

***Saadaka: An Aspect of Shamanism, Spiritual Power, and Pollution in Okinawa***

by

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## Abstract

The island of Okinawa has a history rich with tradition and cultural practices that are unique even to the Japanese culture. Especially unique, are the religious practices incorporating shamanism. These practices incorporate an array of concepts that revolve around family, ancestors, and community. Beliefs about the supernatural the connection to the living are interesting and ever-present. My research investigates previously collected ethnographies on the Ryukyuan Religion and the interaction between humans and the spirit world. I incorporate a theoretical framework that explores the practices in a social context and discuss the linear relationship between ritual, pollution, and liminality of death and deification. It is important to analyze the culture holistically, especially the roots from whence it came. And, as Susan Sered suggested, "...it is often via religious rituals and ideologies that women and men express their deepest concerns, their truest selves, their fears, hopes and passions" (Sered, 1994).

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## Table of Contents

Abstract.....	ii
Acknowledgments.....	iii
List of Figures.....	vi
Chapter I: Introduction .....	1
Methodological Model .....	3
Chapter II: Okinawa and Religion .....	5
Theories on Religion .....	5
The Location .....	7
Ryukyuan Religion .....	7
Practitioners .....	12
Chapter III: Ritual Activity .....	20
Rituals and Social Theory .....	20
Community Rituals .....	21
Household Rituals .....	23
Shamanistic Rituals .....	29
Chapter IV: Folk Medicine: Curing and Culture .....	31
Efficacy and Culture-bound Illnesses .....	31
Deconstructing the Placebo Effect .....	31
Spirits with Scalpels .....	34

Culture-bound Syndromes in Malaysia .....	36
The Q'eqchi' .....	38
Explanatory Models .....	39
Chapter V: Comparative Analysis .....	40
Theories on Pollution .....	40
Power and Pollution in China .....	40
Korean Shamanism .....	45
Chapter VI: Possession and Pollution .....	49
Spirit Pollution in Theory .....	49
Embodiment .....	52
French Rationalism .....	54
The Mindful Body .....	56
Chapter VII: Findings and Conclusion .....	58
Association Between Pollution and Liminality .....	58
Future Studies .....	62
References .....	76
Appendix I .....	82
Appendix II .....	83

## List of Figures

Figure 1: Hierarchy and Description of <i>Kami</i> .....	10
Figure 2: Relationship Between Pollution and Liminality .....	75

## Chapter I. Introduction to the Study

### Purpose, Research Questions, and Hypothesis

The purpose of this study is to investigate Ryukyuan Religion and the interaction between humans and the spirit world through the analysis of previous research on Okinawan belief systems, incorporating a theoretical framework that explores the practices in a social context, and by providing a cross-comparative analysis to similar East Asian religious beliefs and rituals. Below I have listed my research questions, followed by my proposed method to answer, and how I answer each.

Questions:

1. What are the basic ideas and concepts behind the belief systems in Okinawa and how are they relevant to the social structure in Okinawa today?
  - a. I answer this question by discussing the ethnographies compiled by previous researchers and situating these ethnographies in a foundation of sociological and anthropological theories.
    - i. Chapters two-four discusses certain social structures, such as the significance attributed to familial relationships, may help explain the continued practices of folk religion in an area where biomedicine, scientific technology, and many Western ideas have long been incorporated. In addition, these sections discuss ritual activity, efficacy and folk healing as it pertains to the Okinawan belief system.

2. How are certain concepts of “pollution” and “purity” integrated into the Ryukyuan belief system and how do they compare to other similar cultural ideas of pollution?
  - a. I answer this question by comparing the research from Okinawa to Chinese belief systems and other East Asian societies.
    - i. Chapter five compares the strong similarities between Chinese, Korean, and Okinawan ideas of pollution, which probably exist in Okinawa due to early Chinese influence on Ryukyuan culture.
3. Can the belief in pathogenic possession be considered “polluting” to a living person and how is this explained with in a sociological and psychological context? (What needs are being met socially and individually)
  - a. Chapters six and seven address this question by utilizing literature exploring Okinawan concepts of *mabui* (the soul) and the limited information on spirit “attachment”, “sickness”, “possession”, and rituals used to cleanse afflicted individuals (*mabui wakashi*) and/or prevent this phenomenon. I will include cognitive theories for both executive and pathogenic possession (Cohen).
    - i. I argue that possession can be considered as polluting to a living person as it is thought to cause psychological, physical, and/or social disorder for the afflicted. Also, death is often considered “unclean” in many societies and it is likely that ghosts and spirits are closely linked to this pollutant. Therefore, those affected by pathogenic possession would logically be thought of as “polluted”



by the entity. In addition, I conclude that there is a direct, linear association between pollution, liminality, and frequency of ritual.

### **Methodological Model**

I will be using research done by Stephen Miklouchich (2000) for an MA Thesis in the Department of Sociology to model my project. This study is relevant to my project because it is a relatively recent production within my department in a similar format that I am proposing. Micklouchich uses a “qualitative analysis” to explain and describe crowd behavior at the Woodstock '99 rock concert. He used literature on theories of crowd behavior, popular culture, music, and previous qualitative and quantitative studies on rock ‘n’ roll listeners. He first described the reported behaviors that took place at this event and then applies theories concerning crowd structure, collective behavior, and emergent emotion. Miklouchich then discussed the concept of de-individuation, collective consciousness, and conformity. Finally, he explained the psychological effects of music using previous qualitative and quantitative studies and presents ideas for possible future studies.

My approach will be similar in that I will be qualitatively analyzing previous research on my topic, explaining the characteristics with sociological and anthropological theories, and presenting ideas for future studies. Additionally, I will use comparative analysis to explore patterns in other cultures. My proposed structure is as follows: I plan to first describe religious practices in Okinawa using the limited ethnographies in English and discuss theories pertaining to the social significance of religion. Then, I will present a comparative analysis on Okinawa and other East Asian religions practices including concepts of supernatural, possession, shamanism, and pollution. I will then discuss folk

illness and medicine using literature on the efficacy as well as Kleinman's Explanatory Models to explore these phenomena. Next, I will explain spirit possession and how it pertains to folk illness/medicine and use cognitive and embodiment theories. Finally, I plan to position pathogenic possession in terms of purity and pollution and discuss ideas for future research.

In addition, Dorothy Lewellyn Davis Moye (1971) presented a "descriptive study" on spirit possession. In her thesis, she attempted to examine a subject from a theoretical perspective and used literature from several different fields of study such as neurology, religious studies, anthropology, sociology, psychology, and historical and religious texts. She examined the characteristics associated with belief in spirit possession in the U.S., including social and economic setting, psychological factors, religious prevalence and adherences. She also discussed ideas for future research. I have now presented two studies similar to the one I am proposing, one theoretical thesis recently completed within my program and the other on a similar topic and format. The next sections will discuss the literature and theoretical framework.

## **Chapter II. Okinawa and Religion**

This Chapter will first discuss some fundamental social and anthropological theories on religion before examining the Okinawan folk religion in depth. Following this description, I will present issues that other researchers have commonly addressed in regards to medical anthropology on this topic. To conclude this chapter, I highlight what we already know about this subject and explain what this study adds.

### **Theories on Religion**

Sir Edward Burnett Tylor (1871) is considered to be the founder of anthropology of religion. He proposed that religion is created as humans attempt to explain events and experiences in their lives that cannot otherwise be explained by everyday expressions. Tylor suggested that early humans were most interested in exploring events such as death and dreams. He further argued that attempts to explain dreams and trances led our ancestors to believe that humans possess a soul. So at night when a person dreams, the soul is active. If the soul permanently leaves the body, the person dies. Tylor named this belief, animism from the Latin term for soul, anima. Animism, he argued, was the earliest form of religion and was characterized by the belief that nature and people are animated by personalized spiritual beings (McGee & Warmes, 2008). Tylor also believed that religion evolved in stages. If the earliest form of religion was animism, then as humans became more logical he proposed that the next stage was polytheism. Further development would eventually lead a society to adopt monotheism. Finally, Tylor argued that scientific knowledge would eventually decrease the reliance on religion.

Another important religious theorist was Emile Durkheim, who many consider the “father” of modern sociology. In his last work, *The Elementary Forms of Religious Life*, Durkheim set into motion a sociology of religion that attempted to identify the enduring essence of religion by exploring what he considered its most primitive forms. This was accomplished by differentiating between that which is sacred from the profane. Durkheim suggested that the concept of “sacred” is created by the performance of rituals that symbolically represent the moral power of society, which then creates social cohesion by binding individuals to the group. Profane then, is defined as the mundane or commonplace aspects of life. He further contended that the moral bond created between individuals and society becomes a cognitive bond because the categories for understanding are also derived from religious ritual (Ritzer & Goodman, 2004).

Durkheim explained that the superior moral power that inspires all believers is not God, or a god, but society. He argued that religion symbolically represents society and is the system of symbols by which society becomes conscious of itself. Because of this, Durkheim could account for the fact that while all societies have religion, they are all different. To him, God is only society “transfigured and symbolically expressed”, and thus is the source of the sacred (Durkheim, 1906/1974:52). Durkheim further argued that the development of religion was also based on the creation of a set of religious beliefs, development of religious rituals, and a single overarching moral community. Rituals and moral community, he argued, connect the representations of the social to individual practices. This occurs because rituals and the moral community is where individuals learn about the sacred and the belief system, they reenact the collective memory of the group, and they reconnect individuals to the social which he describes is a source for greater

energy that has the power to inspire during mundane activities. To Durkheim, society is a force greater than us, transcends us, requires our sacrifices, subdues our selfish predispositions, and fills us with inspiration and energy. With that interpretation, the concept of religion as a symbol of society is quite vivid.

### **The Location**<sup>1</sup>

Okinawa is a subtropical region located 400 kilometers north to south and 1,000 kilometers east to west between the Pacific Ocean and the East China Sea. The prefecture is a chain of 160 islands commonly known as the Ryukyu Islands and of those, only about 40 are currently inhabited. The area is 2,274.32 square kilometers and as of 2006, the total population is 1,364,274 (Okinawa Tour Guide, Okinawa Convention and Visitors Bureau). The cultural identity of each island is unique and slightly distinct from any other in the archipelago. Although Japanese is widely spoken, Hogan, the Okinawa dialect, is also often used. The location of the Ryukyus islands have made them historically ideal for trade however, it has also made Okinawa extremely valuable as a strategic asset in times of war. As I will detail in the next section, Ryukyus has endured centuries of tragic memories from the turmoil of suppression and war. (Outline of Okinawa Prefecture, 2008).

Founded in the 15<sup>th</sup> century, Okinawa was an independent kingdom known as Ryukyu. Trade with Southeast Asia, specifically China, brought about prosperity and a highly developed culture. However, in the early 17<sup>th</sup> century Okinawa was overtaken by Satsuma and was forced to be under his indirect control. Later, in 1879, the Japanese Government annexed Okinawa. It remained under Japanese governance until the battle of

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<sup>1</sup> A map of the location is included in appendix I.

Okinawa during World War II and from 1945-1972 it remained under American control (Ohasi, Sakumichi, & Horike, 1984). Since 1972, although Okinawa has been officially returned to Japan, it still carries a heavy burden of American military occupation.

### **The Ryukyu Religion**

Before delving too deeply into a discussion about the religious practitioners called *yuta*, I would like to present a very brief introduction to the belief system that I am exploring, the Ryukyu religion, which is the indigenous religion of Okinawa. This religion is characterized by ancestor worship and has influences from both Japanese and Chinese religions.

Due to the fact that Okinawa was for centuries used as a “gateway” between Japan and the rest of the world, it has become a melting pot of cultural adaptations. This “jambalaya” of culture incorporates styles of dance, art, clothing, food, and even religious practices from different areas around the globe, all acting as complimentary ingredients that meld together into the distinct “taste” that is Okinawa. Religion in Okinawa is anything but homogenous and the population widely accepts Buddhism, Shinto, Christianity, and many others often simultaneously. However, the Ryukyu Religion is the indigenous religion and while it had many outside influences and practices vary from island to island, the basic characteristics remain the same. It is for this reason that studying religion in Okinawa is both difficult and interesting. I will discuss these overarching characteristics in the following sections.

William Lebra (1966) suggests that the folk religion in Okinawa is based on animistic and animatistic beliefs. The basic belief that everything has a spirit, and the most important spirit to Okinawans are the *kami*. The *kami* are described as sacred deities

with supernatural powers and have rituals performed on their behalf. *Kami* are believed to be able to speak, be seen, distribute punishments, and reward good deeds. Lebra (1966) categorizes five types of *kami* in a hierarchy of power<sup>2</sup>. The highest-ranking *kami* are those of heaven and nature such as the *kami* of heaven, the sea, the sun, and of water. Next is *kami* of specific locations such as the hearth, the house lot, the well and even the toilet. The third rank consists of *kami* related to occupations, such as blacksmiths, boatbuilders, or priestesses. The fourth level is considered the low ranking *kami*, called *futuki*. The *futuki* are the ancestral spirits of a decent group and are considered the link between the living and the supernatural world (Lebra, 1966, 21-23).

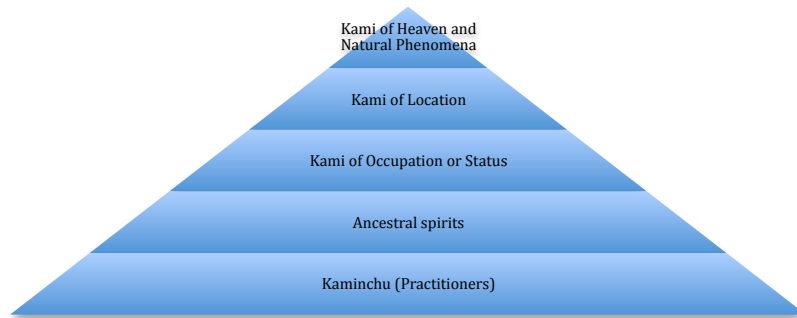
Okinawan folklore depicts two sibling deities, *uminai-gami* and *umikii-gami* meaning brother and sister *kami*, who descended from heaven to create land and human life. During the time of the Ryukyuan Kingdom, important political positions were always paired with religious positions and were usually a brother-sister combination. Many religious and kin group positions are still paired this way. Lebra (1966) contends that these two figures do not necessarily play a significant role in rituals or in daily life, even though they are creator deities. He hypothesizes that they are symbolic of the male-female principal of the universe, like yin and yang. Lebra (1966) further argues that this concept is likely related to the idea of *onarigami*, or the spiritual superiority of women, in the Ryukyuan belief system that I will discuss further below. More important to daily life and ritual practices however, is the Okinawan concepts of ancestors.

*Futuki* are very important components to the Okinawan belief system. Baksheev (2008) explains that ancestor worship in Okinawa is defined as the act of *ugan*, meaning giving

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<sup>2</sup> Illustration denoting this hierarchy described by Lebra (1966) is included on the following page.

**Figure I: Hierarchy and Description of *Kami***



<i>Kami of Heaven and Natural Phenomena</i>		<i>Kami of Location</i>		<i>Kami of Occupation or Status</i>		<i>Ancestral Spirits</i>		<i>Kaminchu (Practitioners)</i>	
Name	Description	Name	Description	Name	Description	Name	Description	Name	Description
Ting Nu <i>Kami</i>	Heaven <i>Kami</i> (Supreme)	Kaa Nu <i>Kami</i>	Well <i>Kami</i>	Fuuchi Nu <i>Kami</i>	Patron <i>Kami</i> of Blacksmith	Fuutuki	Low Rank <i>Kami</i> – Sprints of Deceased	<i>Kaminchu</i>	Living person Possessed of <i>Kami</i> spirit
Unjami	Sea <i>Kami</i>	Fii Nu <i>Kami</i>	Hearth <i>Kami</i>	Funi Nu <i>Kami</i>	Boat <i>Kami</i>				
Tiida-gami	Sun <i>Kami</i>	Fuuru-gami	Toilet <i>Kami</i>	Sheeka Nu <i>Kami</i>	Woodworker <i>Kami</i>				
Miji-gami		Taa Nu <i>Kami</i>	Paddy <i>Kami</i>	Nuru – gami	<i>Kami</i> of the Priestess				
		Yashic hi-gami	House-lot <i>Kami</i>						



honor and homage to the dead “forebears” by the living “offspring” or descendants according to culturally established ritual practices. He further explains that there are three kinds of ancestors: *futuki*, *gwansu*, and *kami*. The *futuki* are the recently deceased whom are going through the individualized memorial services in order to eventually reach *kami* status, while the *kami* of the household are those “forbearers” who have already passed through these ritual procedures. Together, *futuki* and the household *kami* are called the *gwansu*. *Kami*, on the other hand, are those “full-fledged ancestors”, that have successfully passed through the ritual processes and have become depersonalized entities that are capable of granting protection to the decedents. I will further discuss death rituals and the deification of spirits in later sections.

Okinawan’s animistic beliefs are also associated with the concept of *mabui*, which means soul or spirit. A living person’s *mabui* is called *ichi mabui*, and a dead person’s *mabui* is *shini mabui*. It is believed that certain events or shock can cause an individual to loose the *mabui* and if not retrieved, the result may be death. Rituals may be performed to return a lost or stolen *mabui*, as well as to separate a deceased person’s *mabui*, *shini mabui*, from the living family members.

The Okinawan concept of *onarigami* is another unique characteristic of the religious belief system. The idea of *onarigami* basically asserts the spiritual power of women and is the concept on which the Ryukyu religion was developed in the sixteenth century (Wacker 2003: 354). Monika Wacker (2003) gives a detailed account of *onarigami* both historically and currently. She contends that this belief gave women in Okinawa a leg-up in the social and political sphere during the Ryukyuan Kingdom era and asserts that this concept is still relevant today in shaping women’s identities within

the society. *Onarigami* is also the title of a female ritual specialist<sup>3</sup>, which means “female deity” or “divine woman,” and she is said to possess the power to bless or curse male relatives. The Ryukyu religion often stresses the spiritual power of the sister-brother relationship. Males were reliant on their sisters (or sometimes other female relative) for their spiritual well-being. Wacker suggests that this sister-brother relationship became increasingly important in the seventeenth century forward possibly due to the influence of state formation and the introduction of the “matrilineal clan ideology” (Wacker, 2003). The belief of *onarigami* began to decline toward the eighteenth century with the influence of Confucian ideas which brought with it a gradual reduction of female political power. The author further notes that in its prime, the Ryukyuan Kingdom could easily be considered an egalitarian society. Wacker concludes by pointing out that with the decline women’s power also came the decline of the Okinawa’s prosperity, and only recently are women regaining the acknowledgement of the spiritual power that they once possessed. The concept of *onarigami* is the fundamental premise that supports *saadaka*, and female guided religious practices. I will explain *saadaka* below, but it is important to note here that another unique quality of the Ryukyuan Religion is that women are the primary practitioners and it is only through the belief in *onarigami* that this is possible.

### **Practitioners**

As mentioned above, women in the Okinawan belief system are thought to be spiritually superior or at least more connected to the supernatural world than men. Since the beginnings of the Ryukyuan society, *yuta* have been a significant part of the culture.

*Yuta* are women who are said to have supernatural abilities to mediate communications

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<sup>3</sup> The term *onarigami* “female deity” as a ritual specialist will only be used in this section because they are not typically referenced by other sources.

between the dead and the living and to cure certain illnesses (Allen, 2002b). It is through the advice of their client's ancestors that the *yuta* are able to offer advice and treatments to their clients. They are known for their communication through a trance state in which trembling or shaking marks hallucinatory contact with their personal god or ancestor (*chiji*). *Yuta* are typically middle-aged or elderly women and are generally respected throughout the community (Allen, 2002a). At birth, *yuta* are identified as being "of high spirit birth" or *saadaka* unmari. In later years they are afflicted with *kami daari* or "revenge of the gods," which includes symptoms such as nausea, dizziness, vomiting, genital bleeding, delusion, vomiting blood, and many other physical manifestations. At this time it is essential that the chosen women accept their afflictions as a calling to become a *yuta*. It is only through following the clear instructions of the *yuta* that a person afflicted with *kami daari*, or any other illness, will become well again. Other than illnesses, clients also seek out these shamans and obtain advice on issues of luck, matchmaking, and modern day stressors (Allen, 2002b).

The history of the *yuta* demonstrates how their practices have become engrained into the Ryukyuan culture and provides a starting point for the purpose of this research. Since the introduction of modern biomedicine medicine, most notably in the 1970s, the two practices have coincided and have provided Okinawans with two choices for mental healthcare. Before tackling some of the problems that face this medical pluralism, it is necessary to look at some of the other ritual practitioners within this culture.

Susan Sered (1999) has been criticized for much of her work in this field, yet she provides a sterling comparison of three specialists: the *yuta*, ogami people, and priestesses (also known as *noro* or *kaminchu*). These critics include Kawahashi

(2000), Wacker (2003), Kōji (2001) and other notable Japanese and Okinawan scholars, all of which contend that Sered's limited language skills secluded her from the extensive research done by Japanese scholars. They also suggest that Sered's research portrays the Okinawan people as backwards or primitive (Waker 2003).

According to Sered (1999) the *yuta* are the shaman of the culture. Basically their roles include mediation between individuals and spirits, identifying whether or not a woman should be a priestess or a *yuta*, determine reasons for misfortune, and give general information about fortune and luck. Sered further asserts that the *yuta* transmit information to help individuals both living and deceased to negotiate better relationships. Sered also identifies *ogami* (prayer) people as ritual specialists typically not mentioned by previous researchers. She contends that *ogami* once served the community by praying on a particular occasion or for a specific event. They are described as representatives of a family or household and have the ability to make a good prayer. *Ogami* were typically older women and grandmothers of the community and were said to be "a little bit" of a *yuta*. Furthermore, she defines the priestesses as being the embodiment of their particular god or spirit and are responsible for the maintenance of their community's natural state of "equilibrium, health, and harmony" (Sered 1999:129). Neither the *ogami* people nor priestesses communicate with the dead, although they may be possessed by them. Only *yuta* may communicate in this way. Most notably, priestesses and *ogami* people are to take care of communal and public matters; *yuta* deal with the private sector and receive money for their services. Historically the *yuta* have been highly significant to the Okinawan culture (Sered, 1999).

Repression of the shaman of Okinawa first began with the Satsuma invasion of the Ryukyu Kingdom in 1609. Satsuma wanted to use the island as a port to trade with China after Japan passed trading prohibitions on all foreign trade. Regulations were passed that forced the Ryukyuan people to conform to Chinese ideologies and styles. As a result, the laws banned *yuta* from practicing and prohibited citizens from their use. When Japan finally annexed the kingdom, a campaign was enacted in order to stop what the Japanese saw as an embarrassment in the reliance of the Ryukyu population on *yuta*. Then, in 1938 and 1939 the Special Thought Police “tokko,” described *yuta* and other shaman and mediums as “Okinawan separatists” and accused them of being spies (Allen, 2002b).

Finally, after the devastation of World War II, the *yuta* became more visible in society when Okinawa became a protectorate of the United States. The lack of adequate medical facilities by Western standards, created an increasing demand for traditional shaman and their practices continued to grow. After a marked improvement in biomedical healthcare facilities in 1972, the use of *yuta* services remained high due to patient dissatisfaction with the medical treatment provided. Discriminating legislation still continued as recently as the 1980s as the Okinawan government contended that the *yuta* consistently challenge scientific knowledge, modernization, and more implicitly are considered “anti-Japanese”. However the *yuta* clientele have been relatively unaffected and they remain a prominent fixture in society even after centuries of persecution (Allen, 2002b).

As mentioned above, *yuta* receive a calling later in life to their position, usually by a folk illness called *kami daari*. As mentioned earlier, this condition can have a multitude

of physical manifestations and it is imperative that the sufferer follows the advice of a *yuta* to recover. Allen (2002) reports that many *saadaka* individuals do not wish to become a *yuta* but are influenced to do so by family and the community. Previous researchers have concluded that either a woman becomes a *yuta* or the *kami daari* will never subside.

So what happens when the shamanic role is accepted? Allen explains that with the advice of a *yuta*, the novice *yuta* can manage and gain control of their *kami daari* symptoms. Finding the *chiji* “personal god” (much like a spirit guide), is the first step. Specific rituals and rites may also be prescribed. Although the *yuta* may never completely eliminate the illness, the community becomes aware of their success in overcoming and managing the difficulties. Lebra (1966) contends that overcoming the illness gives the *yuta* authority and is proof to the community as well as to the novice herself that she is in fact a shaman. This is evidence that she has mastered her supernatural power and that shamanistic knowledge has been recognized. Lebra (1966) further argues that this reputation is the defining component in the establishment of the *yuta* in a community position with the ability to help others with similar problems (Lebra 1966:45). According to Sered, “[i]llness is their training, their university; through illness they learn their role” (Sered 1999, 204).

Not only do *yuta* typically suffer from *kami daari*, but other individuals might experience it as well. Lebra (1966) reports that *yuta* often attribute a laypersons *kami daari* symptoms to an improper rite or the lack of certain ancestral rituals by that individual or their family. In order to return to their normally healthy state, sufferers must follow the advice of the *yuta* and perform rites to rectify their situation and appease the

gods. Often these rituals are quite extensive and sometimes require visiting multiple sacred prayer locations. Once appeased, the *kami* will allow order to be restored (Lebra, 1966).

The physical manifestations of *kami daari* may resemble certain psychological disorders, a problem that concerns many researchers today. Psychological disorders are consistently higher in Okinawa than other prefectures of Japan, and occurrence of schizophrenia is particularly higher than the national average (Allen 2002a). The Okinawa Prefecture Department of Health and Welfare statistics documented that nearly 70 percent of the hospitalized psychiatric patients in 1995 were suffering from schizophrenia (Allen 2002b). The significance of schizophrenia to the research topic is the fact that the symptoms of the disease are similar to the symptoms of *kami daari*, “revenge of the gods”, a common *yuta* specialization. When symptoms of these problems arise, patients can become confused about which medical system to use: the folk medicine of the *yuta*, or allopathic medicine. Often, a reason patients may choose *yuta* is due to the less stigmatizing label (Allen 2002b).

Prevalence and confidence in shamanistic healthcare is bound to have an effect on biomedicine, therefore impacting the society in which it resides. Japan has experienced great advances in biomedicine; however, the Okinawa prefecture has often been seen by the mainland as being “backward” and “primitive.” The shaman have withstood decades of repression and discrimination, yet today healthcare systems are combined in some medical clinics where *yuta* are employed to enable the physicians to provide culturally sensitive solutions for their patients. The physicians who adopt the use of these culturally accepted practices are displaying their understanding of the area and their respect for the

religious and cultural practices of their patients, without necessarily accepting them as alternatives to biomedicine (Allen 2002b).

In this chapter I have addressed the social and anthropological theories of religion pertaining to this study, the basic tenants of the Okinawan religion, and the issues addressed by other researchers. It is important to incorporate the work of previous researchers so that I may develop a fine tuned topic that explores unexamined avenues. From this research we already know that shamanism is still being practiced in Okinawa and is female dominated. While other researchers have contributed heavily by extensive ethnographic studies on belief systems, shamanism, feminism of religion, and the interaction of biomedicine and folk medicine in Okinawa today, none have readily discussed the concept that links all four components together: *saadaka*.

I became interested in this topic during my travels to Okinawa and overheard mention of *saadaka* more frequently than any other aspect of religious practice. Unfortunately, the constraints of such a small project limit the inclusion of my own fieldwork, but future studies would certainly benefit from the insight into this phenomenon. As mentioned above, *saadaka* means supernaturally sensitive, a sort of sixth sense that enables individuals to communicate with the spirit world. Lebra (1966) asserted that humans are spiritually ranked by a value called *saa*. Ordinarily, this is determined by one's birth year in the Chinese calendar and by an individual's inheritance. Special persons, however, are considered *saadaka*, or have high *saa*. This is not something that can be acquired or rejected and is often a requirement of a spiritual practitioner, especially *yuta*. *Saadaka* is the underlying concept that enables a person to become a shaman. It is the fundamental requirement to practice certain rituals; it is



primarily directed toward women, and enables shaman to practice folk medicine. In the next chapter, I discuss ritual activity and how it pertains to this topic.

### **Chapter III. Ritual Activity**

*Saadaka* is the prerequisite for many practitioners because it is essentially the sensitivity or openness to connect with the spirit world. So, many rituals revolve around this concept. Other ritual activities are practiced at the ordinary, household level, by people with normal *saa*. This is done to stay in tune with the spirit world and maintain a harmonious balance between the two realms.

#### Rituals and Social Theory

In this chapter I will primarily discuss the ritual role of practitioners such as the *yuta* due to their necessary involvement in many rituals. However, I will discuss ritual practices on a household level to demonstrate daily involvement. First, I will introduce concepts of rituals and symbols by discussing Victor Turner, a British anthropologist who argued that symbols are a mechanism for the maintenance of society (McGhee and Warms 2008). Turner believed that social order had to be maintained and the primary tools to do this are through ritual symbols. I will begin by defining rituals and then applying Turner's concepts to some common practices in Okinawan culture.

Douglas (1966) suggests that ritual focuses attention by "framing", that "shuts out" intruding themes and "shuts in" desired ones. Thus, the idea is under the control of an external sign and this is how rituals create and control experience. Turner (1967) presents us with a descriptive definition of ritual, "formal behavior for occasions not given over to technological routine having reference to beliefs in mystical beings or powers" (McGee & Warms 2004:536). Furthermore, he asserts that symbols are the units

that make up ritual behavior. Lebra has examined several different rites and rituals performed by Okinawans, however I will discuss only five types that were also often discussed by other ethnographers.

First, Lebra discussed asking and thanking rites, and he explained that these types of rites were used for a number of different annual ritual cycles such as the harvest rite. Second, notification and inviting rites are important to keep the ancestors updated on the family, specifically it is important to notify the spirits and invite them when moving from one community to another. I will categorize hearth rites into the notification and inviting category since it is done daily by the female head of the household. Third, rites of passage are of importance, specifically death rites are performed by surviving family members and remain important long after the death. Next are ancestor rites, which are performed on a regular basis at the household and kin group level. Deification of deceased relatives is discussed in more detail in a later section of this paper. Lastly, a number of specialized shamanistic rites are important, including *mabui-gumi* or the returning of a soul to the body, mediumistic rites, divining rites, and curing rites. Below I will examine these five types of rituals and further categorize them into community rituals, household rituals, and shamanistic rituals.

### Community Rituals

Turner (1967) inherited a Durkheimian perspective that is very common to many other British structural functionalists. In his analysis of the muddy tree in the Ndembu culture, he linked the symbolism of muddy tree rituals to the Ndembu society. As I discussed earlier, Durkheim argued that it is through rituals that individuals maintain social solidarity and in essence worship society itself. Turner (1967) explained that the

mudyi tree is symbolically tied to matrilineality, which is the principle on which the continuity of Ndembu society is based. There are several rituals and ceremonies that Lebra (1966) examines on a community level, most being asking and thanking rituals associated with harvest and a tug-of-war celebration. Many of these rituals exhibit the common male-female dichotomy, for example the knots on the rope for the tug-of-war contest are said to be male on one side and female on the other. In these ceremonies, observers can see the influence of Chinese principles of yin and yang in such cases but Okinawans apply their concepts of *onarigami* in such instances as well. For example, if the female side wins the tug-of-war contest, it is believed that the harvest will be especially bountiful. While Okinawans demonstrate cultural influences from outsiders, their concept of the spiritual superiority of women is also present, creating a unique amalgamation of cultural practices.

Lebra (1966) contended that these community rituals function to reinforce the emphasis of social unity and familial ties. He explained that many of the villages are isolated by natural structures such as heavily wooded areas and the homes within the villages were very close in proximity to one another. He argued that the close physical unity correlated to the deep consciousness of the importance of social unity. Furthermore, he asserted that the physical isolation of the villages reinforced Okinawan concepts on the importance of endogamy. Endogamy was also supported by early government control of residential relocation. Lebra then explained that the spirit of internal unity was enhanced by the communal land tenure and reciprocal labor exchange in prewar-Okinawa. This practice allowed the village to be represented as a cooperative body. In addition, social solidarity is further supported by the idea that the individual maintains

social identity through the family. An individual can both honor his or her family through achievements and disgrace them by personal wrongdoings. In this way, social control is expressed by equating individuality with selfishness.

Using Turner's (1967) perspective on rituals and symbols, and in a Durkheimian view, I can argue that community rituals in the Okinawan culture function to reinforce specific social structures. Social solidarity is reinforced through the devaluing of individuality and the importance placed on familial and community ties. Endogamy is encouraged by the physical placements of homes and villages and the restrictions associated with relocation. Strong familial relationships are emphasized by the fact that individual actions socially affect the family. Finally, the universal principle of yin and yang is manifested in the male-female dichotomy associated with many ritual practices. *Onarigami* is incorporated in this concept as women are typically the leaders of religious rituals, which Lebra suggested is further supported by the fact that the division of labor at a household level is often not fixed and is quite flexible.

### Household Rituals

Lebra (1966) asserted that Okinawan society and law have recognized the family as the cornerstone of greater society and the institutionalized familial relationships that are formed, mold the basic patterns for social interaction. In this section, I will discuss ritual behavior at the household or kin group level and I will detail two of the most important ritual practices that function in Okinawan society today. Okinawan hearth rites are arguably the most important ritual practices at the household level, and *Obon* is one of the most elaborate ritual celebrations of the year. Before analyzing each ritual in detail, it is important to describe the basic kinship structure from which they arise.

Okinawan society is based on a patrilineal principle for worshipping common ancestors and is segmented into extended families. The largest group of households is called a *munchu*. The goal of the family system is to ensure the family's continuity through unbroken succession of the male line. Descendent generations are vital to religious practice because it is necessary that the descendants perform rituals that both ensure proper deification of ancestors as well as protects the living relatives from misfortune. Leadership is granted to the eldest son as are much of the family wealth, property, ancestral tablets, and obligations. Residency patterns for the family are patrilocal for the eldest son and neolocal for the other siblings. Neolocal residency is described as the creation of a "branch house" in which ritual obligations binds it to the "parent house" creating a lasting relationship between the two households. This close proximity to the other family members is emphasized from birth. In fact, Lebra asserted that individuals who must live alone are pitied (1966, 178). It is argued that the family household is considered the basic unit of the community and society, which constitutes the individual's function in the social system. (Lebra 1966, 178-180).

Lebra (1966) explained that politically representation within the community is accorded on a household basis and not to each individual, so that each family has only one voice regardless of its size. He further argued that the family is a "microcosm" for society as a whole (Lebra 1966, 178). The household is said to constitute a ritual unit and is included with state, community, and kin group ritual activity, but also encompasses a whole "sphere of rites" directed toward ancestors and the health and well being of the family members (Lebra 1966, 179). The interesting characteristic of Okinawan religious practices is that there is little recognition paid to the standard Buddhist patrilineal

emphasis. Basically, there is no distinction made between the father's relatives and the mother's. Typically, ancestor worship attributes a low status to women but in Okinawan society, this belief is offset by the belief in *onarigami*, or the spiritual superiority of women. In the following section I will elaborate on what some researchers considered the most important household ritual, hearth rites and examine why these rites are so vital to Okinawans.

Researchers Lebra (1966) and Baksheev (2008) discussed the importance of the hearth rites in Okinawan religious life. This ritual is performed on a daily basis by the senior female within the family at the hearth shrine which Lebra (1966) asserted is more important than even the *butsudan* (the ancestral shrine). A shrine is assembled in every household to worship *fii nu kang*, the fire goddess, who is said to be the living's direct connection to higher *kami*. Regular worship requires the senior female within a household to be responsible for performing the hearth rites, which includes a daily report of activities for each and every member of the household. Lebra argued that *fii nu kang* represents the continuity of the household through time and the family member's relationship to the *kami* just as the ancestral shrine symbolizes the continuity of the male line and the family's relationship to the ancestors. This is demonstrated by the collection of ashes from the parent hearth to be distributed at a new branch hearth, to symbolize the eternal connection of the families. Lebra argued that the importance of this domestic ritual was that the *kami* and ancestors are informed of all family activity, from births, deaths, to daily issues. Matayoshi and Trafton (2000) argue that the hearth rites directly affect the family's psycho-dynamics and can be analyzed in three different points of view. They assert that these rituals ensure cleanliness of the kitchen area where the shrine

is located, peace of mind because the goddess is thought to protect from fire, and lines of communication are opened between family members and *kami*. Furthermore, they argue that these rituals help women to transition from career roles to domestic roles with ease as she is allowed to dispose of her problems at the hearth upon returning from work. I would further argue that the daily involvement of the senior woman into the lives of each of her family members, which is necessary for the daily rituals, functions to further bind the emotional and social ties of each member. Thus, hearth rites function to reinforce familial ties and symbolizes the continuation of the family from generation to generation. The next section will discuss the *Obon* ritual that will further demonstrate the importance of family and kinship and will introduce the symbolic importance of patrilineality in Okinawan social structure.

Another important ritual is the Buddhist festival for the dead (*Obon*). Lebra (1966) contends that aspects of Buddhism have been interwoven into the culture to the point in which they are relatively unrecognizable. During this period, the dead relative and ancestors are visited at their tombs and invited and escorted back to the family's home. Food offerings are made and the extended family is returned to the parent's home. Baksheev (2008) suggested that during this period, family members speak to their deceased relatives while they are visiting and upon the end of *Obon*, it is important to escort them back to their tombs or to their point of departure (such as the end of the block). It is important to mention here that there was a significance attached to refraining from "looking back" once the family members are returned to their place of departure. Researchers report that the deceased relatives would then desire to stay with the surviving family members which would inadvertently pollute, or contaminate the individual



(Matayoshi and Trafton 2000). This pollution could cause the individual misfortune and possibly sickness.

If spirit pollution occurs, a supernatural practitioner may be consulted such as a *yuta*. As mentioned above, the *yuta* are what we would consider mediums. The *yuta* communicate with the dead as well as spirits and gods. Their work is mostly done at a private level and they are paid for their advice and help. More than mediumistic communications, the *yuta* are responsible for essentially guiding her clients through the hardships that they may be facing. The literature on *yuta* frequently mentions that often spirits of the dead seek the *yuta*'s help as well (Allen 2002a). The spirits may ask the *yuta* to deliver a message to their survivors or ask for a ritual to be performed. In this regard, it is the *yuta*'s obligation to help in whatever way that she can (Allen 2002a).

The *yuta*'s services often extend beyond mediumistic ones, for example there are several rituals that *yuta* can perform either in absence of or alternative to a priestess at a public or community level. The *yuta* or those whom the community trusts as *saadaka* can perform rituals and religious activities. Several practices of warding off malevolent spirits are used by Okinawans, but especially by the *yuta* and other spiritually sensitive individuals. Atop the roofs or at the gates of most residences sits one or a pair of *shisa* (or *shishi*). These unusual creatures resemble both lion and dog and are used to ward off harm to the inhabitants. Salt is also commonly used to purify and protect, and is sprinkled on individuals or added to water to cleanse them of evil. Occasionally, evil spirits may contaminate a home or an individual, and an exorcism rite called “*yanamung-baree*” is necessary. Furthermore, geometric and house construction rites are often performed by *yuta* or other ritual specialists, and are similar to the Chinese ‘*feng shui*’ but are called

*'fungshi'* by Okinawans. *Fungshi* rites are used to protect the house against misfortune and are often thought of as an essential part of house construction. These roles demonstrate both the assimilation of other cultural and religious practices while also emphasizing the uniqueness of what it means to be Okinawan.

Other than *Obon*, Okinawans have other rituals and practices that fixate on the deceased and spirits. Baksheev (2008) presented to the English-speaking world, a compilation of Japanese research that analyzes the mortuary rituals of Ryukyans over the past several years. The literature analyzed is based on a number of sources that would otherwise be unavailable to a non-Japanese speaker. This work primarily focuses on the ritual deification of spirits; specifically the author details the progression from a recently deceased human to an ancestral deity. Baksheev contradicts the standard theories on the deification that contend that after thirty-three years after death, ancestral spirits lose their personalities and began to be worshiped in communal agrarian rituals by the whole village. The author argues that the deified ancestors and the communal deities of the village are two separate concepts and he demonstrates this with evidence from the rituals practiced in various islands of Okinawa.

Baksheev (2008) focuses his attention on the double burial method, in which a series of ritual procedures are required during the years after a death in order for the deceased to become an ancestral deity. The double burial method includes a preliminary burial in which the body is exposed so that the flesh may separate from the bones. During forty-nine days, the deceased is seen as a wandering spirit, traveling from tomb to natal home and is thought to be in terrible pain and very polluted while it is in this liminal phase. After forty-nine days, rites are performed to separate the dead from the living

relatives and the formal grieving period is over as the deceased then passes into another world or may be thought of as residing permanently in the tomb. His work will be discussed in greater detail in a later chapter. Now that I have discussed *Obon*, a ritual practiced by most but focused on familial ties, it is now logical to progress to shamanistic rituals, as I have already mentioned shamanistic practices at the household level.

### Shamanistic Rituals

In this section, I will discuss three rituals that are typically performed by religious practitioners that are considered shamanistic by nature. The first ritual discussed is *mabui-gumi*, which is the replacement of a lost or dropped soul. Next, I will discuss specialists' communication with the dead as well as curing and divining rituals. I will briefly detail these ritual activities and explore how these practices symbolically function in Okinawan society.

Okinawan's belief system centers on the concept of the *mabui*, or the soul. It is common belief that the *mabui* can easily be separated from the body, which could cause illness or misfortune to the victim. A fall or sudden fright, or even a violent sneeze could cause a *mabui* to be lost. If this occurs, a ritual called *mabui-gumi* is necessary to restore the soul to the body. The individual may recite a few words to encourage the *mabui*'s return, bend over and scoop it up, and then place it on his/her chest. If someone sneezes violently, the words *kusu kwee* (eat feces) may be uttered to frighten away any malevolent spirits who may attempt to steal the *mabui*. Lebra (1966) reported that a formerly used more complex ritual was enlisted to return the *mabui*. He argued that the ritual was a method emphasizing "gaiety and interaction with neighbors" that aided in consoling the victim and to symbolize his/her return to normality.

Matthew Allen (2002b) explored the practice of *yuta* communicating with the dead in relation to mental health practices in Okinawa. He explained that some *yuta* communicate with client's ancestors as if they were talking over the telephone with the ancestor's receptionist. This symbolic representation allows the *yuta* to easily convey that she is communicating with the dead through a third-party and permits her to actively involve the client in the relaying of information. The use of the telephone analogy allows the *yuta* to "mix symbols of the shared habitus of "Okinawa-ness and contemporary symbols of life in modern society" (Allen 2002b, 232). These habitus, or what Bourdieu described as shared cultural signifiers, directly influences the perception and results of the ritual practices. In essence, this habitus is an important component to how a patient understands his or her diagnosis which affects outcome of the treatment.

After a diagnosis is made, a shaman may then perform or recommend that the client perform certain rituals to treat the ailment. The practitioner may suggest that the ailment is caused by an ancestor who was angered by an incomplete ritual in their honor. In these cases, the ancestor is first identified and steps are taken to apologize and rectify the situation. If a malevolent spirit is thought to cause the sickness, exorcism or purgative measures may be taken to expel the unwanted visitor. Some researchers suggest that curing rituals assign a symbolic meaning to the cause of the client's suffering and that this act alone promotes understanding and can alleviate or lessen many ailments. The next chapter will further this discussion by examining efficacy and culture bound illnesses.

## **Chapter IV. Folk Medicine: Curing and Culture**

### Efficacy and Culture-Bound Illnesses

The study of shamanism, *saadaka*, and folk medicine can often be bombarded with questions of the efficacy of such practices. We have discussed how shamanistic practice is utilized and valued on a religious level, but that does not necessarily answer questions about how folk medicine is still functional in a developed society with an integrated biomedical model. Efficacy can further enlighten us to some reasons that shamanism, folk medicine, and healing are functional today in Okinawa. Therefore, this chapter will discuss efficacy and culture-bound illnesses. I will begin by examining the placebo effect and how some researchers may argue that this may alleviate certain ailments. Then I will describe an ethnographic project exploring the phenomenon of religious healing. Next, I will discuss culture-bound syndromes in Malaysia, Brazil, and among the Q'eqchi' before concluding with an analysis of Arthur Klienmen's Explanatory Models that will describe how researchers might study such illnesses.

### Deconstructing the Placebo Effect

In discussing the efficacy of folk healing, one natural and logical hypothesis would be to focus on the placebo effect. Moeman and Jonas (2002) offer an explanation of the placebo effect and how it is used in medicine. To further our discussion, it is first important to have a definition of placebo and the placebo effect. The authors cite Shapiro (1997): "A placebo is a substance or procedure...that is objectively without specific activity for the condition being treated...The placebo effect is the ...therapeutic effect

produced by a placebo” (Moerman and Jonas 2002: 471). Moerman and Jonas challenge this definition by arguing that placebos do not cause placebo effects because placebos by definition do not cause anything, although their meanings can. They propose that the placebo effect can be explained as meanings and how patients perceive the treatment itself. They call their approach the “meaning response” which they attribute to prior work by Dr. Herbert Benson (1992) on the “relaxation response”(Moerman and Jonas 2002: 472). The meaning response is thus defined as,

*the physiological or psychological effects of meaning in the origins of treatment of illness; meaning responses elicited after the use of inert or sham treatment can be called “placebo effect” when they are desirable and the “nocebo effect” when they are undesirable. (Moerman and Jonas 2002: 472)*

Moerman and Jonas (2002) argue that medicine itself is meaningful and it can affect treatment of patients. They argue that previous research has found that such things as dress, manner, and language that the physicians use can all affect the outcome of a treatment, and thus diagnosis and prognosis can be important forms of treatment. They cite research that has supported aspects of the therapeutic quality of the practitioner’s manner and argue that the suggestive power of an authoritative figure and the language used can send a strong message to the patient and help shape the meanings created by the individual. The authors argue that the effects of these meanings on illness and healing cannot be reduced to placebos, they instead seep into the lives of the patient and affect more than just their perception of their prognosis, it affects their will and individual power to heal.

Moerman and Jonas (2002) conclude by contending that meaning is a very powerful force in human’s lives. So, they ask, why can we not enforce these meanings on

ourselves for the potent response that is so often given by a physician? The answer, they suggest, could be that only when someone such as a healer or friend indicates a level of social support is the body able to internalize and react (Moerman and Jonas 2002: 475). For example, when a ritual is performed, the patient may internalize the meaning of the illness and the body can be signaled to respond.

As mentioned earlier, the yuta are often associated with aiding in the recovery of individuals afflicted with the psychological symptoms associated with kami daari. So, what exactly are they curing and why does it work? Malinowski (1948) explains that magic has characteristics of science and that the power of suggestion is the curing component. The idea is that by a ritual show of faith, people's doubts and fears will be suppressed allowing them to mentally cope with a crucial situation (Dow, 1986).

For example, Levi-Strauss' (1967) studied the Cuna ritual song recitation used to ease the pain of a difficult birth. The song describes the shaman's symbolic venture into a mystical place that has trapped the patient's soul, causing the difficult labor. The song ends with the shaman's victorious return as the laboring patient is freed of her pain and the child is delivered. Levi-Strauss suggested that often the curing focuses the power of symbols to create meaning for the patient's suffering and is then the actual transition of the physiological process in a favorable direction. Dow describes it as possibly a "hypnotic treatment" (Dow 1986, 60). The recitation of the song allows the afflicted to focus on the mystical story created by the shaman and remain fixed on the powers involved, and thus the patient recovers

(Douglas, 1966). The cure is then the actual transition of the physiological process in a favorable direction. (Douglas, 1966).

Turner's (1967) description of the healing practices in the Ndembu tribe is a "social restructuring" and focuses its' curing properties on society more so than the patient (Dow 1986, 58). Additionally, Douglas offers an example of Turner's *An Ndembu Doctor in Practice* (1964) and blood cupping. She summarizes that the patient, convinced that other villagers had become displeased with him, socially withdraws and therefore suffers from both psychological and some physical difficulties. The treatment prescribed by the shaman involves the entire community verbally expressing their grievances against the patient and dramatically ends with the patient fainting from the blood cupping treatment. After the treatment, everyone congratulates the patient on his recovery and his relationship with the community is restored. Douglas attributes this example of ritual curing and its effectiveness to a manipulation of the social situation (Douglas, 1966).

### Spirits with Scalpels

Moerman and Jonas (2002) mentioned in their work, meaning of surgery and how "placebo surgeries" have produced equally beneficial outcomes as "real surgeries" (Moerman and Jonas 2002: 473). Sidney Greenfield (2008) experienced similar activities during his work in Brazil with Spiritist healer-mediums. Greenfield (2008) began his work in 1981 in the city of Fortaleza and continued his research for the next twenty-seven years. In the introduction, the author presents the difficulties that he has had in publishing his work because many academics argue that his work is simply too unbelievable. I confess that I too had doubts about his methods as I read about the unbelievable



experiences that he had witnessed. I suppose that the Western notion of “what is really going on” pervades our understandings even as anthropologists. For twenty-seven years the author witnesses and videotapes procedures that seem impossible to our Western eyes.

Greenfield (2008) presents four Spiritist healer-mediums in his exploration of unrealistic surgeries. Most of these healers lacked any professional experience or medical credentials and use the power of possession to channel spirit healers in order to help individuals suffering from certain illnesses. Most of the time, these practitioners did not use anesthetic or antiseptics and typically used dirty instruments to perform these procedures. None of the patients that the author experienced reported any pain during these proceedings and none reported any later infections from the lack of antiseptics. Greenfield did note that more extensive research could be done to assess the long-term effects of each patient’s experiences to analyze whether or not later problems with infections ensued, but in his experience there were none. These Kardecist mediums usually invoke spirits without songs, dances, or rituals. They simply require the medium’s own inner preparedness.

So, how are these phenomena possible? Greenfield (2008), like most medical anthropologists today, advocates a shift from our Cartesian dualism mindset in order to understand cultural “miracles” such as this. He cites LeShan (1995) to tackle this endeavor. LeShan (1995) proposes that we think of spirit beings as functional instead of structural concepts. Structural concepts, he contends, exist beyond the individual’s consciousness and have definite physical contributes. Functional entities, on the other hand do not possess this physical existence and exist only within the mind and only when

being considered to exist (Greenfield 2008:161). For example, LeShan (1995) suggest that we think of these entities as we do gravity or the square root of minus one. Both enable us to conceptualize data but, independent of our agreement of its existence, it is not real.

Greenfield (2008) suggests a new paradigm for our understanding of illness and spiritual healing. We arrive again at the Cartesian divide positing the mind and symbolic healing and embodiment suggested by Levi-Strauss (1967) and Turner (1967) one side. On the other side we have the biological and biomedical approach. To reunite these separate ideas researchers such as Ernest L. Rossi (1986) have explored a information/communication model that suggests that information may flow between different biological systems within the body and communicate a psychotherapeutic or hypnotherapeutic response. Rossi (1986) demonstrates how brain activity is involved with behavior and learning. Greenfield (2008) contends however that this approach fails to take into account culture. Therefore, he suggests that,

...information stored in the implicit memory of members of society, of which the individual is not necessarily consciously aware, then can be transduced via brain into codes of bodily systems to trigger the rest of what Rossi presents in his model of brain/body communication (Greenfield 2002: 180)

#### Culture-Bound Syndromes in Malaysia

Haque's (2008) work is in Malaysia in which she studies the Islamic beliefs of the Malay and the Christian, Buddhist, and ancestor beliefs of the Chinese. The Malaysian culture incorporates both Chinese and indigenous Malay aspects in treatment of illnesses. The standard ideas to mention before delving into specific culture-bound illnesses is that most believe that the loss of the soul is possible and can make individuals ill and weak,

also human behavior is an interplay between the material and non-material forces and purification of thought keeps a person mentally healthy.

The author briefly describes three culture-bound illnesses prevalent in Malaysia. First she describes *Amok* which is characterized by sudden unrestrained violence, usually homicidal. She asserts that the DSM-IV recognizes Amok as a culture-bound illness; however it does not address the important distinction between the two types found in Malaysia. *Beramok* is linked with personal loss and depression usually follows. On the other hand, Amok is linked to an attack of rage. Amok is often believed to be caused by evil spirits possessing the individual's body and causing them to do the violent acts. The second syndrome noted by Haque (2008) is *Koro*, which is also known as genital retraction syndrome is said to be characterized by shrinking or retracting of the penis due to an unhealthy or abnormal sexual practice such as masturbating or having sex with prostitutes. The final syndrome is *Latah* which is a trance syndrome which is said to be caused by a startle or a fright and is characterized by "odd" or translike behavior (Haque 2008:688). This illness is often treated by psychological therapy or religious rituals.

Haque (2008) contends that Malays believe that illness is often the result of soul loss or possession by the devil or other evil spirits. In these instances it is necessary to consult a *bomoh* or ritual healer. The profession of bomoh often runs in families and is both a calling and an apprenticeship. Because of the influence of the Islamic religion on Malaysian beliefs, Malaysian government has set forth rules for the bomohs to abide by which emphasize the absolute authority of God and the Islamic law.

Likewise, Haque (2008) argues that the Malaysian Chinese utilize similar activities when dealing with mental health and healing. She contends that the basic

concepts of yin and yang are utilized in treatments. Also chi, the life energy, is essential understanding Chinese medicine. For centuries, Chinese have been using techniques such as acupuncture and herbal medicine to treat certain ailments. In addition, Malaysian Chinese often use the services of a *shen*, or a medium healer, much like the *yuta* of Okinawa. Haque (2008) argues that both the *bomoh* and the *shen* help their patients by providing them with a cultural understanding of the cause of their particular illness which in turn eases the patient's anxiety (Haque 2008:694). Furthermore, she argues that it is vital that mental-health professionals understand these culture-bound syndromes because of the increasing popularity of alternative medicine.

### The Q'eqchi'

In searching for the latest research on culture-bound illnesses, I remembered the work of Faith Warner (2007). Warner's (2007) study of social support and distress among Q'eqchi' refugee women in Maya Tecún, Mexico, demonstrate a need for refugee administrators to reconsider the way that they define vulnerability. Warner argues that the sociopolitical violence and encampment of Guatemalan Mayan populations resulted in the breakdown of kin groups and as a result many Q'eqchi' women are left without the social support necessary to deal with those stressors. This research suggests that the refugee women with weak natal kin social support networks reported greater symptoms of distress and traumatic stress than women with strong networks.

Interestingly, a condition known as *muchkej* is most significantly reported and Warner suggests that this illness is a physical manifestation as well as an idiom that communicates distress. The physical symptoms of *muchkej* is described as generalized pain, often centered in the chest, that is mobile and often moves around the body, dull,

and numbing and women suffering from this illness receive sympathy and social support, are exempt from work, and are given the right to relax. Warner contends however, that while muchkej is a form of physical pain, it is also an expression of distress over the women's loss of maternal and natal kin support in the refugee community. It is believed to communicate suffering of loneliness, isolation, and lack of emotional and instrumental support that women usually received from their mothers and natal kin and thus, muchkej was used to express social and emotional problems. Warner (2007) urges that this group of women is arguably the most vulnerable members of the community and most in need of social support and assistance.

Haque's (2008) and Warner's (2007) work can provide us with an example of how culture-bound illnesses can express the social conditions experienced by a group of people. Often these illnesses communicate the fears and morals of that particular society and curing them is often a way of symbolically internalizing the meaning of what the individual is experiencing.

### Explanatory Models

Kleinman and Binson (2006) argue that cultural factors are vital to clinical practices such as diagnosis, prognosis and treatment. They suggest that there is a lack of evidence to supporting what they call "cost-effective" culturally informed therapeutic practices (Kleinman and Binson 2006:1673). The authors contend that the reason this discrepancy exists is because of problems with the idea of cultural competency as it is thought to be a skill that physicians may acquire through training. The definition of culture in the medical world becomes reduced to ethnicity. Clinical care then becomes a list of "do's and don'ts" based on the patient's ethnic background (Kleinman and Binson

2006:1673). Clinicians understand culture as a list of broad beliefs instead of looking at other aspects, such as socioeconomic and practical living situations. Kleinman and Binson argue that culture consists of, “economic, political, religious, psychological, and biological conditions” and they define culture as, “a process through which ordinary activities and conditions take on an emotional tone and a moral meaning for participants (Kleinman and Binson 2006:1674). The authors suggest that clinicians should be taught to deal with cultural issues anthropologically by training them in ethnography. This, they contend will familiarize them with the patient’s experiences with illness, and how they understand and deal with it.

Arthur Kleinman is often thought of as the most influential writer of medical anthropology. In his description of Kleinman’s explanatory model of illness, Young (1982) suggests that EM is more than just a label for the idea that every culture differs in respect to particular explanations for sickness. It is a set of beliefs that contain any or all of these five issues: etiology; symptoms; pathophysiology, type of sick role and severity, and the treatment (Young, 1982, 266). EMs also create order and meaning, and they are attributed to individuals instead of cultures. Because of this, an individual’s EM will probably change over time in response to medical experiences.

Kleinman and Binson (2006) created a cultural checklist to perform what they call a “mini ethnography” to better understand their patients from a cultural perspective (Kleinman and Binson 2006:1674). These six steps include determining: Ethnic identity and if that is important to the patient; what is at stake as the patient faces this illness; the illness as a narrative, in which a clinician attempts to understand the meaning of the patient’s illness from his/her perspective; psychosocial stresses; influence of culture on

clinical relationships; and finally the problems of a cultural competency approach, which assesses if this intervention will actually work in particular cases.

In order for this approach to work in clinical situations it is important for us to be aware of three basic ideas. First it is vital that the physician not stigmatize or stereotype the patient in any way. Second, they must be aware that they are participating in the patient's cultural world and are important to the patient's understanding of their illness as well. Finally, it is essential to understand what is at stake for the patient regarding the illness. Kleinman and Binson (2006) contend that keeping all of these ideas in mind, it is easy to see how using culturally sensitive concepts can help mend the relationship between healthcare professionals and patients.

This chapter has discussed folk medicine and efficacy. A cross-cultural analysis was utilized to explore culture-bound illnesses in Malaysia, Brazil, and Guatemala to demonstrate how folk medicine is currently functioning in other societies. Finally Kleinman and Binson (2006) offered an important method for researching folk illness/healing among different societies. Because we have established these concepts, we can now understand another reason that the *yuta* and *saadaka* are still functional in Okinawa today. This chapter has been the cross road at which medicine, culture, society and the spirit world have intersected. The following chapter will focus on the body and the spirit world by discussing a comparative analysis on pollution ideas from China, Korea, and Okinawa.

## **Chapter V. Comparative Analysis**

This chapter provides a comparative analysis that examines concepts of the human body and the supernatural from China, Korea, and Okinawa. Before progressing, it is important to mention a symbolic theory on pollution as discussed in the following section.

### Theories on Pollution

Mary Douglas' work on pollution and religion attempted to analyze universal symbolic patterns. She argued that these patterns exist and are expressed through ideas about the human body and represent beliefs about social order. In her book *Purity and Danger* (1966), she contends that shared symbols provides the tools for social control and thereby promotes social solidarity. Douglas further suggests that the human body is a representation of society and that bodily substances are symbols of danger or power because they represent relations within the human body. In the following sections, I discuss ways some Chinese and Korean folk concepts on pollution, often involving bodily functions. The following sections will provide cross-cultural examples of these pollution concepts.

### Power and Pollution in China

Emily Ahern (1978) presents a study on the power and pollution associated with women in China. She contends that Chinese women are often considered ritually "unclean" or "polluted" due to natural bodily functions and typical events in the lives of women. In her project, she examines three different approaches to answer why this idea



persists. First, she explores the nature of “unclean” substances and how they are connected to events such as births and deaths. Second, the social role of women is taken into account. Next, she looks into how these polluting substances are related to breaking the boundaries of social groups. Ahern’s study is relevant to my project because she examines rituals and beliefs that are very similar to Okinawan concepts and analyzes them in relation to pollution and social power, which is precisely my intent with Okinawan spiritual practices. In this section, I will describe Ahern’s findings and compare these concepts to ideas of power, pollution, and the supernatural in Okinawa.

Ahern first discusses the fact that Chinese beliefs view bodily wastes such as menstrual blood, postpartum discharge, and other fluids such as pus, mucus and urine for example as polluting. Therefore, women who are menstruating, have recently given birth, or anyone who has come into contact with a new mother, are not allowed to participate in religious practices. It is believed that worshipping while ritually “unclean” will cause the gods to notice the dirty state, which would be embarrassing to the individual. But, she asserts that this type of pollution is not necessarily associated with only women, and coming into contact with “unclean” individuals may also ritualistically pollute men as well. New fathers, for example, considered unclean as they are unavoidably connected to the new mothers and child. Ahern further explains that death is also a source for pollution and that a corpse is the most unclean of all substances. Special care is taken with death rites and mourners are considered both polluted and vulnerable to misfortune and/or illness (Wolf 1978, 284). Here, she contends, the term “pollution” refers to the interruption in communication between humans and gods because those unclean individuals are forbidden to worship at that time. Ahern then postulates that this

association of blood, both from birth and from death, may partially be tied to the emotional response of those facing such significant life events in which blood is closely linked.

Ahern then considers the possibility that women may have some sort of social power associated with the powers and dangers of menstrual blood and that it is an expression or reflection of women's social role. However, she argues that while young women might deliberately interfere with male ideals of family in order to gain security and control of their lives, nothing is gained by the intentional exploitation of their ability to pollute men. In essence, nothing is gained from preventing the communication between men and the gods (Wolf 1978, 289). Instead, she theorizes that particular events are polluting due to their effect on the stability of the body or family.

Finally, Ahern (1978) posits things that the Chinese consider to be "polluting" tend to threaten order such as the social order of the family or the normal order of the body. She argues that pollution is related to disorder because anything that crosses the boundaries of either the body or the family, whether it is something coming out (such as bodily fluids or death) or something coming in (such as a new marriage or the birth of a child) is considered unclean. Since pollution is described as anything that threatens orderly structure, then the entrance or exit of a family member, either by birth, marriage, or death, requires a ritual purification process. She contends that gods are viewed as the, "epitome of social order" while ghosts are considered the, "epitome of disorder" (Wolf 1878, 284). While men are capable of being considered ritually unclean, women are more likely to come into contact with a polluting event.

In Okinawan culture, Lebra (1966) reported that pollution or *chigarimung*, occurs not only in the physical sense, but the represents malevolent contamination of things that are the *kami*'s or those seeking communication with the *kami*. Some sources of pollution include childbirth, sex, blood, disease, bone-washing, and death and are often avoided if possible. Sacred sites such as the groves *utaki*, may be polluted especially by the presence of men. Religious practitioners are easily polluted, women may be considered polluted after childbirth during menses and may abstain from household rituals. A widow may also be considered polluted because of her close association with the recently deceased.

### Korean Shamanism

In addition to Chinese shamanism, other East Asian cultures express similar concepts of illness, misfortune, and spiritual practice. John A. Grim (2003) provided a detailed description of the *chaesu kut*, which is a Korean ritual to promote prosperity and ward off misfortune for paying clients. A shamaness known as a *mansin*, whom enters into an altered state of consciousness by invoking spirits to find cause and cure of misfortune and/or illness, performs this ritual. The *kut* is an elaborate ritual utilizing many artifacts and props and entails several hours of participation. Grim used his ethnography as a comparative study that explored the endurance of shamanistic practice in modern society. This approach was helpful in expressing religious meaning of the ritual activities, the formation of a shamaness, the techniques used, and the motivations of practitioner and client (Clark 2003, 113).

Similarities to Ryukyuan practices begin with the idea that illness and misfortune may be caused by ancestral spirits, and it is only through proper identification, or diagnosis, and ritual performance to appease the spirits will the ailment be cured. Also,

there is a clear link to Confucian influence in the focus on lineage ancestors. In addition, Grim explained that Korean shaman arise after experiencing a type of “shamanic sickness” similar to the Okinawan shaman and both cultures utilize female practitioners rather than male. Grim described this period in the shamaness’ life liminal, however he described this as a liminal status rather than a phase. This could be due to the fact that the shamaness, through her communication with the living and the dead is considered constantly betwixt and between the two worlds. I will discuss this issue further in the final chapter.

A notable difference in Korean and Okinawan shamanism is the types of trance states or altered states of consciousness’ that are used during ritual performances. While Okinawans typically incorporate either a mediumistic state to communicate with the deceased or sometimes pathogenic possession is thought to be the cause of some misfortunes. Korean shaman utilize a type of executive possession whereby a spirit is invoked and invited to take control of the shaman during the ritual. I will discuss both types of possession further in the next section. Although these trance states are different, their purpose is the same: to gain contact with the appropriate spirit in order to diagnose and cure a particular misfortune.

The last pattern Grim described was that of the restoration of balance. As discussed in the last section on Chinese beliefs, balance and harmony were essential to basic wellbeing. Grim explained that by diagnosing which ancestral spirit is causing disorder, rituals could then be performed to rectify the situation and restore harmony in the relationship between the client and the deceased. This idea also applies to Okinawan beliefs. Grim argued that resentment and imbalance causes problems for the living, and

thus restoring balance and reestablishing relationships are vital to the healing process. He contended that cross-culture similarities of these religious practices are demonstrated in the patterns of formation, technique, and goals of shaman and that these practices are capable of restoring the clients to a good relationship with themselves as well as with their environment (Clark 2003, 97-117).

The concept of balance is prevalent among all cultures beginning with the Hindu, Greek, Chinese and others. The modern concept of homeostasis deals with the balance of the body. Traditional Chinese Medicine (TCM) views the body, soul, and spirit as integrated. Emphasis is placed on three vital philosophies: the twelve channels of *ch'i*, yin and yang pertaining to hot and cold, and *wu-hsing*, the five elements distributed into five organs. Balance is established by dietary changes to compensate for excess hot or cold and traditional medicines, herbs, and medical practices. In addition, Ayurveda is the oldest medical system still in practice and originated from India. It is based on three primary foces or *dosha*, derived from five elements. Homeostasis between *dosha* is considered a state of good health. Hot and cold are symbolic in food, herbs, medicine, mental states, illness, natural, and supernatural forces. (Ariff & Beng, 2006, 1-8).

This chapter has examined a comparative analysis of Chinese, Korean, and Okinawan beliefs on pollution. It focused on pollution from the body that interfered with spiritual communication and connection. Basically, I discussed how the natural world can pollute the spiritual world. This is essential to concepts of the Okinawan supernatural because if sacred things or people, such as the *yuta*, are polluted, then interaction with the spirit world is impossible. In addition, it would often be the duty of a *yuta* to assess whether or not a client is polluted or has polluted a spiritually significant part of his or

her life. Balance and restoration of harmony is the duty of the *ytua* pollution is an important issue to address. Also, because of their being *saadaka*, practitioners are more likely to be affected by pollution and according to Lebra (1966) must be especially weary of these things. There has been limited discussion of pollution in Okinawan religious research other than brief mentions by Lebra and Baksheev that will be elaborated on in later chapters. The following chapter discusses possession and pollution and how this type of interaction can affect an individual.

## Chapter VI. Possession and Pollution

This chapter discusses how the spirit world can pollute the natural world by the spirit possession of a human being. This concept is relevant to *saadaka* and the Okinawan culture because it deals with the direct interaction between the two realms. I will begin with some fundamental notions of possession states.

### Spirit Possession in Theory

Emma Cohen (2008) explored the widely discussed concept of spirit possession by defining and explaining two specific types often mentioned in literature: executive and pathogenic possession. Cohen expanded Erika Bourguignon's (1976) work which contended that possession is defined as the belief that, "a person is changed in some way through the presence in him or on him of a spirit entity or power, other than his own personality, soul, self or the like (Bourguignon 1976, 8)." Bourguignon believed that possession could be categorized as either utilizing trance or the lack of trance. Cohen on the other hand, argued that it is more accurate to describe the categories as executive, when a spirit takes over the host's body and/or mind, or pathogenic, when a spirit is attached to the host and often manifests as illness. The following sections in this chapter will first explain Cohen's theories on the possible cognitive causal mechanisms of both types of possession, then theories on embodiment, French rationalism, and finally possession as a cross-cultural phenomenon.

Cohen proposed that executive possession was made up of the following characteristics: (1) a disembodied entity who is intentionally in or on a host's body, (2)

that temporarily affects or eclipses the host's actions and controls behaviors, (3) so that the host's behaviors are partially or entirely directed by the possessing entity's intentions, attitudes, and wishes (Cohen 2008, 109). This very complex concept employs a vast range of cognitive systems often beyond our awareness. Many of these mechanisms operate automatically and allow us to go about our daily lives effortlessly. Cohen used our face-identification system to illustrate this complex process. It is through a natural and automatic process that we are not only able to identify familiar faces, but it is utterly impossible for us to voluntarily turn that process off. No matter how hard we try, we will still be able to recognize familiar faces such as family members or friends when we see them. Cohen explained that it is these types of systems that are the center of executive possession concepts. Many researchers agree that person-identity is a concept developed in early childhood and can be referred to as common-sense or intuitive dualism. This dualism develops because humans possess two cognitive systems that deal with the perception of persons and bodies. One focuses on the physical world and one that focuses on the social world associated with mental attributes like beliefs, wants, intentions, and temperaments. For example, we may say that as we age our bodies fail us by means of illness, trauma, or other such breakdown. On the other hand, we tend to agree that even though bodies may destruct, we are still the same person as before such changes. Thus, most of the research can be articulated such that the cognitive capacity to understand and utilize concepts that correspond to the autonomy of person-identity and the body is widespread and appears to emerge in early childhood.

Executive possession then requires that the clients and other participants are able to accept the idea that the person and the body may temporarily separate so that the spirit



entity may be expressed. Consider for a moment, probably the most well known film depicting such possession, the movie *Ghost* in which the spirit of the character played by Patrick Swayze possess the medium played by Whoopi Goldberg. In several scenes, Goldberg is possessed by Swayze and is no longer considered herself. The possessing agent overcomes her mannerisms, memories, intentions and feelings. The hosts' personality is somehow suppressed temporarily to allow the possessing spirit the ability to communicate, heal and/or counsel, and astonishing feats are then possible at the hands of the spirit. Executive possession is the type briefly discussed in the previous chapter with the Korean shamanesses. The shaman invoked specific spirits and allowed them to take control and communicate for the sake of the clients. It is only through the human capacity to represent people as having identities that are continuous and under certain circumstances as being very separate from the body and enduring though physical transformations and death, that enables the generation and persistence of executive possession concepts across time and location. Next, I will define and discuss the cognitive processes associated with pathogenic possession.

Cohen (2008) argued that pathogenic possession meets the following criteria: (1) a spiritual agent is in or on a person (2) that may either cause no effects at all, cause physical effects such as illness, or psychological effects, or existential effects such as misfortune or bad luck, (3) and may persist either indefinitely or until a diagnosis and cure is rendered. She contended that this type of possession does not involve the displacement of the person's identity (Cohen 2008, 109). She further contended that pathogenic possession is framed by the cognitive mechanisms that deal with contamination, pollution, and illness. Concepts of pollution and contamination are

universal and although may exhibit some cultural variability, the fundamental values are consistent. At an early age, children across the world are taught that to be aware of contamination, avoid it, and even fear it. Researchers propose that at very young ages, children are able to understand and identify what types of things are polluting and thus develop a hyper-efficient emotional and behavior response to these threats. These responses include fear, disgust, and repulsion and are said to have evolved in response to pressures that threaten survival.

The basic idea of pathogenic possession resembles ideas about illness throughout the world. Both involve a causal contaminant that connects symptoms, prevention, and cure. Elaborate rituals may be conducted to diagnose such maladies, cure, and even vaccinate against future problems. Both types of possession involve features of unconscious cognition that increase the likelihood that the idea will spread through cultural transmission. Both types of possession also deal with concepts of the body, identity and illness. The following section will further this discussion by introducing more elaborate ideas of embodiment.

### Embodiment

Jackson, in his work *Man* (1983), contends that looking at embodiment in terms of cognitive and linguistic models of meaning has been the central tendency of the anthropology of the body in the past. He argues three problems follow this interpretation. First, an issue emerges from the tendency to regard verbal praxis over body praxis. Jackson's (1983) argument follows that thinking and bodily communication both precedes and remains beyond speech and that meaning should not be reduced to a sign (Jackson, 323). Secondly, Jackson (1983) argues that the body is often defined as a

“medium of expression or communication”. This tendency not only reduces the body to a sign but also it is construed as an object of nothing more than mental operations. This prompts a Cartesian split and promotes a view of the body as an object of understanding. The third problem arises from this dualism. Jackson (1983) contends that the body is either perceived as neutral and a means of embodying ideas or dismembered as the symbolic value of the various parts can be analyzed.

Jackson’s (1983) work outlines a phenomenological approach to body praxis and while avoiding subjectivism, argues that experience is grounded in body movement with a social and material environment (Jackson, 324). He contends that it is the separateness of the observer from the ritual itself, that creates the idea that these acts refer to a domain outside of their actual purpose. Here, the observer draws a distinction between what Jackson (325) refers to as pragmatic work and ritual acts. To this degree, it is a tendency that as anthropologists, our bourgeois concepts of culture lead us to seek out what we want to see as the underlying ideas and meanings behind these ritual activities and because of this we are unable to participate in the “spirit of the performances” (Jackson, 325).

Jackson (1983) then uses the concept of habitus to further his argument. It is his contention that ritual activities, like the initiation rites of the Kuranko, are less of a symbol of an underlying meaning and more like habitus, or a behavior that stems from engrained knowledge. Jackson (1983) explains that to the Kuranko, knowledge is directly communicated through the initiation rites and they do not need to verbalize any meaning. Knowledge in a preliterate society like the Kuranko that Jackson described is linked to food production and community and the relationship to language and activity is much

closer than in a modern society in which meaning is often separated from domains of the body and material production (Jackson, 329). Basically, Jackson (1983) argues against any abstraction within ethnographic analysis and explains that “bodily practices are always open to interpretation; they are not in themselves interpretations of anything” (Jackson, 331).

### French Rationalism

Lock and Scheper-Hughes (1990) begin their explanation of the duality of the body and mind with an introduction to what they refer to as the three bodies. First, there is the individual body, the comprehension of the self and the experiences associated with the body at this level. At this level of analysis the French Rationalist theory becomes more evident. Lock and Scheper-Hughes (1990) contend that beginning with Hippocrates, there came a surge of ideas that initiated a divide between scientists’ concepts of rational and irrational, real, and unreal, spirit and matter, and most importantly mind and body. Hippocrates was concerned with identifying a rational approach to health and healing and in the process exposing what he deemed “irrational” such as the practices of folk healers. Many years afterward, Rene Descartes furthered this method and it became known as rationalism. This notion was his way of getting the body liberated from the dogma of the church during the dark ages. Descartes’ theory concerned a strict separation of mind and body and still continues to saturate the minds of many Westerners still today. Lock and Scheper-Hughes (1990) assert that many medical professionals overlook important clues to illness by concentrating strictly on the biological processes taking place within the body. We tend to look for what they call, “the real cause”, instead of getting an integrated picture of the health situation.

Lock and Scheper-Hughes (1990) continue their discussion of the individual body by exploring the concept of “self” in a broad sense. The Japanese notion of *tatemaie* and *honne* emphasize how an individual’s idea of self can transform depending on the social situation. *Tatemaie* represents the self that is introduced in a social context while *honne* is the “natural” representation of self and is hidden from the outside world. Lock and Scheper-Hughes contend that this is relevant to medical anthropology because in societies that do not express individualized ideas of the body-self, illness is then often explained as supernatural punishment for some social or moral desecration.

The second level of analysis is the body as a symbol and the how it is represented at the social level. Symbolic anthropologists such as Mary Douglas (1966) explore the significance of how the human body can be a source for understanding much more than simple biological processes that take place there. The body is often used as a symbol, or for Douglas (1966) a metaphor, to represent the cultural values and beliefs of a society as well as an expression of social relations.

At the final level of analysis is the body politic, which is how the body is controlled and maintained regularly. Lock and Scheper-Hughes (1990) once again rely on Mary Douglas (1966) to express how power and control is exerted. Douglas argued that when a society is threatened, they will respond by maintaining the boundaries. The group bands together and focuses on any outsider that could potentially “pollute” their society and thereby controlling bodies in their time of crisis. In our own society, Lock and Scheper-Hughes (1990) point out that health is no longer something accidental. Some researchers contend that today’s image of good health is societies way of conditioning and preparing for war. They argue that society often promotes a physically fit body image

especially during potentially threatening times such as war. Making fit and tough bodies is what some researchers argue convey a militaristic image (Lock and Scheper-Hughes, 1986). This act allows society to subconsciously reinforce boundaries by physically strengthening its members in readiness for outside attack.

Lock and Scheper-Hughes (1990) conclude by suggesting that illness is not a single event in which there is one cause. Instead, illness is a culmination of nature, culture, and society's expression within an individual.

### The Mindful Body

In their 1986 work, *The Mindful Body*, Lock and Scheper-Hughes discuss the intermingling of the three bodies mentioned above and their relation to emotions. They claim that historically, anthropologists have limited their topics to emotions in the formal, public, or ritualized sense while leaving the more private ones to the psychoanalytic and psychobiological anthropologists. Lock and Scheper-Hughes (1986) further argue that this separation that again plays into the Cartesian divide. Was Geertz (1980) accurate in stating that individuals would not know how to behave without the guidance of culture (Lock and Scheper-Hughes 1986: 28)? Lock and Scheper-Hughes (1986) believe so, and they further contend that it is through analyzing emotions that the re-bridging of the mind with the body, and the individual with society and body politic, can occur.

This chapter has discussed possession and ideas of embodiment, which are relevant to this project because possession is the means by which the supernatural world directly and physically interacts with the natural world. Concepts of embodiment are essential to the greater understanding of how a spiritual concept may affect the physical body. Incorporating more recent theories of embodiment can further clarify cultural

healing phenomenon's that occur cross-culturally today. Theoretically, possession is a pollution of the human body by a foreign spirit and in Okinawa, this may result in illness or misfortune. It is necessary that look at how Descartes, Douglas, Jackson, and Lock and Scheper-Hughes argue embodiment in relation to social symbolism because possession as an illness is arguably representative of some social irregularity or imbalance.

Possession as a pollutant/illness that relates to ideas of embodiment and social structure is a concept that has not been adequately addressed by the research in English that I have obtained during my studies. Future research on Okinawan religion and ritual practice would benefit immensely by the furthering of this idea. Ethnographic research directed toward individuals experiencing possession including practitioners and rituals used to "cure" this ailment would offer considerable insight to this topic. The next section concludes with my theory that there is a direct association between pollution, liminality, and the frequency of rituals in the deification process of ancestors. In addition, I offer more ideas for future studies.

## Chapter VII. Concluding Thoughts and Ideas for the Future

### Association between Pollution and Liminality<sup>4</sup>

Now that I have discussed possession forms and embodiment it seems logical to turn the attention to ideas of pollution and liminality. Arnold Van Gennep first discussed liminality in his work *Rites of Passage* (1909). Van Gennep suggested that every rite of passage marking a change in a person's status has three stages: separation, transition, and incorporation. The transition phase, he argued, is a liminal state that is outside the margins of society. Victor Turner (1964) furthered this concept by describing liminality as "betwixt and between", and argued that the individuals within this state are in a sort of limbo, neither here nor there. Persons in a liminal state are separated from society because they may be ritually impure or dangerous to other members of the group. Mary Douglas (1966) applied the same idea to the human body, by asserting that all substances produced from the body's orifices are dangerous because they have crossed the boundary of the body and may be polluting. Ethnographers have since described many cultural concepts and practices as being both liminal and polluting. For instance, Emily Ahern (1978) detailed many life events such as menstruation, births, deaths, and ghosts as being polluting and liminal phases in Chinese culture. Takiguchi Naoko (2003) described a shaman in Miyako as a liminal profession, and Baksheev (2008) described ghosts in Okinawa as being liminal entities. In this section, I will utilize ethnographic material

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<sup>4</sup> An illustration of the relationship between liminality and pollution is on the following page.



collected by Lebra (1966) and Baksheev (2008) to describe how death is perceived as both liminal and polluting in Okinawa.

I introduced Baksheev's work in a previous section by discussing the double burial method practiced in Okinawa. I will now continue this discussion by detailing the rituals that take place upon a person's death. Baksheev described the rites of the forty-ninth day as being a liminal period between life and death when a soul is considered to be extremely polluting. When a person dies in Okinawa, it is believed that the individual transitions from human to spirit and eventually to ancestor, if the correct rituals are performed in their honor.

The forty-nine days ritual is a mourning period that consists of seven seventh-day ceremonies. When a person dies, the family first makes funeral preparations and then the ancestors are notified to expect a new arrival by burning incense at the *butsudan*. The hearth inside the home in which the death occurred is thought to be polluted, so the ritual paraphernalia is removed. The body of the deceased is then cleaned and dressed in his or her best clothing and the remaining possessions are later disturbed among family and friends. Lebra (1966) described the funeral as extremely emotional. He also asserted that only children of the bereaved family were allowed to attend, and it was his contention that this is due to the belief that their souls may be stolen at the tomb. Items such as sandals, a cane, lantern, food, drink, and a temporary memorial tablet are left at the tomb after the burial. When leaving the tomb, the men and women divide and take alternate routes back to the village as a way to confuse the spirit so that the soul is not likely to follow. After returning home, each funeral participant is sprinkled with salt before entering the house. The hearth inside the home in which the death occurred is thought to

be polluted so the old items are removed and replaced. A temporary memorial tablet is also placed in the lowest level of the *butsudan* with the deceased's name on it. Offerings of food and drink are made three times a day during the mourning period. The day after the funeral the family again gathers at the tomb to pray and bring food offerings, and a similar ritual takes place every seven days afterward.

It is believed that the deceased soul has not yet settled and is still wandering between the tomb and the home. The soul is thought to strongly want to remain in this world with his or her family and friends, and while the soul travels from the afterworld and this world, other souls may attempt to find their way into this world. Therefore the soul is thought to be extremely polluted and dangerous. The forty-nine days ritual is said to represent the separation of flesh from bones and the separation of the individual from society. Families in mourning are also in a transitional phase and after the socially accepted forty-nine days are complete everyone is expected to return to normal social duties. On the forty-ninth day, a ritual called the *mabui wakashi*, or the separation of the dead from the living takes place in which the tomb is cleaned of all items, incense is burned, the temporary ancestral tablet in the *butsudan* is replaced with a permanent one, and the soul is told that he or she may not enter into this world again. The soul is then thought to become "real dead", and join the afterworld thereby transitioning into another status, that of a spirit of the afterworld (Baksheev 2008, 286). Rituals are then performed on the first, third, seventh, thirteenth, twenty-fifth, and thirty-third year after death. During this period, a bone-washing ceremony takes place in which the close family members clean the bones of remaining flesh, wash in water and *saki*, place the remains in an urn, and say a prayer of apology for disturbing the deceased (Lebra 1966, 196-201).

The soul is then thought to have transitioned into another status, that of an individual ancestor. Afterward, participants are sprinkled with salt before entering into their homes as it is thought that the remains are extremely polluting. Researchers suggest that after death, the communication between the deceased and the living remains very open until the soul reaches the thirty-third year of death at which time he or she ideally becomes a depersonalized ancestor and is no longer thought of as an individual ancestor but a nonhuman deity (Baksheev 2008, 286). It is important to notice here that as the liminality of a soul seems to decrease, so does the potential pollution, and the frequency of rituals especially following the forty-ninth day. Now, only during *Obon* are these concepts usually revisited, until the ceremonial bone-washing.

Researchers such as Lebra (1966) have mentioned the dangers of the deceased spirit and their desire to stay in this world with their families. Also, it was suggested that during the liminal phase of the forty-nine days, the deceased soul travels between this world and the afterworld, which creates opportunities for other souls to steal their way into this world. If either soul wanders into this world, it may attach itself to a living person and create sickness and/or misfortune for the individual. Lebra also mentioned a concern for children's presence around tombs and a fear that their souls may be stolen. We have already established that the deceased soul is a liminal entity and the idea of the soul outside of the body is a concept that Douglas (1966) would describe as polluting as well. Baksheev described the deification process in detail and I propose that the Okinawan deification beliefs are consistent with Van Gennep's rites of passage stages. The first stage of separation is represented by the separation of soul from the body, from the family, and from this world. The second stage of transition is symbolized in the belief

that the soul liminal and is in the process of moving from this world to the after world until it reaches deification. Incorporation occurs when the soul is officially considered a non-personal, founding ancestral deity. Thus, one can logically surmise that as the soul transitions from this world to the afterworld and then to Heaven, it becomes less and less of a marginal or liminal entity. Also, as the soul gets closer to becoming a god, it becomes far less polluting to others. Therefore I conclude that there is a direct linear relationship between ritual frequency, liminality, and pollution during the deification process of deceased individuals and I have demonstrated this relationship in Figure 2. The next section will discuss how this theory could be furthered in future studies. Furthermore, after becoming a *kami*, the entities are no longer polluting to humans but the reverse is true. Humans in a liminal state, such as after childbirth, can ritually pollute sacred things or places. Therefore, rituals are necessary to cleanse and prevent such pollution.

### Future Studies

Future projects should consist of an exploration into the religious practices of some Okinawans and a look into the idea of pathogenic possession or the pollution that occurs when a spirit attaches to an individual. The researcher should conduct semi-structured interviews with respondents that have experience with this topic. In the case that only a single willing respondent is located, the use of one respondent will also be relevant because the project should merely seek to describe in detail a particular characteristic of the religion that is not necessarily representative of the entire population.

The respondent(s) should be natives of Okinawa and also should be very knowledgeable about the religion and rituals. In addition, they may have extensive knowledge on the life histories or may have only inherited stories from individuals that have experienced saadaka and pathogenic possession. The interviews should elicit the recollection of various stories that individuals have described to these potential respondents, oral histories of practitioners, details of rituals and the impressions of the respondents.

This project is significant because it will shed more light on a cultural characteristic that is still functioning today and yet there is limited available literature. It is necessary to gather data that details how this phenomenon is culturally framed, expressed, and discussed in order to gain a holistic understanding of the culture. The sample is valid because of the amount of relevant information that even a single respondent may possess, acquired throughout his/her lifetime as an unbiased observer in a natural environment, completely untainted by research objectives, religious agendas, or outsider's interpretations.

Furthermore, Emma Cohen (2008) proposed that a cognitive approach since research in cognition in recent years has increased our knowledge on the universal mechanisms that underlie human behaviors. She contended that explanatory approaches failed because they utilized "common-sense derived intuition", and produced ill-fitting categories that were based on arbitrary culturally specific criteria (Cohen 2008, 121). Also, medicalist approaches fall short because they do not take into consideration the structure, meaning, and reproduction of possession concepts. Cognitive perspectives today contend that people conceptualize using

general mental prototypes called schemas automatically. Schemas are abstract representations of regularities in our environment and are processing mechanisms that allow us to search through data from our environment and provide hypotheses automatically and unconsciously. Cognitive anthropologists argue that by analyzing native categories of thought, much can be learned about how the human mind functioned cross-culturally. Thus, I would propose also a cognitive approach for future research on Okinawan possession, spirits, liminality, and pollution.

McGee and Warms (2004) describe ethnoscience and cognitive anthropology as a response to what ethnoscientists thought of unscientific ethnographies.

Anthropologists in this paradigm believed that ethnographies should exemplify the native's perception and lived experience. This methodology is based in linguistics.

McGee and Warms (2004) discuss the Sapir Whorf theory which suggests that language is not only a means of communication but it also shapes an individual's perceptions of the world around them. The way anthropologists operationalize this method is by using highly structured interviews inquiring about different domains, which are "native conceptual categories", and categorizing concepts (McGhee and Warms 2008, 361). Early ethnoscientists such as Stephen A. Tyler (1969) exemplify this by discussing what he argues is the essential procedure by which individuals organize information.

Tyler (1969) criticized former ethnographic methodologies for their lack of a "scientific" approach. He argued that until that point ethnographic methods had been basically subjective because of the ethnographer's application of his/her own classification systems to the societies that they studied (McGee and Warms 2008:

369). This is a good point. For example, even Victor Turner (1967) could have been considered to impose his own terms onto his symbolic study of the Ndembu rituals. Turner (1976) even begins his description of the *mudyi* tree, which early on he proposes to refer to as the “milk tree” for the remainder of the discussion. The “milk tree” was Turner’s translation of the *mudyi* tree, and his own interpretation as such ensued. Tyler (1969) explained that traditionally, culture had been a creation of the anthropologist according to his/her “own idiosyncratic standards” (McGee and Warms 2008:370). Thus, he worked with a model that explores classification systems which he believed reflects that particular culture’s unique history. He did this by identifying domains and then analyzing those domains by performing componential analyses.

I intend to examine the concepts of supernatural states, and illnesses associated with the supernatural within the Ryukyu culture. Specifically, I will look for concepts of *saadaka* and how individuals perceive this supernatural state during my fieldwork built on numerous in-depth interviews with a small selection of informants. Appendix III illustrates the causes of the affected supernatural state. In order to do this I would like to refer to Ohnuki-Tierney’s (1981) study of illness among the Ainu, as this work has influenced my research methodology.

Ohnuki-Tierney (1981) proposed to, “Inductively interpre(t) Ainu behavior in order to arrive at the Ainu model for behavior” (4). She analyzed the kind of classificatory system found in the Ainu culture. She used the domain of illness to interpret these behaviors and to understand the Ainu symbolic structure using a theoretical combination of structuralism, symbolic, medical, and linguistic

anthropology. Ohnuki-Tierney's explanation of the emic/etic perspectives in relation to the ethnomedical and the biomedical approaches to healing illuminated the contrast between illness and disease. Illness is defined as the social and psychological aspects identified with ethnomedicine and is considered the emic perspective, while disease is defined as a biological malfunction within the biomedical approach and has traditionally been considered the etic perspective. Ohnuki-Tierney explained that traditionally science and the biomedical approach have been considered culture-free and completely unbiased. However, she confronts this assumption by asserting that the scientific approach was developed in the West and is part of Western culture, thus it is not completely culture free and has been significantly influenced by the values of that culture. Ohnuki-Tierney also explores the two major approaches in ethnomedicine: the rationalist and empiricist approach. She explains that rationalists are primarily concerned with the "structure of ideas primarily in the unconscious" and draw their data from the language of the informants, which is the primary approach used by the author. Empiricists, on the other hand, are more interested in the behavior of the informants and therefore the data are gathered by "observed transactions" (34).

Ohnuki-Tierney contended that the Ainu's idea of health consists of two basic themes in their worldview. The ideas that unity of body and mind and the universal presence of deities are fundamental to this domain. The author reveals several terms related to Ainu concepts of illness and pain (araka, ikoni, tasum); also she presents the term "ramu pirika" which is an antonym of illness and it means "soul-beautiful". I found this term interesting because in the Japanese language a similar



term “kirei” means both beautiful and clean. *Ramu pirika* is a term that invokes both the mind/body dualism and at the same time, I would propose, the term also suggests that things that are healthy, unpolluted, and clean are equivalent to things that are beautiful. This is an idea that I would like to explore in my own fieldwork as well. Thus I first propose to investigate the domain of illness, and the use of terms that fall into that category. I will determine a cover term that translates as “good health” or “balanced health” and contrast this set of terms with a set that translates as “imbalance” or “bad health”. The Hogen term “chiarimung” means to pollute. I hypothesize that this could be an included term under the cover term “imbalance”.

Ohnuki-Tierney divides the domain of illness into two general categories: habitual illness, and supernatural illness. Habitual illness is defined by the Ainu as having standardized diagnostic and curing criteria and is not related to a supernatural entity. From the literature, the yuta seem to place less emphasis on this type of healing and therefore this category will be secondary to my exploration of supernatural illness. Ohnuki-Tierney contends that supernatural illness involves a deity either as the cause or the cure of the illness. The third and primary area of attention will focus on supernatural illness and healing and specifically on the ways in which a spirit can cause ill health and social disruption. Quinlan (2004) provides a similar methodology that I will discuss next.

Marsha Quinlan (2004) described healing and illness among the Bwa Mewegans of Dominica. Her analysis of bush medicine takes Ohnuki-Tierney’s work a step further. Quinlan (2004) describes three healing sectors that are important to the Bwa Mewegans; the popular sector, the professional sector, and the folk sector.

Each sector is essential to understanding health and healing among the Bwa Mewegans but the popular sector is her main focus. Most Bwa Mewegans prefer to use “bush medicine” instead of seeking out biomedicine unless absolutely necessary (Quinlan, 126). Bush medicine is the rural medical system utilizing medicinal plants, or bush, to cure certain illnesses in the village of Bwa Mewego (Quinlan, 2). Quinlan (2004) contends that natives often seek out home treatment over biomedical treatment for several reasons. First she mentions that there transportation is often a problem for many villagers and that even though visits are free, finding an inexpensive means to get there is often very difficult (Quinlan, 122). Second, Quinlan (2004) suggests that biomedical examinations are often viewed as invasive and lastly, Bwa Mewegans are typically suspicious of physicians’ powers (Quinlan, 122). All of these concerns explain the native’s preference of home treatment over biomedicine. Furthermore, Bwa Mewegan’s are explained to only seek out folk healing when there is a possibility of sorcery or witchcraft influencing an individual’s health. Quinlan (2004) contends that an accusation of sorcery is not taken lightly, and therefore it is not often that the folk sector is utilized. She explains that the villagers typically seek home treatment and biomedicine before resorting to folk healing.

Quinlan’s (2004) methodology is instructive for my research design. She uses many methods to gain access to her informant’s knowledge of bush medicine. She begins with a basic exploration that includes participant-observation, surveys, behavioral scans, personal medical record collection, interviews, and plant collection. Secondly, she explores semantic relationships with the use of pile sorting

and freelisting. Pile sorting consisted of asking informants to sort terms by separating them into piles by their associated meanings. Freelisting on the other hand, consisted of asking informants to list every bush illness and remedy in the order that they were thought of. The reason Quinlan used these methods was because within cognitive anthropology, Sapir's idea that language determines the way people habitually organized and thus understand their worlds (McGee and Warms 2008:371). By doing this, she was able to uncover the otherwise hidden relationships among the illnesses and treatments of the Bwa Mawegans. Time constraints will limit the amount of data collection I will be able to do, but I will focus first on participant-observation and semi-structured interviews. Participating in activities ranging from seemingly mundane everyday tasks to highly ritualized procedures will allow me full access to the Ryukyuan world of religion and healing. A series of semi-structured interviews is necessary to extract the answers that I am seeking. Using a guided list of topics will keep the conversations focused without constraining responses.

I was especially interested in the way that Quinlan (2004) discussed disease and illness. Above I discussed Ohnuki-Tierney's definition of disease and illness. Quinlan furthers this distinction by explaining that illness is shaped by, not only the individual's perceptions, but social perceptions as well. In addition, Quinlan discusses two categories of illness currently being used in ethnomedical anthropology today. The first category is naturalistic illness and is the result of a naturally inflicted environmental component. She explains that exposure to something such as hot or cold temperatures or to a sick person can cause a

naturalistic illness. The second type of illness is a personalistic illness, which is caused by some kind of supernatural activity. Personalistic illnesses can be the result of a human (i.e., witch or a curse) or a supernatural entity such as a spirit or god. Interestingly, Quinlan notes that personalistic illnesses in some instances can be considered a punishment for some kind of discretion, much like the Ryukyuan illness *kami daari* is considered a direct penalty for angering a spirit. Marsha Quinlan (2004) gives an incredible account of her research in Dominica. She explores mostly naturalistic illness domains and general idea of how illness is thought about in Bwa Mewago. Using these methods, I propose to do the same while focusing on personalistic illnesses in the Ryukyus.

As mentioned above, I intend to explore the domain that Ohnuki-Tierney (1981) and Quinlan (2004) of supernatural or personalistic illness in the Ryukyuan culture. I will focus specifically on the ways in which a spirit can cause ill health and social disruption. Ohnuki-Tierney (1981) presents the concept “ramu pirika” which means “soul-beautiful” with connotations of purity attached to the meaning as well. I propose to explore the term “chirarimung” which means pollution in the Hogen dialect and “kirei” as standard Japanese term that denotes both cleanliness and beauty. Both terms invoke notions of the mind/body dualism and at the same time, suggesting that things which are healthy, unpolluted, and clean are equivalent to things that are beautiful. I propose to investigate the domain of illness, and the use of terms that fall into that category. I will determine a cover term that translates as “good health” or “balanced health” and contrast this set of terms with a set that translates as “imbalance” or “bad health. I hypothesize that “chiarimung” could be

an included term under the cover term “imbalance”. For example, I learned of a story from my personal travels to Okinawa that sparked my interest in this topic because it provided me with an account of such “pollution” or “imbalance” from a supernatural or personalistic illness, and I will now summarize:

*One day while walking with a girl friend, I noticed an elderly lady approaching us on the sidewalk. Out of respect, I moved to the side to allow her to pass. My girl friend seemed confused and asked what I was doing. I explained that I was moving out of the way of that “obaasan” (literally grandmother, but in this case translated as elderly lady), to let her pass. My friend seemed slightly agitated and puzzled and asked, “What obaasan”? I, frustrated with her confusion, pointed at the elderly woman and said, “that one”! An eerie silence took over the moment when we both looked up and no one was there. She had apparently been a spirit, and unfortunately spirits don’t like to be pointed at. Afterward, for the next week, I got very sick. I couldn’t go to work, I felt terrible, cold, I had a fever, and the doctors couldn’t figure it out. After about a week, a neighbor, a man who is saadaka and whom I had never really spoken to, came to the door and said, “You are saadaka aren’t you? You have a spirit with you and that is causing your illness”. He performed a ritual with salt and water and immediately I felt much better.*

This story illustrates my intentions to explore terms associated with “imbalance” and “ill health” within supernatural illnesses. With the help of my translator, I would attempt reduce translation competence and to pull out the native ideas and concepts about this phenomenon.

Why is a theoretical thesis relevant and scientific? This question has haunted this project since it’s beginning, and the answer is simple: because it posits questions that can be subjected to verifiable observations, provides a description of the Ryukyuan belief system, explains this belief system and rituals with social theory, explores predictable

patterns of social behavior, and provides understanding of the causality associated with social structure and religion. According to Singleton and Straits (2005), the criteria for scientific knowledge is research that produces verifiable observations, description, explanation, prediction, and understanding (Singleton & Straits, 2005, 16-21). With the use of cross-comparative analysis, secondary sources, and sociological theory I have provided scientific evidence in a qualitative format.

I have now discussed the concepts behind the belief systems, explored possession, pollution, and liminality, and recommended a direction for future research. The purpose of this study was to investigate the relationship between the supernatural and humans and I have fulfilled this by providing a cross-cultural analysis and a theoretical framework. In addition, I have made four basic contributions to the study of Okinawan folk religion and medicine. First, I have drawn attention to the concept that links the major concepts previous researchers have gathered on Okinawan religion. The concept of *saadaka* is pivotal in the understanding of what it means to be a practitioner and most importantly it is the fundamental component that links the natural world to the spirit world. To date, little information is available to the English reader on *saadaka* and I propose that this is a necessity to the full understanding of Okinawan spirit concepts.

The second contribution made is adding more focus toward the concept of pollution in the spiritual sense. I have done this in two ways, first by discussing how the natural world can pollute the spirit world and incorporating ideas from Chinese and Korean practices. Available Okinawan research has had limited focus on this

topic. The second way I focus on pollution is by looking at how the spirit world can pollute the natural world, such as with possession.

Following this idea, I propose the third contribution is that of emphasizing possession as a pollutant and an illness, then structure this idea around embodiment and social symbolism. It is through possession, that the supernatural world directly and physically interacts with humans in the natural world. I analyze possession beliefs with embodiment theories that assess how a spiritual concept may affect the physical body. I have proposed that this is an avenue that has not been adequately addressed by English writing researchers and propose ethnographic studies to delve into how practitioners and rituals are used to treat such an affliction.

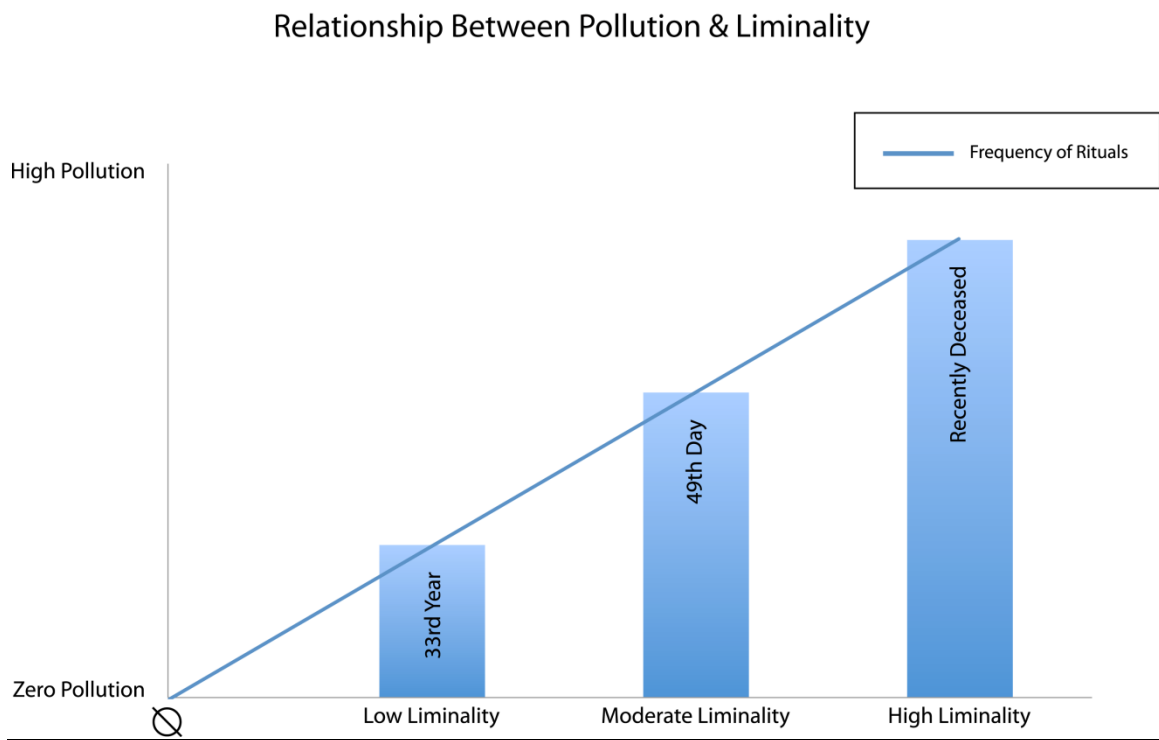
The fourth and final contribution that this project has made is by linking liminality, pollution and the frequency of rituals to the deification process of ancestors. I have suggested that the Okinawan deification beliefs are consistent with Van Gennep's rites of passage stages, beginning with separation from the body and family, transition from natural world to after world, and incorporation when the soul becomes a founding deity. During these stages the soul becomes less of a liminal entity, and less polluting. I conclude that as this pollution and liminality decreases; the frequency of rituals also declines. This is a relationship that should be further investigated with extensive ethnographic research.

This project has made four basic contributions to the study of Okinawan religion and medicine. Though this endeavor is theoretical, the possibilities for this topic are limitless as social research is fluid and constantly changing the way that

researchers think of culture, religion, and society. Okinawan culture is a very special topic for me and there are many questions left unanswered. With each turn, new ideas and questions arise and my thirst for knowledge about Okinawa is undying. It is with pride, humility, and a heavy heart that I bring this chapter of my investigation to a close. However, I will take with me all that I have learned about culture, people, and life from this study and embrace the world with a new sense of openness and insight that did not exist before.



Figure 2.



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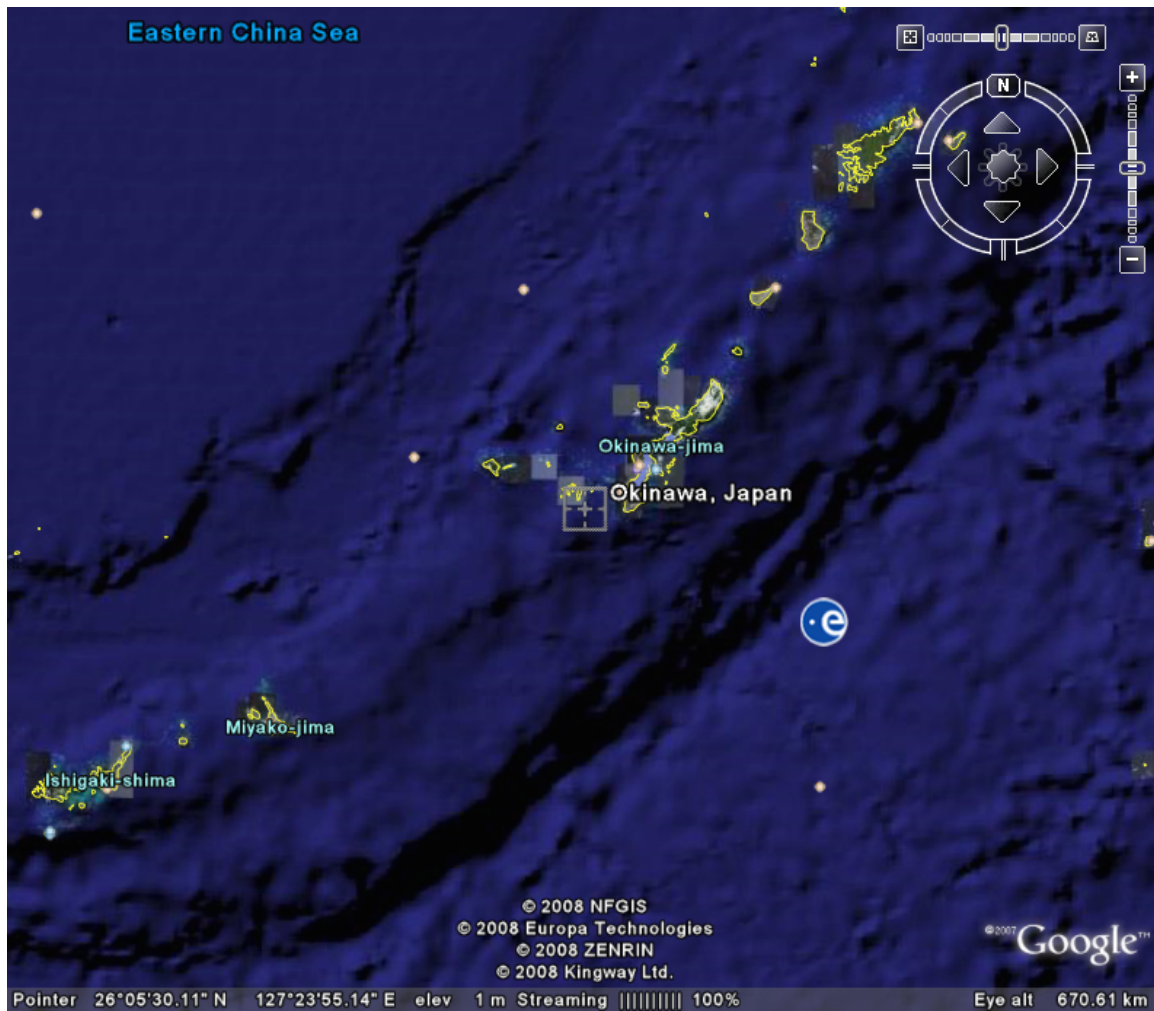
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## Appendix I

Map: Okinawa Prefecture. Google Earth.





## Appendix II

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### Conceptual Definitions

1. *Saadaka / Saadaka unmari* is translated as “of high spirit birth”. It is an indicator that a female infant will become a *yuta*. The female head of the family usually determines *saadaka unmari*. (Allen, 2002, *Identity and Resistance in Okinawa*). The term *saadaka* is used in my biographical research because it was the term used by the interviewee and was said to mean supernatural sensitivity.
2. *The Ryukyu Religion* is the indigenous religion of Okinawa and is also known as the *Okinawa Religion* (Lebra, 1966) or Ancestor worship as mentioned by my informants.
3. *Onarigami* is the belief in the spiritual power or spiritual superiority of women in the Okinawan religion. (Wacker 2003)
4. *Yuta* are the shaman of Okinawa. They are typically middle-aged to elderly females and are also considered the religious leaders of the Ryukyuan religion. *Yuta* are said to have supernatural abilities to mediate communications between the dead and the living and to cure certain illnesses. It is through the advice of their client’s ancestors that the *yuta* are able to offer advice and treatments to their clients. (Allen, 2002, *Identity and Resistance in Okinawa*)
5. *Kami* are the Ryukyu gods, they are responsible for inflicting both fortune and misfortune on the Okinawan people. (Allen, 2002, *Identity and Resistance in Okinawa*)(Sered, 1994, *Priestess, Mother, Sacred Sister*)

6. *Kami daari* is translated as “revenge of the gods”. It is an affliction that *yuta* believe to be a punishment by ancestors or personal gods. *Kami daari* symptoms include nausea, dizziness, vomiting, genital bleeding, delusion, vomiting blood, and many other physical manifestations. *Kami daari* can afflict anyone who upsets their ancestors or personal gods and also can be a symptom that signifies a woman’s calling to become a *yuta*. It is only through the following the clear instructions of the *yuta* that a person afflicted with *kami daari* will become well again. (Allen, 2002, *Identity and Resistance in Okinawa*) Note: this phenomenon was never mentioned by my informants; rather, they suggested a similar concept, which had no name, as a “calling” to become a *yuta* or as a possession or haunting by a malevolent spirit.
7. *Chiji* is a personal god or ancestor. *Chiji* are typically responsible for symptoms of *kami daari*. (Allen, 2002, *Identity and Resistance in Okinawa*)  
*Chiji* is also a word meaning taboo. (Lebra 1966, 51)
8. *Kaminchu* is a priestess also called a *noro* and is often distinguished by an inherited position. (Allen, 2000)
9. *Mabui* is defined as a person’s soul. The *mabui* can be lost or dropped and the individual would need to undergo rituals to restore it.
10. *Chiarimung* is defined as “[t]hings or acts which pollute, defile, or render impure that which is the *kami*’s or those who seek communion with the *kami*” (Lebra 1966, 49).