: the black tiger, the red animal, the two-colored animal, the dust-colored animal; each is tied with an iron chain, the tongue hanging down, the tongue hanging out, saliva dripping, saliva foaming, with flourishing tail, the claws coming out and tearing things “all like blood, all red” (253-298).

To enter into this hell à la Hieronymus Bosch and reach its owner, the *nelegan* have to overcome other obstacles, this time material: fibers, loose threads, fastened threads, successive cur-

tains—rainbow-colored, golden, silvery, red, black, maroon, blue, white, wormlike, “like neckties,” yellow, twisted, thick (305-330); and for this purpose, the shaman calls reinforcements: Lords of the wood-boring insects, who are to “cut, gather, wind and reduce” the threads, which Holmer and Wassén identify as the internal tissues of the uterus.¹²

The *nelegan*'s invasion follows the downfall of these last obstacles, and here the tournament of the hats takes place. A discussion of this would lead us too far from the immediate purpose of this study. After the liberation of the *niga purbalele* comes the descent, which is just as dangerous as the ascent, since the purpose of the whole undertaking is to induce childbirth—precisely, a difficult descent. The shaman counts his helpers and encourages his troops; still he must summon other reinforcements: the “clearers of the way,” Lords-of-the-burrowing animals, such as the armadillo. The *niga* is exhorted to make its way toward the orifice:

Your body lies in front of you in the hammock,
 (Her) white tissue lies in her lap,
 The white inner tissue moves softly,
 Your (sick) woman lies in your midst . . .
 . . . thinking she cannot see.
 Into her body they put again (her) *niga purbalele* . . . (430-435).

The episode that follows is obscure. It would seem that the sick woman is not yet cured. The shaman leaves for the mountains with people of the village to gather medicinal plants, and he returns to the attack in a different way. This time it is he who, by imitating the penis, penetrates the “opening of muu” and moves in it “like *nusupane* . . . completely drying the inner place” (453-454). Yet the use of astringents suggests that the delivery has taken place. Finally, before the account of the precautions taken to impede Muu's escape, which we have already described, we find the shaman calling for help from a people of Bowmen. Since their task consists in raising a cloud of dust “to obscure . . . Muu's way” (464), and to defend all of Muu's crossroads and byroads (468), their intervention probably also pertains to the conclusion.

The previous episode perhaps refers to a second curing technique, with organ manipulation and the administration of remedies.

Or it may perhaps match, in equally metaphorical terms, the first journey, which is more highly elaborated in the text. Two lines of attack would thus have been developed for the assistance to the sick woman, one of which is supported by a psychophysiological mythology and the other by a psychosocial mythology—indicated by the shaman's call on the inhabitants of the village—which, however, remains undeveloped. At any rate, it should be observed that the song ends after the delivery, just as it had begun before the cure. Both antecedent and subsequent events are carefully related. But it is not only against Muu's elusive stray impulses that the cure must, through careful procedures, be effected; the efficacy of the cure would be jeopardized if, even before any results were to be expected, it failed to offer the sick woman a resolution, that is, a situation wherein all the protagonists have resumed their places and returned to an order which is no longer threatened.

The cure would consist, therefore, in making explicit a situation originally existing on the emotional level and in rendering acceptable to the mind pains which the body refuses to tolerate. That the mythology of the shaman does not correspond to an objective reality does not matter. The sick woman believes in the myth and belongs to a society which believes in it. The tutelary spirits and malevolent spirits, the supernatural monsters and magical animals, are all part of a coherent system on which the native conception of the universe is founded. The sick woman accepts these mythical beings or, more accurately, she has never questioned their existence. What she does not accept are the incoherent and arbitrary pains, which are an alien element in her system but which the shaman, calling upon myth, will re-integrate within a whole where everything is meaningful.

Once the sick woman understands, however, she does more than resign herself; she gets well. But no such thing happens to our sick when the causes of their diseases have been explained to them in terms of secretions, germs, or viruses. We shall perhaps be accused of paradox if we answer that the reason lies in the fact that microbes exist and monsters do not. And yet, the relationship between germ and disease is external to the mind of the patient, for it is a cause-and-effect relationship; whereas the relationship between monster and disease is internal to his mind, whether conscious or

unconscious: It is a relationship between symbol and thing symbolized, or, to use the terminology of linguists, between sign and meaning. The shaman provides the sick woman with a *language*, by means of which unexpressed, and otherwise inexpressible, psychic states can be immediately expressed. And it is the transition to this verbal expression—at the same time making it possible to undergo in an ordered and intelligible form a real experience that would otherwise be chaotic and inexpressible—which induces the release of the physiological process, that is, the reorganization, in a favorable direction, of the process to which the sick woman is subjected.

In this respect, the shamanistic cure lies on the borderline between our contemporary physical medicine and such psychological therapies as psychoanalysis. Its originality stems from the application to an organic condition of a method related to psychotherapy. How is this possible? A closer comparison between shamanism and psychoanalysis—which in our view implies no slight to psychoanalysis—will enable us to clarify this point.

In both cases the purpose is to bring to a conscious level conflicts and resistances which have remained unconscious, owing either to their repression by other psychological forces or—in the case of childbirth—to their own specific nature, which is not psychic but organic or even simply mechanical. In both cases also, the conflicts and resistances are resolved, not because of the knowledge, real or alleged, which the sick woman progressively acquires of them, but because this knowledge makes possible a specific experience, in the course of which conflicts materialize in an order and on a level permitting their free development and leading to their resolution. This vital experience is called *abreaction* in psychoanalysis. We know that its precondition is the unprovoked intervention of the analyst, who appears in the conflicts of the patient through a double transference mechanism, as a flesh-and-blood protagonist and in relation to whom the patient can restore and clarify an initial situation which has remained unexpressed or unformulated.

All these characteristics can be found in the shamanistic cure. Here, too, it is a matter of provoking an experience; as this experience becomes structured, regulatory mechanisms beyond the subject's control are spontaneously set in motion and lead to an orderly functioning. The shaman plays the same dual role as the

psychoanalyst. A prerequisite role—that of listener for the psychoanalyst and of orator for the shaman—establishes a direct relationship with the patient's conscious and an indirect relationship with his unconscious. This is the function of the incantation proper. But the shaman does more than utter the incantation; he is its hero, for it is he who, at the head of a supernatural battalion of spirits, penetrates the endangered organs and frees the captive soul. In this way he, like the psychoanalyst, becomes the object of transference and, through the representations induced in the patient's mind, the real protagonist of the conflict which the latter experiences on the border between the physical world and the psychic world. The patient suffering from neurosis eliminates an individual myth by facing a "real" psychoanalyst; the native woman in childbed overcomes a true organic disorder by identifying with a "mythically transmuted" shaman.

This parallelism does not exclude certain differences, which are not surprising if we note the character—psychological in the one case and organic in the other—of the ailment to be cured. Actually the shamanistic cure seems to be the exact counterpart to the psychoanalytic cure, but with an inversion of all the elements. Both cures aim at inducing an experience, and both succeed by recreating a myth which the patient has to live or relive. But in one case, the patient constructs an individual myth with elements drawn from his past; in the other case, the patient receives from the outside a social myth which does not correspond to a former personal state. To prepare for the abreaction, which then becomes an "adreaction," the psychoanalyst listens, whereas the shaman speaks. Better still: When a transference is established, the patient puts words into the mouth of the psychoanalyst by attributing to him alleged feelings and intentions; in the incantation, on the contrary, the shaman speaks for his patient. He questions her and puts into her mouth answers that correspond to the interpretation of her condition, with which she must become imbued:

My eyesight is straying, it is asleep on Muu Puklip's path.
It is Muu Puklip who has come to me. She wants to take my
niga purbalele for good.
Muu Nauryaiti has come to me. She wants to possess my *niga*
purbalele for good.
etc. (97-101).

Furthermore, the resemblance becomes even more striking when we compare the shaman's method with certain recent therapeutic techniques of psychoanalysis. R. Desoille, in his research on daydreaming,¹³ emphasized that psychopathological disturbances are accessible only through the language of symbols. Thus he speaks to his patients by means of symbols, which remain, nonetheless, verbal metaphors. In a more recent work, with which we were not acquainted when we began this study, M. A. Sechehaye goes much further.¹⁴ It seems to us that the results which she obtained while treating a case of schizophrenia considered incurable fully confirm our preceding views on the similarities between psychoanalysis and shamanism. For Sechehaye became aware that speech, no matter how symbolic it might be, still could not penetrate beyond the conscious and that she could reach deeply buried complexes only through acts. Thus to resolve a weaning complex, the analyst must assume a maternal role, carried out not by a literal reproduction of the appropriate behavior but by means of actions which are, as it were, discontinuous, each symbolizing a fundamental element of the situation—for instance, putting the cheek of the patient in contact with the breast of the analyst. The symbolic load of such acts qualifies them as a language. Actually, the therapist holds a dialogue with the patient, not through the spoken word, but by concrete actions, that is, genuine rites which penetrate the screen of consciousness to carry their message directly to the unconscious.

Here we again encounter the concept of manipulation, which appeared so essential to an understanding of the shamanistic cure but whose traditional definition we must broaden considerably. For it may at one time involve a manipulation of ideas and, at another time, a manipulation of organs. But the basic condition remains that the manipulation must be carried out through symbols, that is, through meaningful equivalents of things meant which belong to another order of reality. The *gestures* of Sechehaye reverberate in the unconscious *mind* of the schizophrenic just as the *representations* evoked by the shaman bring about a modification in the organic *functions* of the woman in childbirth. Labor is impeded at the beginning of the song, the delivery takes place at the end, and the progress of childbirth is reflected in successive stages of the myth. The first penetration of the vagina by the

nelegan is carried out in Indian file (241) and, since it is an ascent, with the help of magical hats which clear and light up the way. The return corresponds to the second phase of the myth, but to the first phase of the physiological process, since the child must be made to come down. Attention turns toward the *nelegan's* feet. We are told that they have shoes (494-496). When they invade Muu's abode, they no longer march in single file but in "rows of four" (388); and, to come out again in the open air, they go "in a row" (248). No doubt the purpose of such an alteration in the details of the myth is to elicit the corresponding organic reaction, but the sick woman could not integrate it as experience if it were not associated with a true increase in dilatation. It is the effectiveness of symbols which guarantees the harmonious parallel development of myth and action. And myth and action form a pair always associated with the duality of patient and healer. In the schizophrenic cure the healer performs the actions and the patient produces his myth; in the shamanistic cure the healer supplies the myth and the patient performs the actions.

The analogy between these two methods would be even more complete if we could admit, as Freud seems to have suggested on two different occasions,¹⁵ that the description in psychological terms of the structure of psychoses and neuroses must one day be replaced by physiological, or even biochemical, concepts. This possibility may be at hand, since recent Swedish research¹⁶ has demonstrated chemical differences resulting from the amounts of polynucleids in the nerve cells of the normal individual and those of the psychotic. Given this hypothesis or any other of the same type, the shamanistic cure and the psychoanalytic cure would become strictly parallel. It would be a matter, either way, of stimulating an organic transformation which would consist essentially in a structural reorganization, by inducing the patient intensively to live out a myth—either received or created by him—whose structure would be, at the unconscious level, analogous to the structure whose genesis is sought on the organic level. The effectiveness of symbols would consist precisely in this "inductive property," by which formally homologous structures, built out of different materials at different levels of life—organic processes, unconscious mind, rational thought—are related to one another. Poetic metaphor provides a familiar ex-

ample of this inductive process, but as a rule it does not transcend the unconscious level. Thus we note the significance of Rimbaud's intuition that metaphor can change the world.

The comparison with psychoanalysis has allowed us to shed light on some aspects of shamanistic curing. Conversely, it is not improbable that the study of shamanism may one day serve to elucidate obscure points of Freudian theory. We are thinking specifically of the concepts of myth and the unconscious.

We saw that the only difference between the two methods that would outlive the discovery of a physiological substratum of neurosis concerns the origin of the myth, which in the one case is recovered as an individual possession and in the other case is received from collective tradition. Actually, many psychoanalysts would refuse to admit that the psychic constellations which reappear in the patient's conscious could constitute a myth. These represent, they say, real events which it is sometimes possible to date and whose authenticity can be verified by checking with relatives or servants.¹⁷ We do not question these facts. But we should ask ourselves whether the therapeutic value of the cure depends on the actual character of remembered situations, or whether the traumatizing power of those situations stems from the fact that at the moment when they appear, the subject experiences them immediately as living myth. By this we mean that the traumatizing power of any situation cannot result from its intrinsic features but must, rather, result from the capacity of certain events, appearing within an appropriate psychological, historical, and social context, to induce an emotional crystallization which is molded by a pre-existing structure. In relation to the event or anecdote, these structures—or, more accurately, these structural laws—are truly atemporal. For the neurotic, all psychic life and all subsequent experiences are organized in terms of an exclusive or predominant structure, under the catalytic action of the initial myth. But this structure, as well as other structures which the neurotic relegates to a subordinate position, are to be found also in the normal human being, whether primitive or civilized. These structures as an aggregate form what we call the unconscious. The last difference between the theory of shamanism and psychoanalytic theory would, then, vanish. The unconscious ceases to be the ultimate haven of individual peculiarities—the repository of a unique his-

tory which makes each of us an irreplaceable being. It is reducible to a function—the symbolic function, which no doubt is specifically human, and which is carried out according to the same laws among all men, and actually corresponds to the aggregate of these laws.

If this view is correct, it will probably be necessary to re-establish a more marked distinction between the unconscious and the preconscious than has been customary in psychology. For the preconscious, as a reservoir of recollections and images amassed in the course of a lifetime,¹⁸ is merely an aspect of memory. While perennial in character, the preconscious also has limitations, since the term refers to the fact that even though memories are preserved they are not always available to the individual. The unconscious, on the other hand, is always empty—or, more accurately, it is as alien to mental images as is the stomach to the foods which pass through it. As the organ of a specific function, the unconscious merely imposes structural laws upon inarticulated elements which originate elsewhere—impulses, emotions, representations, and memories. We might say, therefore, that the preconscious is the individual lexicon where each of us accumulates the vocabulary of his personal history, but that this vocabulary becomes significant, for us and for others, only to the extent that the unconscious structures it according to its laws and thus transforms it into language. Since these laws are the same for all individuals and in all instances where the unconscious pursues its activity, the problem which arose in the preceding paragraph can easily be resolved. The vocabulary matters less than the structure. Whether the myth is re-created by the individual or borrowed from tradition, it derives from its sources—individual or collective (between which interpenetrations and exchanges constantly occur)—only the stock of representations with which it operates. But the structure remains the same, and through it the symbolic function is fulfilled.

If we add that these structures are not only the same for everyone and for all areas to which the function applies, but that they are few in number, we shall understand why the world of symbolism is infinitely varied in content, but always limited in its laws. There are many languages, but very few structural laws which are valid for all languages. A compilation of known tales and myths would fill an imposing number of volumes. But they

can be reduced to a small number of simple types if we abstract, from among the diversity of characters, a few elementary functions. As for the complexes—those individual myths—they also correspond to a few simple types, which mold the fluid multiplicity of cases.

Since the shaman does not psychoanalyze his patient, we may conclude that remembrance of things past, considered by some the key to psychoanalytic therapy, is only one expression (whose value and results are hardly negligible) of a more fundamental method, which must be defined without considering the individual or collective genesis of the myth. For the myth *form* takes precedence over the *content* of the narrative. This is, at any rate, what the analysis of a native text seems to have taught us. But also, from another perspective, we know that any myth represents a quest for the remembrance of things past. The modern version of shamanistic technique called psychoanalysis thus derives its specific characteristics from the fact that in industrial civilization there is no longer any room for mythical time, except within man himself. From this observation, psychoanalysis can draw confirmation of its validity, as well as hope of strengthening its theoretical foundations and understanding better the reasons for its effectiveness, by comparing its methods and goals with those of its precursors, the shamans and sorcerers.

NOTES

1. Nils M. Holmer and Henry Wassén, *Mu-Igala or the Way of Muu, a Medicine Song from the Cunas of Panama* (Göteborg: 1947).
2. The numbers in parentheses refer to the numbered sections in the song.
3. E. Nordenskiöld, *An Historical and Ethnological Survey of the Cuna Indians*, ed. Henry Wassén, Vol. X of *Comparative Ethnographical Studies* (Göteborg: 1938), pp. 80 ff.
4. *Ibid.*, pp. 360 ff.; Holmer and Wassén, *op. cit.*, pp. 78-9.
5. Holmer and Wassén, *op. cit.*, p. 38, n 44.
6. Nordenskiöld, *op. cit.*, p. 364 ff.
7. *Ibid.*, pp. 607-8; Holmer and Wassén, *op. cit.*, p. 38, nn 35-9.
8. The translation of *ti ipya* as "whirlpool" seems to be strained. For certain South American natives, as also in the languages of the Iberian peninsula (cf. the Portuguese *olho d'agua*), a "water eye" is a spring.
9. Holmer and Wassén, *op. cit.*, pp. 65-6.
10. *Ibid.*, p. 45, n 219; p. 57, n 539.
11. The question marks are Holmer and Wassén's; *nusupame* derives from

nusu, "worm," and is commonly used for "penis" (see Holmer and Wassén, p. 47, *n* 280; p. 57, *n* 540; and p. 82).

12. *Ibid.*, p. 85.
13. R. Desoille, *Le Rêve éveillé en psychothérapie* (Paris: 1945).
14. M. A. Sechehaye, *La Réalisation symbolique*, Supplement No. 12 to *Revue suisse de psychologie et de psychologie appliquée* (Bern: 1947).
15. In *Beyond the Pleasure Principle*, p. 79, and *New Conferences on Psychoanalysis*, p. 198, cited by E. Kris, "The Nature of Psychoanalytic Propositions and their Validation," in *Freedom and Experience, Essays presented to H. M. Kallen* (Ithaca, N. Y.: 1947), p. 244.
16. Caspersson and Hyden, at the Karolinska Institute in Stockholm.
17. Marie Bonaparte, "Notes on the Analytical Discovery of a Primal Scene," in *The Psychoanalytic Study of the Child*, Vol. I (New York: 1945).
18. This definition, which was subjected to considerable criticism, acquires a new meaning through the radical distinction between preconscious and unconscious.