

Spring 2006

# Embracing the Demons Within: Spiritual Possession and Mental Health Support in Madagascar

Thomas Cody Swift  
*SIT Study Abroad*

Follow this and additional works at: [https://digitalcollections.sit.edu/isp\\_collection](https://digitalcollections.sit.edu/isp_collection)

 Part of the [Alternative and Complementary Medicine Commons](#), and the [Mental and Social Health Commons](#)

---

## Recommended Citation

Swift, Thomas Cody, "Embracing the Demons Within: Spiritual Possession and Mental Health Support in Madagascar" (2006). *Independent Study Project (ISP) Collection*. 333.  
[https://digitalcollections.sit.edu/isp\\_collection/333](https://digitalcollections.sit.edu/isp_collection/333)

This Unpublished Paper is brought to you for free and open access by the SIT Study Abroad at SIT Digital Collections. It has been accepted for inclusion in Independent Study Project (ISP) Collection by an authorized administrator of SIT Digital Collections. For more information, please contact [digitalcollections@sit.edu](mailto:digitalcollections@sit.edu).

# Embracing the Demons Within:

Spiritual Possession and Mental Health Support in  
Madagascar

Thomas Cody Swift  
School for International Training, Spring 2006  
Project Advisor: "Sosony" Razafimandimby  
Program Director: Jim Hanson

**Table of Contents**

<i>Abstract</i>	2
<i>Introduction</i>	3
<i>Methods</i>	7
<i>Research Findings</i>	8
Definitions of Mental Disorders	8
Origins and Context of Possession	10
Diagnostic Process	16
Preparation for Healing	17
Healing Techniques	21
Moment of “Awakening”/ Acceptance	27
Continued Support	29
Perceptions of Self/ Society/ Family	31
<i>Discussion</i>	34
Future Research	36
<i>Conclusion</i>	37
<i>Works Cited</i>	39

### Abstract

Possession, and the systems of mental health support existing under the same spiritual paradigm, inherently address and serve to instigate a change in the entirety of one's life. The two traditional systems of mental health support in Madagascar, *tromba* spirit healers and Protestant exorcisms, appear to differ in doctrine and tradition and have been proposed to be fundamentally incompatible because of "conflicting or alternative epistemological realities" (Sharp, 525). The goals of this research, however, will be to identify the contextual and functional trends of the two systems that exist to support and ameliorate the mental health of the Malagasy people. For Malagasy women in particular, the impetus to change manifests in possession or a dream calling them to spiritual work. It is in rejecting that calling that the internal force requiring change, whether it is one's psyche or spiritual counterpart, will sanction the individual in a form of mental illness. Inherent in following the calling of God's work as *mpiandry* or one's ancestors as a *tromba* medium, life becomes structured by the regulations of the system, is positively reinforced by the respect and needs of the community, and is ensured of continued mental health support through a profound and lifelong connection with the "spirits" within.

## Introduction

Mental illness and spiritual possession play a dynamic and defining role in the lives and culture of the people of Madagascar. Traditional perceptions consider these afflictions to be more than isolated or transient dysfunctions but often represent a global and spiritual crisis that affects the entirety of one's life. Possession is viewed as either a product of one's lifestyle or enduring entities, which, in both cases, must be wholly embraced. The illness thus affects not only the individual, but is experienced by the family and society in which they live (Lazare, 2002-2005). Two traditional community-based systems of treatment exist for the Malagasy, possessed-healers called *tromba* mediums and Protestant exorcisms, living communes (*toby*), and *mpiandry*, God's spiritual workers. The two systems differ in principal and doctrine but both inherently address the encompassing nature of possession and illness. Each system offers a continuous and reciprocal form of treatment to ultimately ameliorate the entirety of one's own and peripheral life.

Before modern medicine and Westernized systems of health support, the Malagasy people developed supernatural definitions for the abnormalities of life and explanations for the tragedies of death. The Malagasy are typically not scientific people and believe that if something wrong occurs, for example, a couple cannot have children, they will attribute it not to sterility, but rather to an external or spiritual force (Rabarijaona, 21/03/06). These spiritual beliefs have become deeply rooted in the culture and identity of Madagascar and continue to play a significant role in the lives of the people. The realm of spirits is occupied by an incredibly diverse range of forms and entities, which are perceived to influence most aspects of the world. Depending on the region of Madagascar, certain spirits may exist as forms of nature such as forests, rocks, water, or mountains and are usually characterized as "spirits of life" (Estrade, 70). Other spirits, the most common being *tromba*, originating from dead royal and common ancestry, may choose rather to inhabit living individuals. Traditionally, for the

Malagasy people, there is no beginning or end to life, the course of one's existence is cyclical (Rabarijaona, 21/03/06). It is thus by means of spiritual possession that the world of the dead past may unite and interact with the present world of the living.

Not only is there a diversity in which form spirits may exist, but there is also a great range in the affect, persona, and ability of the individual spirit. *Tromba* spirits, for example, may bare the power to both heal and harm, to give life and to kill (Ramamojisoa, 2002-2005). The traits of *tromba* are generally characterized by the desires and traditions of the ancestor from which the spirit derived. Those who are possessed by *tromba* must particularly be sensitive and conscious to those desires and what is *fady* (taboo) for that individual. It is usually when one fails to respect the restrictions defined by *tromba* that one would be attacked and fall ill, commonly manifested in a psychological disorder.

For most health issues, Malagasy will now generally seek assistance from medical doctors or directly from pharmacies as their first option and approach to the problem. Unfortunately, however, medical health support in Madagascar is still widely inaccessible financially and physically. In 2004, for example, there were only eleven doctors for every 100,000 people and one hospital for every 150,000 people with one psychiatric hospital in the country (Rarivomanana, 21/03/06). Even if the local people did have the proper finances or access, the hospitals and pharmacies are generally unequipped and with insufficient knowledge of how to approach those who are mentally distressed. Furthermore, the more modern medical health systems are more likely to exclude behavioral or perceptual forms of sickness, particularly those which function under a traditional or spiritual paradigm. Forms of tranquilizers are commonly prescribed, offering no more immediate support for the patient's families to manage the symptoms (Lala, 15/03/06). Reinforced by the conceptual uncertainty, lack of medical success, and financial exhaustion, families will seek or return to traditionally based forms of treatment and thus perspective, typically spiritual possession.

Previous research has challenged the realities of spiritual harm or possession by differentiating the phenomenon into ritual and peripheral (non-ritual) type (Chiu citing Walker, 1972). According to this distinction, the ritual form of possession is generally a voluntary and temporary event while the peripheral type is “pathological” in nature and usually much more difficult to reverse (Chiu, 2000). For many Malagasy, particularly for women who are perceived to be lower on the hierarchical ladder and less likely to find work or positions of respect, their crisis, possession, or illness may be to a large extent, situational. The illness could thus be a cry for help and the manifestation or symptoms of the possession may reflect the needs of that individual. Whether or not the symptoms of possession are pathological in origin, self-manifesting, or perpetuating forms of fear or guilt (from, for example, breaking a *fady*), it is vital to approach treatment in respect to the framework that characterizes those symptoms.

Without appreciation to the cultural context of the disorder, treatment becomes one-sided where the patient either cannot, or will not play an active role in the process, particularly when their beliefs are challenged. The relationship between patient and healer suddenly becomes contrived and imposing when interests are conflicted. Furthermore, by specifically diagnosing the disorder, the treatment becomes finite and terminates after the symptoms are relived. Unfortunately, as aforementioned, if the disorder is not an isolated event and is rather a product of situational or more encompassing life problems, the illness will likely continue. Rather than breaking down the concept of possession, it is important to approach the subject using a pragmatic framework. Regardless of the origin of the illness or possession, *tromba* and Christian techniques exist ultimately to improve the livelihood of distressed individuals and can both be performed on a wide and relatively nonexclusive scale.

Previous research has focused on these two approaches to mental illness and possession, however usually proposing that each are fundamentally incompatible because of

“conflicting or alternative epistemological realities” (Sharp, 525). The study continued to explain that in order for treatment to be successful, the patient must abandon his or her belief system and conform to the introduced doctrine of the treatment. While the packaging of *tromba* spirit healing and Protestant systems of treatment may differ, this current study will attempt to show that there are basic principles and techniques between the two to serve the fundamental needs of the Malagasy psyche. Because those basic needs are inherently considered, there exists fluidity between both in the course of a mental illness, in the process of seeking help, execution of the treatment, and continued support.

Much like the cyclical perceptions of life and death in Madagascar, the healing process offered by the two systems does not necessarily have a beginning or end but rather becomes an integral part of the patient’s life. This study will thus focus not only on the individuals who are currently seeking treatment, but on those who were previously sick and became healers, *tromba* ancestor mediums or *mpiandry*, the Christian mediums of God’s work. Through continuing to embrace their relationship with the respective system and spiritual world, these mediums are able to continue their treatment, health, and relative sanity. This study has ultimately been designed to trace the trends in context and elements of the two systems that function to support the identity, spirituality, and mental health of the people of Madagascar.



## Methods

Research methodology included both formal and informal interviews along with various firsthand encounters. To achieve a sense of the perceptions, sentiments, and personal histories surrounding each system of mental health, I interviewed those who serve as healers, both *mpiandry* and *tromba* mediums, as well as the ill and their families seeking support. To gain a more conceptual understanding of the processes, I also interviewed several authorities of the Protestant church including church pastors and presidents, medical doctors, and several professors of anthropology, psychology, and theology. Interviews were either conducted directly in French or translated from Malagasy to French with the use of a translator. To aid the process, most interviews were recorded and fully translated at a later time. Written notes were also taken during observations and interviews.

To achieve a general feel of the processes, I attended various healing sessions at both Protestant churches and homes of the *tromba* mediums. I also visited the living quarters at both Toby Nenilava in Fort Dauphin and Toby Betela in Tulear to gain a sense of the daily life for the patients. For a more direct account, I was both “exorcised” at the Protestant church and given a form of treatment from a *tromba* healer, which included a tea of medicinal plants and a list of personalized regulations (*fady*).

## Research Findings

### Definitions of Mental Disorders

In both approaches, there is a perceived and admitted distinction between possession and mental illness or disorders of the brain. Possession or mental illness may occur independently from one another, occasionally remaining fixed in their respective spiritual or physical realms. In the world of those afflicted by *tromba* spirits, for instance, there is a distinction between *adala* (crazy/ mad), *marary saina* (literally “sick brain” or mental illness), *very* or *tsyampy saina* (lost/ incomplete mind), and traditional possession by a *tromba* ancestral spirit (Lazare, 12/04/06). Those who are considered mad or *adala* may not necessarily be conscious or self-aware and are usually characterized by abnormal and usually unacceptable behaviour (i.e. hitting others, eating one’s own faeces, etc.) (Lazare, 12/04/06). Although it is possible to be possessed by a *tromba adala* or similar dangerous spiritual forms, possession and *adala* are generally separate phenomenon. *Marary saina* on the other hand is usually characterized by a more psychological symptomology where the individual is consciously aware of his or her actions. *Very* or *tsyampy saina* usually confers more of a predisposition to illness, potentially genetic or a deficiency in one’s mental development, mostly separate from spiritual possession. Although there is frequent overlap, the four are regarded as “distinct categories” resulting in unique treatment and experiences for the individual (Sharp, 246).

Similarly in the Christian commune of the *toby*, it is accepted that there are physical illnesses, “sicknesses of the brain,” or *very saina*, separate from demonic possession (Lala, 15/03/06). Twice a week, usually on Thursdays and Saturdays, a religious based health organization, SALFA (Lutherien Church Department of Health), visits the *toby* to offer medical consultations and prescribe medication based upon the subjective symptoms of the patient. Out of the thirty patients seen in three hours with afflictions ranging from gripe to eye

infections, eight were prescribed forms of anti-psychotics. Two different drugs were prescribed, phenobarbital, a sedative for “screams and convulsions” (3) and chlorpromazine, a narcoleptic for depression (1), post-partum depression (1), and schizophrenia (3). These individuals had been “admitted” into the *toby* system under the premise that they are demonically possessed, however, are interestingly in the process of using medication at the church commune.

The acceptance of the medications and thus conceptual admittance of a medically based component of illness seems to run contrary to the church’s philosophy and perceptions of possession sickness. In traditional Christian perspectives, for example, use of medicinal plants and other drugs represents a lack of confidence in the work of God and generally are used by sorcerers and the occult (Lazare, 2002-2005). A doctor from SALFA agreed that it is quite difficult to reconcile the medical diagnosis in light of patient’s spiritual possession, however, because “...They are different, they must be treated in their own form” (Dr. Sahondra, 28/04/06). Patients must take their medication to control the medically purported physical or emotional illness, however, because drugs are ineffective against demonic possession the patient must continue their spiritual healing at the church with the *mpiandry*.

Although the distinction exists, one more commonly finds that there is a significant and dynamic relationship between possession and mental or physical illness. It is often in the dysfunctional and mysterious behaviour of the afflicted, along with the lack of response to medication, that one may infer the connection between the abnormalities of the physical and spiritual mind. The marriage between the two is bi-directional and will develop depending on the origin or cause of the initial affliction. Mental or physical illness, for example, may be a product of possession or spiritual harm, or conversely, the possession may have been invoked by the vulnerabilities of a disorder, for instance, of the brain. In the Christian perspective, the devil will attempt to exploit and aggravate one’s vulnerabilities regardless of whether they are

physically (of the brain/ body) or spiritually (behaviourally) oriented (Lala, 15/03/06).

Similarly, *tromba* possession may arise because of an event or depression in one's life, or on the other hand, enter unprovoked and instigate an illness. Ultimately, for both Christian and *tromba* perspectives, the course of a mental illness, possession, and the relationship between the two depends greatly on the causes, origin, and responses to the initial "calling" of the affliction or possession. In both cases, there is a distinction between possession and mental illness but the two rarely remain separate.

### Origins and Context of Possession

Although there is a vast range of origins and causes of possession and mental illness, there is a common and fundamental theme shared by both perspectives. In both approaches, one's spiritual health and safety is ultimately a function of their appreciation and acceptance of the divine. If an individual fails to recognize and embrace the presence and wishes of God or the *tromba* spirits, it is usually then that they become vulnerable to possession sickness or are directly attacked and fall ill. In each belief system it is important to be generally conscious of the laws and wishes of the spiritual world.

For the majority of *mpiandry* (pronounced "pianjy", a spiritual "shepherd") and those possessed by a *tromba* ancestor, the first sign of their spiritual calling appears in a dream. In Malagasy the term that is used is "fambara", which usually refers to an insight or premonition into the possession. The message of the dream may be direct and clearly state one's spiritual duties or may also be ambiguous and nondescript, filled with images and symbols from which one may seek the interpretation of an authority (a pastor or *tromba* ancestor). In the Christian perspective, the dream may indicate that one has been chosen as a disciple of God called *mpiandry*, and would imply a shift in one's identity to that of spiritual significance and lifelong devotion to the church. Similarly, when one is "chosen" in a dream by a *tromba*

spirit, it usually indicates the spirit's desires to "enter" and unite with that individual. In both cases, the dream or calling is ultimately an indication of significant personal change and integration with the spiritual realm.

After the dream occurs, one must be prepared to either follow the calling and embrace the inherent changes, or to become ill through denial and resistance of that divine invitation. Even if the illness is not a direct attack, though it may be, one's refusal to accept the calling implies a lack of devotion to the respective spiritual enterprise and may provoke unwanted spiritual harm. In the Christian perspective if one is devoted to God and Jesus, continues their prayers, and avoids sinning, it is highly unlikely that one will become possessed. It is, however, when one fails to have faith or belief in God that they become a forlorn and "empty shell", spiritually vulnerable, and "easily filled by the presence of the devil" (Celistin, 25/04/06). It is important to note that that sickness comes solely from the devil, not God. Though, if one loses their belief they are perceived to be alone and demons may consequently attempt to profit from the opportunity. More indirectly, if one is unfamiliar with the regulations and commandments of God, it will be much easier for that individual to naïvely commit a sin and become susceptible to a demon.

Similarly with *tromba* possession, if one immediately embraces the wishes and demands of the spirit, to accept him as a part of oneself, and if the *tromba* spirit is satisfied, the individual will not develop a disorder. In certain situations, *tromba* possession is even regarded as "sacred and honorable" and is thus not necessarily associated with illness (Sharp, 525). However, when one ignores or refuses the spirit's desire to enter, the spirit may be offended and out of retribution invoke a mental or physical "sanction" or attack (Fidel, 06/04/06). As there is a range of personalities in the realm of the living, the nature and gravity of this disorder is contingent upon the character and affect of the *tromba* spirit when he was alive. This "sanction" will likely continue until the individual is prepared to properly respond

to the spirit's wishes. Furthermore, the process can be compared to "courting" or dating. If the spirit is not satisfied or pleased with the individual they may decide to part, leaving the individual with an opening for a potentially more harmful spirit to enter, potentially causing a worse form of mental illness or even death (Fidel, 06/04/06). Also, as in the Christian world of sins, because *tromba* spirits are strictly regulated by their *fady* (taboo), if an individual fails to embrace the spirit and understand its regulations, it will be easy for that individual to ignorantly commit *fady*. Commonly, for example, if an individual eats a *fady* animal, whether it is pork, goat, or chicken, both the *tromba* and consequently the individual inhabited by the spirit will become gravely ill. It is thus vitally important to not only be conscious and aware of one's own actions, but of what sorts of regulations have been innately mandated.

A lack of acceptance or devotion for the spiritual world will leave an individual generally more vulnerable, however, there is a multitude of diverse factors that may both indirectly and directly render an individual ill or possessed. It is important to explore the reasons and factors contributing a *tromba* or demonic spirit's choice to enter an individual. It is also necessary to consider that the role of the possessed in the process of initial possession greatly differs.

Generally, because of particular qualities, one may have a natural propensity towards possession. For example, it is far more likely that a female will be possessed by either a demon or *tromba* spirit. Possession is not necessarily restricted to women, however, at the Toby Betela in Tulear, for instance, 76% of the possessed were women, 81 women for 26 men, and at the Fileovana Cathedral, 86% were women (Lazare, 2002-2005). Furthermore, it has been reported that around 85% of *tromba* spirit mediums are women, and during the course of this current research, only women *tromba* mediums were encountered (Sharp, 120). In the Christian perspective, women are considered to be weaker spiritually and physically and thus more likely to be possessed because of their susceptibility to the pursuits of the

demon. Traditionally in the bible, the regulations for women are often much more rigorous and prevalent than those for men. It would thus be easier for a woman to break one of God's laws, bringing her closer to the realm of the devil. It is also interesting to note that possession is often associated with birth and pregnancy, particularly post-partum where the individual is physically weakened and rendered vulnerable by the process (Lala, 15/03/06).

Similarly, concerning *tromba*, anyone has the potential to be chosen to be inhabited by the spirit, however, for the most part women are chosen. The process of *tromba* possession is comparable to that of a marriage and is often very much a function of love (Elise, 06/04/06). *Tromba* spirits frequently choose those individuals who are pleasing to them and possess qualities which are fancied. In this respect, the choice of who a *tromba* spirit inhabits is very much a question of gender. Because *tromba* spirits are almost always male, they are thus likely to always choose a female as their "mate".

Often, possession is seemingly unprovoked and beyond the victim's control, unrelated to their apparent actions or behaviour. One *tromba* medium explained, for example, that her possession had been facilitated by *vontana*, the Malagasy horoscope, because her astrological sign corresponded with a particular *tromba* spirit (Valentine, 23/04/06). Similarly, the full moon is perceived to be a time when "the devil walks" and thus demonic possession as well as *tromba* activity is more common (Lala, 21/04/06). Also out of one's control, it is accepted that an individual can be born possessed by a demon, usually indicated by a particularly bizarre style of hair (Lazare, 12/04/06). Similarly, in the *tromba* perspective, those who are *very saina* or *tsyampy saina* are considered to either have been born with "incomplete" mental faculties, or one's mind/ brain remained undeveloped during their growth to adulthood. These more "natural" or seemingly genetically based disorders are considered extremely difficult or even impossible to heal. These individuals are typically characterized by a non-aggressive and calm affect, generally not participating in social events like dancing, but reasonably

functional. Those who are *very saina* or *tsyampy saina* usually do not pose a threat and are thus somewhat accepted in society, hence the apparent lack of pressure or necessity for treatment.

On the other hand, possession may be circumstantial and more of a product of one's socio-economic, familial, or even romantic status. It is, for instance, quite common that abandonment or loss will invoke mental illness and contribute to possession. Women who are abandoned or widowed by their husbands and left with children are commonly possessed by either *tromba* or demonic spirits (Lazare, 12/04/06). Traditionally, a woman is considered directly weakened without the support of a man, and may be indirectly so because of depression or bereavement in light of the abandonment, in both cases likely succumbing to possession. Another common situational cause of mental illness is jealousy and envy. If a person, for example, is jealous of another's success, material goods, or general wellbeing, they may seek the assistance of an *ombiasy* (herbalist) to place a spiritual "attack" on that individual (Elise, 07/04/06). One woman who considered herself possessed by *tromba* (who was interestingly at the Protestant *toby* to have it exorcised), explained that her possession was caused by an associate who was jealous of her fruit stand and sought an *ombiasy* to, in effect, ruin her success through possession illness (depression). On a side note, her illness may also have had a contextual component as she told us that her attacker was often verbally insulting. Similarly, possession or spiritual attack may come from a rejected lover who sought an *ombiasy* to have her become in love, depressed, or deadened so that the one rejected may take advantage of her (Rabarijaona, 21/03/06).

Another circumstantial trend in possession is family. It is often considered more likely for members within a family to become possessed. In consideration for the desires and nature of the ancestor spirits, if a *tromba* spirit has previously been satisfied by one family member, he is likely to be satisfied again by a different member (Elise, 06/04/06). Furthermore, *tromba*



spirits are often hereditary, much like taking over the family business (often literally as healing can be a lucrative endeavor). In this respect, because *tromba* spirits are often ancestors “watching over” their family, through possession they are endowing their kin with a successful and reputable business. Similarly, in the Protestant perspective, family members may more likely become possessed because, in theory, they may share a similar life of sin or not have been raised in a household conscious of Christianity (Lala, 15/03/06).

It is also important to outline the societal context in which many of these disorders manifest. If an individual, for example, has either an apparent physical abnormality or explicit mental disorder, certain naïve individuals may “throw rocks” or poke fun at that person aggravating their illness and provoking rage (Lazare, 12/04/06). It may be quite difficult, outside of the context of possession, for people to understand one’s condition as ill, physically or mentally. It may be for this reason that at the *toby* and homes of *tromba* there are as many patients with physical as mental issues. One Malagasy proverb helps to describe the perceptual environment of disorders in Madagascar, “Andalan’olo tsikehy, molan-tegna safora lamba” translated as “We protect our own crazies, and reject (or mock) the crazies of others” (Razafimandimby, 05/04/06). It is in this quote that one can find the importance of adopting a system where an individual can be understood and thus “protected”.

It is common as well that the possession may be provoked by certain actions or behaviours. For example, in both perspectives drug (typically marijuana) induced illnesses and possession, commonly *adala* or madness, are by far considered the most dangerous and difficult to reverse. A similar perspective shared by a doctor from SALFA, explained that marijuana and opium usage will indefinitely cause the development of schizophrenia and consequential possession (Dr. Sahondra, 28/04/06). Illnesses purported to be alcohol related are usually associated with *toaky gasy* or home distilled rum known to be quite damaging to one’s health (Zavier, Germine, 03/05/06). Other forms of “behavioural sicknesses” include

involvement in pornography, viewing exotic, action, or violent films, frequenting clubs or cabarets, obsession with material objects or money, and participation in prostitution, all of which are traditionally associated with the devil (Lazare, 2002-2005).

### Diagnostic Process

In both approaches, before one can be “admitted” and begin the process of healing, one’s sickness must be identified and verified as a spiritual disorder. The first stage of consultation is particularly important to know if the individual’s illness can be healed by the respective system. Verification of possession is a somewhat metaphysical process that must be done by an authority of spiritual significance. In contrast to medical doctors who typically respond to a patient’s symptoms, these “spiritual authorities,” whether *tromba* mediums or pastors, are able to gauge the entirety of the disorder including its origin and proclivities. The *tromba* medium and pastor does not superficially perceive the symptoms or exterior of the possessed, but rather travels deep inside them, connecting with the inhabited spirit to determine the appropriate course of treatment for that individual.

At the *Toby Nenilava*, it is the pastor of the church who must meet the individual and their family to determine the origin and nature of the disorder. Symbolically, the pastor of the church is an extension of God and as such, the pastor uses the words and power of God to identify the sickness (Christoff, 12/04/06). The process is not an exact science and is without formula, but the philosophy goes that because God, the omnipotent, knows the lives of all entities, that information can correspondently be transmitted to the pastor. Functioning as a “medium” of God, the pastor will also ask questions of the patient’s family to determine what they perceive to be the origins or impetus behind the disorder. In a more tangible respect, the pastor may also use the words of God, represented by the bible to identify the disorder as demonic. Because the devil responds violently and with supernatural strength to the words of

God, that sort of reaction to the bible displayed by an individual is a good indication of possession (Christoff, 12/04/06). Patient's and their families who seek help at the Toby generally do not know the nature of the sickness. It is when the symptoms or behaviours cannot be explained by other previous approaches to healing, including *tromba* healers and the medical field, that the illness is, by default, associated with possession or spiritual harm. Other signs of demonic possession include foreign behaviours, speaking in different or unintelligible languages, and unexplainable phenomenon (i.e. Eating glass bottles without physical harm, levitation, unnatural strength) (Dr. Sahondra, 28/04/06).

*Tromba* ancestors who also exist in the world of spiritual omnipotence are ultimately responsible for verifying an individual's illness. In the traditional course of *tromba* healing, the process begins with a test called "sange". When the patient is lucid, they must first explain why they have sought the treatment of a *tromba* healer. This dialogue between the patient and healer is quite involved where the entirety of the patients attention is demanded, "without an open time during the conversation" (Ramamojisoa, 2002-2005). After the patient explains themselves, the *tromba*" medium typically utilizes money (in the form of traditional coinage) and music to determine a possession, both of which are pleasing to Tomba. If an individual responds characteristically to either, by moving or shaking to music or dropping a coin in a certain fashion, it is a good indication of *tromba* possession (Lazare, 12/04/06). The *tromba* medium must finally explain to her *tromba* spirit the circumstances of the illness and patient to thus ask permission to heal the individual. At this point, the *tromba* spirit will physically "enter" the patient to determine if it is possible and will then give the medium the response.

### Preparation for Healing

Preparation for the *tromba* mediums and *mpiandry* is an imperative stage to initiate the process of healing. Because healing is performed at a spiritual level, preparation most

importantly involves the individual connecting with the divine. It is must be impressed that it is not the individual *mpiandry* or woman possessed by *tromba* that heal the sick, they are merely mediums for the work of the *tromba* spirits and God. One *mpiandry*, for example, explained that “It is not my work, it is his (God’s) work” (Lala, 21/04/06). Before healing can occur, the process can be somewhat lengthy and is quite involved. During these rituals not only are the mediums, *tromba* and *mpiandry* alike, connecting with the spiritual realm, but they are becoming deeply connected with the patient and themselves.

*Mpiandry* must begin their individual preparation for the “culte” (worship sessions) and “sortir de demon” (exorcisms) up to a week prior to the day they wish to participate. To prepare, the individual must pray multiple time a day each day for that week period. By means of prayer, the individual must ask God’s permission to “do his work” and to give them the force needed for the process (Lala, 21/04/06). Furthermore, the individual must repent and ask forgiveness for all of her sins that she may have committed before beginning her spiritual work. Traditionally, this week period serves to give the individual a pure and spiritually strengthened heart, necessary when working with the devil. Without this spiritual preparation, the individual will be at risk when directly working with evil spirits and susceptible to their attacks. Furthermore, because the exorcisms are both emotionally and physically strenuous the meditation and prayer prior to the event gives the individual focus and places them in an appropriate frame of mind. The process is also deeply reflective where the individual is required to consider her life and sins, allowing her to quiet her external life and focus her energy within. Ultimately the process gives the *mpiandry* symbolic strength and meditative clarity conducive to both the healing of others and preservation of her own mental health.

After the individual has prepared individually for a week, all the *mpiandry* that will perform the exorcism must convene a half-hour before the session. In a small room next to the church, these “spiritual workers” sit together in a circle and begin prayer to invoke the

benediction and power of God. Four verses of the bible are particularly pertinent to the preparation and are read by four different *mpiandry*: John 14: 12-17, Mark 16: 15-20, Matthew 18: 18-20, and John 20: 21-23 (Lala, 21/04/06). After the prayers have finished, the *mpiandry* change into their traditional dress and exit the room to the front of the church. During the time of the private prayer session, the rest of the church has already begun singing hymns and religious songs in preparation for the exorcism. The songs serve many symbolic and practical purposes in the church and are very much a prerequisite to the work of the *mpiandry*. The songs are important to prepare the possessed by “opening their hearts” and asking forgiveness of God and Jesus for their sins (Lala, 21/04/06). Inherent in this stage, the possessed and others in the assembly must embrace their nature and identity as sinners who are hence in need of divine protection. Secondly, the songs are favoured by God and function to “glorify and please” Him while working contrary to the devil who is purported to not like music (Lala, 21/04/06). Thirdly, because everyone in the assembly is expected to sing, the songs function to connect and bring the possessed, *mpiandry*, and others in the assembly to an equal spiritual plane.

*Tromba* mediums similarly must ask God (*Zanahary* the traditional Malagasy God or in some cases *Andriamanidra*, the Christian God), the ancestors, and the land permission and assistance to commence healing process (Valentine, 22/04/06). Along with these deeply involved prayers, before healing may occur the *tromba* medium goes through a series of rituals designed to enter a state of trance and invoke her *tromba* spirit. As mentioned previously, it is vital to invoke the *tromba* spirit as it is the spirit that has the power to heal, the women are merely the mediums and facilitators of their work. To prepare, the *tromba* medium may, for example, deprive herself of sleep or food for several days as to, at a physical level, help her enter a trance state. Depending on the character and preferences of her *tromba* spirit, the medium may demand of the patient or their family a bottle of rum, chewing/

smoking tobacco, or varying amount of money to invoke both her spirit as well as the spirit who desires to enter the patient. Other *tromba* mediums may simply use music, *ramy* (incense), place cold water over her head, or use prayer to entice the spirits.

Music is more or less universally favoured and utilized in these sessions, and much like the Christian exorcisms, is used to please and call upon the spirits. In both cases, the music is quite emotionally and spiritually charged for the patients, and often, for example, individuals will begin to cry or shake in response to the music. Ultimately, the repetitive form of music and clapping, prayer, and in certain cases alcohol intoxication is all conducive to helping the individual enter a trance state and furthermore to help them transcend their superego or daily identity to ease the acceptance of their alternative spiritual selves.

Another pertinent aspect of both the preparation and healing is the physical and symbolic transformation into traditional costume. At the *toby*, when the *mpiandry* have finished their prayer circle they change into their all-white and neatly pressed robes. Traditionally, the robes serve to protect the *mpiandry* from the dangerous spirits of the devil. As women are considered more susceptible, the uniform for women offers even further protection in that it covers her head. The solid white of the robes is important as a color that is both favoured by God and is conversely detested by the devil. In a practical sense, the robe is designed to prevent the possessed from physically grabbing at the *mpiandry*, and hence the necessity of removing all jewellery before the exorcism. The significance of the costume for the *tromba* mediums lies in the notion that because each *tromba* spirit has its own character and personality, it correspondently has its own particular style of clothing. Depending on which *tromba* spirit the medium invokes (one individual is capable of multiple possessions), she must change into the traditional clothing of the chosen ancestor spirit. The clothes usually represent not only the tastes, character, and gender of that spirit, but also the style of clothing typical of that spirit's home region. In respect for the ancestor, when its spirit is invoked, it

must arise into its own familiar clothing, not for example, into the women's clothing of the *tromba* medium.

Symbolically, for both *tromba* mediums and *mpiandry*, the use of the traditional garments helps give authenticity to the transformation, allowing the individual to more fully connect with their spiritual identity. By using the clothes representative of the spiritual entity, the individual can physically and symbolically shed their current identity and adopt the power and prestige associated with the clothes of their spiritual counterpart. The clothes do not only carry significance for those wearing them, but in the eyes of the sick or possessed it is important for the medium to project the image of God or *tromba*. The patients can then be reminded that their lives are being supported not by a feeble human in street clothes, but rather by an ancestor of godly significance or by God himself. Furthermore, for the *mpiandry* in particular, the robe serves to represent their true selves, and for this reason, *mpiandry* are traditionally buried in their robe after death.

### Healing Techniques

*Tromba* healing as described in this paper will refer to those who are possessed by a *tromba* spirit, not other forms of spiritual attacks by evil spirits. For those sorts of illnesses, one must typically seek an *ombiasy* or have the spirit exorcised by a *mpiandry* at the Protestant church. Healing through *tromba* most generally involves identifying and analyzing the patient's *tromba* spirit and implementing the relevant course of treatment.

When a *tromba* medium has successfully invoked the spirits and entered a trance, it is usually indicated by a brief shaking or trembling of the body. After the *tromba* spirits have entered, inhabited the consciousness of the medium and patient, and is able to directly interact with the external world, the healing spirit continues the process of consultation and identification. The interactions at this point are no longer between the medium and the patient,

but rather between their *tromba* spirits. The nature of the relationship between the two is quite important for the patient. Because both are possessed and healing is performed at a spiritual level, the two are conceptually equal, transcending the intimidation and distance typical of patient-therapist relationships.

The *tromba* healer begins to ask more questions in a process called *vaky salaka* which translates literally as “broken sleep” and involves unveiling what has been hiding in the patient’s dreams and mind (Lazare, 10/04/06). Basically, this stage serves to identify, analyze, interpret the character of the *tromba* attempting to connect with the individual. As a physical action, certain *tromba* healers use a “key”, represented by a coin, to make gestures of “unlocking” the individual’s mind and senses, and opening them and their *tromba* spirit to the world (Fidel, 06/04/06). Similar to the use of the bible, the *tromba* healer may also use a mirror, seeds, or cards which function as tool to help analyze the patient’s situation and to link the spiritual and physical realms. The *tromba* healer continues by asking the name of the patient’s *tromba*, the name of its parents or genealogy, its origin or where it comes from (i.e. the forest, ocean, mountains), what is *fady* or restricted for it, and what is its preferred dress (Lazare, 10/04/06). As aforementioned, the questioning between the two individuals is performed in the context of the spiritual realm and the questions and responses are those characteristic of each individual’s *tromba* spirit. Therapeutically, the conversation thus most importantly serves to introduce and reinforce the patient’s new alternate identify as a *tromba* medium by requiring her to respond and communicate as that spirit. The process of determining one’s *tromba* is quite dynamic where together the *tromba* healer and patient decide on and establish the new personalized identity, influenced by the current needs and desires of the patient.

The process of identification is also necessary to determine the course of treatment for the individual. The two *tromba* spirits discuss the demands and needs of the patient’s *tromba*,



so that the patient may be healed as a function of the *tromba*'s satisfaction. Depending on the gravity of the possession or illness, the requirements for healing may range from gathering and making a tea from the extracts of certain medicinal plants and honey (since bees live in groups, honey symbolizes the unity between spirit and man), buying and using certain perfumes, implementing a regimen of bathing, to sacrificing a sheep, goat, or zebu (Rabarijaona, 21/03/06). Treatments, particularly the latter, can clearly be quite expensive and thus the length of time it takes to heal an individual is usually a function of both the families wealth and how strictly the individual follows their *tromba*'s dictate and *fady* (Lazare, 12/04/06). To collect money for the rituals, friends, extended family member, and others in the community are usually called upon to assist. This financial preparation may be symbolic of the family and community's concern and focused energy for the sick individual. It is, however, the responsibility of the individual to follow the prescribed treatment exactly, for if not, the *tromba* will not be satisfied and the process must start over from the beginning (Fidel, 06/04/06). Respectfully following the regime would also entail belief in the system, healing process, and *tromba* spirit, presumably necessary for the success of the treatment. Furthermore, having a sense of purpose in one's actions and feeling of accomplishment on successful completion of the regime can be quite conducive to helping one's confidence and mental health.

The length of these trance sessions is dependent on the interactions between the two spirits, but usually lasts a couple hours. At the end of the session, the patient and healer exit their trance state with a similar trembling or shaking of their bodies. The process is usually quite fatiguing for the patient and healer and who will often stretch and rest after they have regained their usual consciousness. The patient and medium will discuss a bit further, making sure the requirements were understood, and the patient or their family will pay a fee or

“motivation” to the medium based upon the patient’s satisfaction and as determined by the *tromba* spirits.

Traditionally, healing for the possessed at the *toby* is performed in three stages: the preparation, hymns, and admittance of one’s sins before the event, exorcising the demon, and individual prayers at the end. These sessions are performed twice a day, everyday at 4:00 am and 2:30 p.m. except for Thursday afternoons, a traditional Christian day of rest. All possessed living at the commune are required to attend each session, and if they are physically unable, will be carried in by a *mpiandry* or member of the patient’s family (who commonly live at the *toby* during their treatment). Much like the demands of the *tromba* spirits, the requirements of attendance at these sessions are quite important therapeutically to implement a form of routine and schedule to one’s life, which may have previously been unorganized and without direction or structure.

When the hymns are finished, the *mpiandry* step out of their prayer room and line up above the possessed who are required to sit on mats in front of the church. The *mpiandry* then begin to pray and continue to read the four bible passages previously mentioned. After the prayers are finished, the *mpiandry* begin moving through the congregation, stopping at each individual with a bible in their left hand and with their right arm making a downward striking motion, sometimes physically shaking them, and shouting various commands directed towards the demon:

- Miala ianao Satana! Jesosy no mandidy anao. (Leave demon! It is Jesus who commands you.)
- An’i Jesosy ny fahefana. Fahavalo efa resy ianao. (Jesus has the power. You are a defeated enemy.)
- Tsy manana anjara toerana na fahefana amin’ny sainy sy ny fony ao ianao. (You do not have place or power in this person’s spirit or heart.)
- Any amin’ny farihy mirehitra afo no anjara toeranao. (Your place is below in the lakes of fire.)
- Mandehana fa an’i Jesosy izy. Vidin-dran’i Jesosy izy. Jesosy no efa maty nisolo azy teo -amin’ny hazo fijaliana. (Leave because this person belongs to Jesus. He/ she is the price of Jesus’ blood. He died on the cross.)
- Faingàna manheha izao. (Get out! Leave Immediately.) (Lazare, 2002-2005)

The exorcisms are quite emotionally and physically strenuous for both the possessed and *mpiandry*. Occasionally, for example, the possessed may break out in fits and attempt to attack the *mpiandry* in which case the *mpiandry* will together hold the individual, continuing the exorcism until the fit has passed. For this reason as well, many of the possessed are required to be bound in chains around their hands and feet, both a practical and symbolic display of control over the demon. After the *mpiandry* have made their rounds they together return to a line in front of the church and the ill will individually kneel in front of the *mpiandry* of their choice. Functioning as a medium of God, the *mpiandry* will then lean forward, place their hand on the individual's head, and into the ear of the possessed will relay a message and prayer from God. After each individual has received benediction from God, the session ends with song and a final prayer, the Lords Prayer. The *mpiandry* exit and change back into their daily clothing and patients return to their beds. Theoretically, after these sessions, much like the trance or meditations of the *tromba*, the possessed (and in some respects the *mpiandry*) are calm, focused, and may be able to speak or pray but are not able to remember anything before the exorcisms (Lala, 15/03/06).

The significance of the exorcisms lies in providing spiritual clarity and focus to the patient by breaking down the demons that continually confuse and prevent the individual from receiving the words of God. Once the demon has been reduced in the exorcism, the *mpiandry* can implement the new spiritual force and identity in connection with Jesus and God, particularly through the final individual prayers. In this regard, the medications offered by "SALFA" are considered to function in a similar manner. The drugs are given to clear and calm the minds of the patients, fogged by their mental disorders, to better receive the work of the *mpiandry* and hence God (Dr. Sahondra, 28/04/06). In any case, the individual must have belief and conviction in the process in order for the healing to be successful (Lazare,

12/04/06). Thus, in order for the patient to believe, they must have a mind, and spirit in this case, with the capacity to do so.

In certain respects, the treatment is not restricted to these sessions, but rather begins the moment the individual is admitted into the *toby* system. For example, the possessed are required to live in various chambers with one *mpiandry* with ten or so other possessed individuals. At anytime of day, particularly if an individual throws a tantrum or screams, the *mpiandry* will pray with the possessed and attempt to calm them. Furthermore, once a week the patients are bathed and groomed either by their family members or the *mpiandry*, a form of hygiene and health that likely did not exist previously. Cleanliness in this context brings the individual closer to God, similar to *tromba* where poor hygiene is often deemed *fady*. Furthermore, as the patients begin to improve, they are usually taught to cook, gather wood, sell products, and other techniques vital for a smooth transition back into a functional life.

The point is also clearly made at the *Toby Nenilava*, where at the top of the stairs leading to the church commune is a sign that reads “Filazana! Rarana ny vehivavy mipataloa na mikilaoty fohy tsyhiakatra etyamin’ny *toby* masina ny *toby*” translated as, “Attention! Women who are wearing pants or shorts are not allowed to enter the *toby*.” Even before entering, the individual must abide by the rules and regulations designated by the church and religion. Similar to the identification period with the *tromba* healers, a list of *fady* and restrictions are determined for the individual. These sorts of guidelines may be quite important in giving structure to the individuals life. Conceptually, because these regulations are determined by a higher spiritual force, *tromba* or God, both with the power of healing and destruction, one gains a great sense of responsibility and purpose in abiding by these rules.

### Moment of “Awakening”/ Acceptance

In both systems, the moment that the patient is considered “healed” is, at a superficial level, when the patient subjectively declares that they are cured. However, it is understood that patients may either be lying, influenced by their demon, or incapable of truly knowing their own state of health (Lala, 15/03/06). Because “health” may be contingent upon one’s adoption of the respective system, it seems that the patient is actually “healed” when they are able to wholly embrace their new spiritual identity. The initiation is indicated, in both cases, by a ceremony and public display of one’s recently established spiritual connection.

In the Christian perspective the moment that the individual is considered healed is when they announce the name of Jesus as their savior (Lala, 15/03/06). A *mpiandry* must recognize this declaration of one’s faith to verify that they are truly healed. While this point is important in the inherent understanding of the religious system and recognition of a higher spiritual authority, the individual is not necessarily fully integrated into the system that will insure a continuous form of spiritual focus and health. Within the context of the system, when the patient has been rid of their demons and been “healed”, they may choose to become *mpiandry* themselves. Illness is not necessarily a prerequisite of becoming *mpiandry*, though it is not the choice of the individual but of God, and the individual must accept the calling of their dream to perform “His” work (Modane, 04/04/06). For the most part (well over 75%), however, of the possessed who were “cured” in the *toby* system do become *mpiandry* (Lazare, 10/04/06).

After the individual decides to become *mpiandry* they must enter intensive training and studies of the bible for a minimum of two years. At this point, they become “*mpiomana*” (apprentice) under the guidance of another *mpiandry* or pastor. During this two-year period, the *mpiomana* learns the bible, the religious morals and doctrine, and how to heal the possessed and the process of exorcism (Lazare, 12/04/06). After the two-year period, once a

year, there is a “graduation” ceremony for the new *mpiandry* during which the pastor offers the benediction of God for each. At the end, each *mpiandry* is individually recognized in their uniforms in front of their family, friends, and church community (Lala, 21/04/06).

In the *tromba* system, the healer must once again “enter” the patient to assess whether or not their *tromba* has been properly satisfied. If the individual has followed the treatment determined by the *tromba* and has avoided breaking *fady*, a ceremony may be used as a final sentiment of respect and integration between the *tromba* spirit and the chosen individual. These ceremonies are traditionally performed in sacred areas called *doany*, usually near a lake or large tree, dense with the spiritual force of other *tromba* ancestors, not unlike a church. The ambience of these ceremonies is usually quite festive and involves heavy consumption of alcohol, music and clapping, and a sacrifice of a large and symbolically significant animal. If, for example, a zebu is sacrificed, its hump is reserved for the *tromba* because it is physically closest to the sky, and hence closest to God (Rabarijaona, 21/03/06). During this time, the honoured *tromba* medium must enter a trance and invoke her spirit. Once in the trance, she must announce to her family, friends, and community the name, origin, and character of her *tromba*.

These ceremonies signify not only the connection between the individual and her spiritual “mate”, but prove that they have gone through and respected the steps necessary to adopt the doctrine inherent in each system. These public displays of one’s transformation are thus quite important for the individual to know that their new identity is not only understood but also accepted and celebrated in the community. Likewise, the ceremonies are important in the eyes of the community to understand that the individual has adopted and is comfortable with this new identity, and furthermore is prepared to give back to the community. Similar to the initial healing process, the music and alcohol function to break down resistance to the new identity, help one transcend their fear of social criticism, and because most people become

intoxicated, the acceptance of the individual's new identity is universally fluid. Because the ceremonies serve to announce to the world that the individual has been given a power and responsibility to heal others, the community must now respect the alternative persona as a lasting form of spiritual connection and strength.

### Continued Support

Although the healing process is technically perceived to be complete, in many respects, each system offers a continuous form of mental health support for the previously ill. In a theological perspective, it both pleases and is in the nature of *tromba* spirits and Jesus to heal others. In this respect, one is ensuring their mental health by following the will of their spiritual significant, much like following regulations and *fady*. Furthermore, by healing others, the mediums are maintaining their relationship and connection with the spiritual world. Through healing, *mpiandry* are considered to be continuously protected from evil spirits as they must consistently pray and become "inhabited" by the force of Jesus and God. *tromba* mediums as well must invoke, satisfy, and communicate with their spirit every time they wish to heal.

Because the devil is perceived to continuously try to take advantage of humans, it is not uncommon for a *mpiandry* to become re-possessed. For this reason, after every public exorcism, the *mpiandry* go back into their prayer room and "chase out" each other demons, very much in the same sequence as for the sick. As well, every Wednesday evening those *mpiandry* who wish to convene can pray, perform exorcisms on one another, and share any problems in their personal or exterior life, asking for further prayers on these issues (Lala, 21/04/06). These events are usually private and intimate, allowing the individual to release what has been bothering them without fear of social criticism. Furthermore, those *mpiandry* who were taking anti-psychotics when they were "ill" are encouraged to continue the

prescribed medication and, like the possessed, may receive the consultations and drugs virtually for free.

Similarly, *tromba* mediums are also capable of being possessed by multiple *tromba* spirits. Interestingly, in a male dominant, polygamous country, it is through *tromba* possession that a woman is able to command multiple men. One *tromba* medium had up to eleven different personalities that inhabited her and that she was able to yield. Typically, there is a dominant *tromba* spirit that governs and serves as the healer, while other spirits may have other functional roles for the individual. The process of *tromba* possession is dynamic and continues to support different stages and difficulties in an individual's life. Different spirits are, for example, "more appropriate for particular time periods, settings, and circumstances" (Sharp, 121). The possessed may choose to seek a *tromba* healer for support and to again go through the process of healing, however, typically after a couple possessions the individual is comfortable accepting the new spirits and, more importantly, has a heightened self-awareness to know the developing needs of "her spirit" and mind.

In a psychoanalytic perspective, the process of transforming into an alternate identity may serve as a form of sublimation. The mediums of both systems can play into their powerful and sometimes eccentric roles to purge whatever forces were driving their previous disorder. This new identity allows the individual to direct her once chaotic and unacceptable energies and behaviour into a form that is not only accepted, but honoured in society. In the *tromba* system, the sick individual is even able to choose the qualities of their alter ego, allowing them to integrate and organize the symptoms or energies of the mental illness. Furthermore, with many different spirits, the individual has a multifaceted outlet for varying emotions and sentiments. For both *mpiandry* and *tromba* mediums, the transformation is both physically and emotionally fatiguing but lasts at most for a couple hours, allowing the



individual to contently return to a more stable persona. These perceptions of the self and of ones new identity are also vital in ensuring one' s continued mental health.

### Perceptions of Self/ Society/ Family

In theory, most patients do not have the mental capacity or self-awareness to know their condition as possessed (Christoff, 12/04/06). The possessed are considered to be unconscious or who's minds are dominated by the demon or spirit. However, if aware during the time of possession, one's self perception is usually not positive. *Tromba* possession, for example, is often initially viewed as a "source of anguish" and is generally refused in virtue of being a "victim of a *tromba* spirit" (Estrade, 69). Desires to preserve one's religion may also prevent the individual from wanting to accept their *tromba*, though the *tromba* will usually refuse their participation in the church. A demonic possession may also be perceived to be quite frightening for the patient because they lack control or will over their own bodies (Zavier, 03/05/06). It is, however, within each system that the patient's illness and behaviour is not only accepted but considered normative. Within the system, the patient can find refuge from social criticism and work through their problems in a non-threatening environment.

For example, those who are possessed by *tromba*, demonic, or other harmful spirits are considered to be commanded by those entities and the behaviour is thus perceived to be beyond the control or responsibility of that individual. One must take responsibility in following the appropriate treatment, however, because the disorder is perceived to exist beyond that person, the individual is freed of the perpetuating guilt and anguish associated with the unwanted behaviours of mental illness. Furthermore, for both *mpiandry* and *tromba* mediums, the concept of multiple possessions is an important facet of continued mental health. Without this acceptance of "relapse" or another possession, the individual may become quite discouraged or embarrassed, reinforcing their depression or mental illness.

The *toby* system also creates the environment of a “community” for the possessed, which helps to remove feelings of abnormality or forlornness. Because, every human is perceived to have sinned and to thus carry demons, everyone “participating” in the church assembly are exorcised and given prayers. Conceptually, those with mental illness gain a great sense of normalcy and belonging through this gesture. Furthermore, the possessed at the *toby* represent the majority and are thus by no means alone in their spiritual battles. For the *mpiandry* as well, they are continuously accompanied not only by those who have the same religious pursuits, but friends and even family members who often also become *mpiandry* (Razafimandimby, 04/05/06).

Similarly, *tromba* mediums are conceptually and physically never alone. Because of the many inhabiting *tromba* spirits, the medium is always accompanied, always has a mentor and counterpart, a quality particularly important for those who have lost their parents or been abandoned by their spouses. Because the possessors are usually family members, either one’s dead grandparents or parents, the quality of company can be quite comforting, continuing the guidance and security inherent in a parent-child relationship. It is also interesting to note that before a *tromba* is able to inhabit an individual, much like a traditional marriage, the ancestors of that spirit must ask permission of the possessive’s ancestors (Elise, 06/04/06). In this respect, the possession has been ordained and approved by one’s lineage, improving the perception of one’s possession. In a physical respect, the *tromba* medium is consistently visited by friends, family, and members of the community in search of treatment.

After the individual has embraced their spirit, it is usually then in retrospect and in light of one’s new identity that they gain appreciation for the initial possession. For both *tromba* mediums and *mpiandry*, when their new identity has been accepted and is publicly displayed, they instantly become spiritually and culturally important people. The mediums are both well respected and, in some cases, feared in the community as they now bare the power

of the *tromba* spirit and God. *tromba* healer status is also instant celebrity for many women. One *tromba* medium, for example, had been a healer for only five years and already had patients in Antananarivo, Reunion, and Mauritius, a fact that can be quite lifting for one's ego and self-perceptions (Valena, 10/04/06). In a practical sense, most *tromba* mediums carry out a successful business with dozens of "clients" often visiting throughout the day and night, baring various gifts and "motivations". In light of all these perceptual and economic factors, every *tromba* medium interviewed claimed that they were quite satisfied and even happy with their possession. Although humble about their circumstance, every *mpiandry* similarly admitted that they were quite "satisfied" and even "delighted" with their work for and connection with God (Zavier, Germaine, 03/05/06).

### Discussion

In both a spiritual and psychoanalytic respect, a change in one's life may be the fundamental motivation behind the initial sequence of dreams and calling from a "spirit". Both the latent and explicit message of the dream may be pulling the individual to make a shift in his or her life, to gain direction and structure, step into a role of significance, or even to transcend a certain adversity. Possession may ultimately serve to represent a global crisis and thus function and support as the initial impetus for the needed transformation of one's life. Unfortunately, it is usually out of fear of change and transition into a new and unfamiliar identity that the dream is refused. In a psychological respect, if one's psyche is requiring an escape from a current negative situation, by refusing the adversities will likely continue, causing the body and mind to implement a sanction in a perceived form of spiritual sickness or possession.

In consideration for the symptomology and context of these spiritual or mental disorders, it is clear that there is an inherent need for a new system and mode of living. As aforementioned, women in Madagascar are generally perceived to be lower in the social order, and it is thus likely that the higher rates of possession in women is both a direct and indirect product of that degrading regard. Loss or abandonment, for example, is one of the most common circumstances leading to possession. When a woman has been left by her husband, she may be left without financial support, without means into the workforce, and left emotionally fragile. In response to these factors, her body and mind may simply shutdown in a form of learned helplessness and defeat. The resulting symptoms are usually those similar to depression: wandering aimlessly, not eating or sleeping, physical soreness, and screams and cries (various *tromba* interviews). The shutdown, in the context of the two traditional systems, may be perceived as possession and spiritual illness. Another common trend is for women who are possessed are those who have a job but in difficult physical labor, for instance

working in the field or hunting for turtles, both of which may not be practically sustainable as a form of living. In the two circumstances, it may be the woman's psyche "crying" out for her to transcend those conditions, and move into a system of support and position of power and authority.

It is interesting to consider that the symptoms typical of a demonic or *tromba* possession may have manifested in response to the existence of the two systems. It is, for example, still curious why women are possessed far more often than women in Madagascar. It is possible that men's psychological issues are not publicly acknowledged, and the higher percentage of possession in women may be a result of the attempts to maintain the perceptual hierarchy and social fabric. It is important to point out that at the psychiatric hospital of Anjanamasina near the capital city of Antananarivo, where the mentally ill can presumably maintain a higher level of anonymity, 65% of the patients are male (Rapport D'activites Annuel, 2005). Clearly, the prevalence of mental illness is not necessarily a function of sex in Madagascar, but may be because possession plays much more a social role, it may remain a female dominated phenomenon. It is possible that because women know that these systems are available, and for men they not as commonly accepted, there is resultantly a much higher percentage of women who are possessed. It is possible the orientation works conversely where the systems may have developed in response to the trends of mental illness in Madagascar, redefined as possession. For example, the fact that the Protestant churches have recognized *tromba* possessions, in their own form, as disorders that can be healed by God shows the adaptation of the system to the manifest of the disorder.

Regardless, the disorders that have developed in many Malagasy women and men have ultimately led them to systems that are accepting of their illnesses and willing to offer a dynamic and continuous form of support. If the possession and calling therein can finally be accepted, the individual is not only embracing and working through her disorder in a form of

catharsis, but adopting an identity and thus ticket to higher status and health in the society of Madagascar. It is ultimately through *tromba* and *mpiandry* that one's dreams may become reality.

### Future Research

It would be quite interesting to determine whether the mental disorders found in Madagascar truly have developed in response to the available *tromba* and Christian forms of support. In doing so, one might compare the course of the mental disorder based upon the patient's decision to not or to go on to become *mpiandry* or a *tromba* medium. Furthermore, because this current research was limited to investigating those who had already chosen a system of mental health support, one might research those individuals who are purported to have an illness but have not yet gone on to adopt a system for healing. Ultimately, it would be intriguing to see if the disorders have manifested in light of the system, if the systems have been developed to support the illness, and to trace the co-evolution between these two notions in Madagascar.

## Conclusion

Possession in Madagascar constitutes a host of symptoms that inherently cannot be reduced into a clear medical diagnosis. Because of the lack of accessible or efficient mental health support at medical facilities, people's faith has remained focused in traditional perceptions. Consequently, it is possible that people's disorders may manifest in the same paradigm of the system they perceive to exist and work. On the other hand, possession, as a concept, represents an individual's global crisis, developing out of many facets of one's psyche, circumstance, and beliefs. The patient who expresses possession is thus presumably not in need of symptomatic or transient forms of treatment, but rather requires a shift in the entirety of their life. The two traditional systems of mental support, in a diverse and dynamic approach, exist to address the encompassing and purposefully ambiguous nature of possession illness.

The common circumstances behind a spiritual possession, a calling in a dream or some form of disruptive event, indicate at a practical, psychoanalytic, and spiritual level that the individual's life is ready for a change. Change within itself, however, may not be sufficient and the individual would thus need a general restructuring of their life, adopting an identity that entails structure, sense of purpose and belonging, and continuous personal and spiritual focus. Inherent in both the identities of *tromba* and *mpiandry*, one is, as previously shown, required to have general consciousness and respect of the regulations, laws, and requests of the spirit world.

Through the new identity, the individual is also positively reinforced by the respect, acceptance, and mental health needs of the community, and furthermore the encouragement of one's ancestors or family members involved in the healing processes. Through the meditative preparations, ritualistic execution, and participation of possession and healing of others and oneself, the medium is required to maintain a clear and introspective connection with the

spiritual realm. Ultimately, these trends shared by the two systems function to initiate an individual's transition and ensure their continued mental health through constant maintenance and reinforcement of the new identity. Through *mpiandry* and *tromba* mediumship, one is not only required to be aware, respectful, and responsive to the system that represents their initial disorder, but inherently in doing so, allows the individual to continue to wholly embrace the demons and spirits within.



### Works Cited

- Chiu, S N. (2000). Historical, religious, and medical perspectives of possession phenomenon. *Hong Kong Journal of Psychiatry*, 10(1): 14-18.
- Christoff, J. President of Toby Betela. 12/04/06. Interview in Tulear, Madagascar.
- Elise, P. *Tromba*, Fidel, E. *Ombiasy*. 06/04/06, 07/04/06. Interview in Tulear, Madagascar.
- Estrade, J M. (1985). Un culte de possession à Madagascar: «Le *tromba* ». Editions L' Harmattan, Paris
- Lala, R. Medical Doctor, Top Reseau; *Mpiandry*. 15/03/06, 21/04/06 . Interview in Fort Dauphin, Madagascar.
- Lazare, D L. (2002-2005). Fifohazana (mouvement du réveil protestant) et pratiques thérapeutique. UFR Psychologie Sociale-Anthropologie, Université de Tuléar, Madagascar.
- Lazare, D L. Professor at University of Tulear. 12/04/06. Interview in Tulear, Madagascar.
- Modane, B. *Mpiandry*. 04/04/06. Interview in Tulear, Madagascar.
- Rabarijaona, B. Professor. 21/03/06. Interview in Antananarivo, Madagascar.
- Ramamojisoa, J B. (2002-2005). Fifohazana (mouvement du réveil protestant) et pratiques thérapeutique. UFR Psychologie Sociale-Anthropologie, Université de Tuléar, Madagascar.
- Rapport D'activites Annuel 2005: Hopital Psychiatrique Anjanamasina. Ministere de la Sante et du Planning Familial.
- Rarivomanana, D. 21/06/06. Presentation- L' economie à Madagascar: la Pauvreté.
- Razafimandimby, J M "Sosony". 05/04/06, 04/05/06. Interview in Fort Dauphin, Madagascar.
- Sahondra, L. Medical Consultant, SALFA. 28/04/06. Interview in Fort Dauphin, Madagascar.
- Sharp, L A. (1993). The possessed and dispossessed. University of California Press, Berkeley and Los Angeles, California.
- Sharp, L A. (1994). Exorcists, psychiatrists, and the problems of possession in Northern Madagascar. *Soc. Sci. Med.* Vol 38, No.4 pp. 525-542.
- Valena, K. *Tromba*. 10/04/06. Interview in Tulear, Madagascar.
- Zavier, Germinie. *Mpiandry*. 04/05/06. Interview in Fort Dauphin, Madagascar.