

AMI



56 / dicembre 2023

RIVISTA DELLA SOCIETÀ ITALIANA DI ANTROPOLOGIA MEDICA
FONDATA DA TULLIO SEPELLI



In copertina

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AM

Rivista della Società italiana di antropologia medica
Journal of the Italian Society for Medical Anthropology

Fondata da / Founded by
Tullio Seppilli

Biannual open access peer-reviewed online Journal

56

dicembre 2023
December 2023



Fondazione Alessandro e Tullio Seppilli (già Fondazione Angelo Celli per una cultura della salute) – Perugia

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Rivista della Società italiana di antropologia medica
fondata da Tullio Seppilli

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Editoriale di AM 56

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Innanzitutto, vorremmo dire anche noi, da qui, qualcosa su quello che sta accadendo in questi giorni in Medio Oriente tra Israele e Palestina. Su questo grave argomento la SIAM si è riunita e, nonostante le sensibilità differenti, tutti siamo stati consapevoli che la Pace è una prassi quotidiana e abbiamo concordato di scrivere e far circolare un annuncio, che pubblichiamo subito dopo questo breve editoriale, in apertura della rivista.

Abbiamo poi chiesto una testimonianza all'amico e collega italo-tedesco Alexander Koenler, che quel terribile 7 ottobre, nel giorno in cui Hamas ha sferrato il suo sanguinoso attacco dalla striscia di Gaza verso Israele, si trovava lì. Doveva partecipare a un Congresso che non si è tenuto. Egli ha scelto di raccontare per iscritto l'esperienza della sua permanenza e del suo rocambolesco rientro, nonché le ragioni della sua solidarietà e del suo no alla tragedia storica dell'occupazione e alla guerra attuale in quei territori. Alex è un antropologo della politica esperto di territori "ibridi" come quello israelo-palestinese. Le stesse cose non ha potuto dirle in un seminario pubblico: un nodo alla gola gli si è stretto mentre stava per parlarne.

Il testo di Koenler è collocato in apertura della rubrica *Saggi*. Si tratta di una testimonianza, in presa diretta, dei primi giorni del conflitto. Dall'8 ottobre a oggi abbiamo assistito, increduli e sgomenti, a un attacco israeliano senza precedenti e che non può avere alcuna giustificazione politica e morale. Un attacco che ha colpito principalmente la popolazione civile e che ha devastato la striscia di Gaza. È nostro dovere, come cittadini e come antropologi, non stare in silenzio ma agire, in tutte le forme possibili perché questo attacco si fermi subito. Nel contempo è necessario riflettere analiticamente. Nelle prossime settimane organizzeremo degli incontri sul conflitto che poi speriamo di ospitare, sotto forma scritta, nella rivista.

Si prosegue con lo scritto di Eugenio Zito, nostro redattore e membro del Consiglio Direttivo della “Società italiana di antropologia medica” (SIAM), che ci offre la sua visione del 2° Convegno della SIAM del 2018 dedicato a Tullio Seppilli, le cui sessioni plenarie abbiamo pubblicato sul N. 49 di AM, mentre la maggior parte delle riviste italiane di antropologia ha curato l’edizione dei panel paralleli.

Inoltre, con questo numero 56 di AM, inauguriamo una nuova rubrica posta prima delle recensioni: *Riflessioni e Racconti* della scrittrice Sara Cassandra, membro della nostra redazione. La curerà lei scrivendo o coinvolgendo narratrici e narratori sui temi dell’incorporazione, dei processi di salute/malattia, sul dolore e la sofferenza. Cassandra è Autrice del libro *La solitudine del cruciverba incompiuto. Storie di tranelli linguistici e disturbi psicosemantici*, insieme ad altri testi di racconti, riflessioni e narrazioni. È un testo già recensito, che riteniamo rilevante per l’antropologia medica in quanto tratta di patologia in una maniera che va oltre la scrittura narrativa assumendo il malessere in chiave soggettiva e come esperienza creativa, soprattutto in rapporto al linguaggio (come il *calembour* “psicosemantici” al posto di “psicosomatici” e l’uso di Lacan ci hanno fatto immaginare). Dopo avere letto questo testo si può capire quanto la malattia sia dialetticamente intrecciata alla salute e quanto talora ammalarsi faccia bene, per dirla con il libro di Giorgio Abraham e Claudia Peregrini.

La sezione *Ricerche* risulta “monografica”, ancorché non volutamente, in quanto accoglie due scritti sugli spiriti, proposti da Chiara Legnaro, neolaureata in filosofia all’Università di Trento, e da Emily Pierini, ricercatrice alla Sapienza Università di Roma. Ristesì, come sempre, nei mesi scorsi, dopo la lettura e il commento dei referees, entrambi riguardano la possessione, tema sul quale abbiamo già prodotto diverse scritture e torneremo presto a farlo.

Il numero 56 continua dopo le *Ricerche* con una *Sezione monografica* dedicata all’etica, a cura di Corinna S. Guerzoni, redattrice di AM, Visiting Scholar, Postdoctoral Researcher negli USA e Visiting Researcher in UK che, dopo aver vinto borse di studio dell’Unione Europea e di Fondazioni statunitensi, è ora Ricercatrice presso l’Università di Bologna, e Viviana L. Toro Matak, docente di Etica applicata, Filosofia della medicina, Sociologia della salute e Prevenzione ed Educazione alla salute presso l’Università Ludes Lugano Campus, sede svizzera della Facoltà di fisioterapia della Semmelweis University.

Le questioni etiche, dopo essere state ampiamente dibattute in ambito internazionale, stanno diventando improrogabili anche in Italia come mostra l'ampia bibliografia. È importante che AM ne tratti subito, perché l'etica ha visto nella biomedicina il suo modello e l'antropologia medica è la specializzazione dell'antropologia più esposta alla medicina occidentale, e quindi maggiormente interessata a tessere dialoghi sull'etica per comprendere a che punto è il dibattito nel nostro Paese.

Infine, dopo la nuova rubrica – di cui pure abbiamo dato conto, poco fa, in questo *Editoriale* –, ci sono le *Recensioni*, affidate a esperti del settore.

Questo anno si è aperto con il 4° Convegno Nazionale della Società italiana di antropologia medica (SIAM): a fine gennaio siamo stati ospiti nella città di Napoli, presso il Dipartimento di Scienze Sociali dell'Università degli Studi di Napoli Federico II – Dipartimento di cui Eugenio Zito è membro – dove, con il patrocinio della Fondazione Alessandro e Tullio Seppilli, abbiamo discusso di *Fini del mondo, fine dei mondi. Re-immaginare le comunità*. Un convegno che ha riflesso i tempi difficili che stiamo attraversando, ma che anche è stato denso di aspettative.

Ora il 2023 si chiude con questo N. 56 di AM e, anche stavolta, nella speranza di avere assolto nuovamente il compito di rispondere alla domanda: «*Dove va l'antropologia medica italiana?*», auguriamo a tutti e a tutte un buon anno nuovo 2024.

Annuncio di un webinar SIAM sul conflitto in Israele e nei Territori Palestinesi Occupati

SIAM. Società italiana di antropologia medica

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Cari Soci, Care Socie

In un momento in cui il dibattito pubblico è fortemente polarizzato e difficilmente consente una riflessione informata e approfondita sulle intricate radici storiche e sull'enorme complessità del dramma sotto i nostri occhi, avvertiamo il bisogno di fare ricorso ai nostri strumenti analitici per dare il nostro contributo conoscitivo e progettuale, per denunciare l'atroce normalizzazione della violenza come soluzione alle tensioni politiche e per contrastare l'attiva strutturale produzione della sofferenza, che compromette il futuro di intere generazioni.

Vi abbiamo già inoltrato, affinché valutaste se aderirvi e sottoscriverli, alcuni degli appelli che stanno circolando per esprimere solidarietà alle vittime di tanta violenza, indignazione per la sua insensatezza e volontà di porvi fine.

Ma il compito di una associazione scientifica è innanzitutto quello di promuovere la conoscenza e la comprensione dei fenomeni, portarne alla luce le cause, svelarne i mascheramenti e possibilmente contribuire a ideare delle soluzioni percorribili ai problemi. Con la consapevolezza che ciò che più conta in frangenti come l'attuale è la capacità di guardare al futuro: per definire e attuare gli interventi più efficaci a curare i traumi e le memorie che per decenni affliggeranno le vittime, per salvaguardare la dignità, i diritti, la libertà e la salute di tutti senza discriminazioni ed esclusioni, per individuare percorsi condivisi in grado di ripristinare condizioni di convivenza, per garantire una pace giusta e durevole.

Stiamo dunque pianificando un ciclo di incontri seminariati che consenta – come già avvenuto all'insorgere della pandemia – di mettere in gioco

le nostre competenze, ascoltare e confrontare i punti di vista e le analisi nostre e di colleghi e interlocutori esperti e qualificati con diverse provenienze e prospettive. Nella speranza che ciò consenta di produrre un incremento della conoscenza e della capacità di comprensione e intervento.

Vi saremo grati per il contributo che vorrete dare alla realizzazione del webinar e per la vostra attiva partecipazione agli incontri.

Nell'attesa di diffondere a breve la comunicazione dei primi appuntamenti, vi salutiamo molto cordialmente.

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Trance-Formative Therapeutic Experiences

Moving and Being Moved by Spiritual Healing

Across the Atlantic

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Riassunto

Esperienze terapeutiche trance-formative. Muoversi e essere mossi dalla cura spirituale attraverso l'Atlantico

La medianità e la possessione sono state spesso concettualizzate come fenomeni psichici individuali o pratiche marginali appartenenti a qualche alterità distante, o persino ridotte a qualche tipo di categoria patologica. Tuttavia, mentre si diffondono attraverso le religioni transnazionali si inseriscono in una rete crescente di pratiche terapeutiche che operano al di fuori del campo biomedico. Ne è esempio la diffusione transnazionale dello spiritualismo cristiano brasiliano del Vale do Amanhecer (Valle dell'Aurora) con lo sviluppo di ciò che i medium descrivono come "trance medianica". Esaminerò le esperienze di coloro che apprendono la medianità attraverso l'Atlantico tra Brasile, Stati Uniti ed Europa per trattare malattie croniche e ansia. Mostrerò come le narrazioni dei medium relative ai loro percorsi terapeutici evidenzino un duplice movimento: attraverso diversi domini terapeutici e attraverso la fenomenologia della trance medianica – un movimento più sensoriale, immaginale e affettivo – generando immagini terapeutiche multisensoriali che emergono da tale esperienza. Propongo quindi la nozione di "esperienze terapeutiche trance-formative" per analizzare come la trance medianica venga appresa per scopi terapeutici promuovendo una trasformazione.

Parole chiave: trance medianica, cura, transnazionalismo, immagini terapeutiche, Vale do Amanhecer

Therapeutic trajectories often unfold across different approaches to well-being posing new challenges to patients, healers and medical professionals. The World Psychiatric Association's (WPA) Statement released in 2015 recognises the increasing scholarly awareness of the relevance and implications of religion and spirituality for health issues in terms of diagnosis,

treatment, outcome, prevention, quality of life and wellbeing (MOREIRA-ALMEIDA *et al.* 2015). In the US this reflects in 84 out of 126 accredited medical schools holding courses in Spirituality in Medicine (MOREIRA-ALMEIDA, LOTUFO NETO, KOENIG 2006). The WPA also expresses the need for more research covering different cultural contexts in this field (MOREIRA-ALMEIDA *et al.* 2015).

The growing presence of complementary and alternative medicine (CAM) along with the global mobility of therapeutic practices has fostered once more the debate on “medical pluralism” (PENKALA-GAWĘCKA, RAJTAR 2016; HÖRBST, GERRETS, SCHIRRIPIA 2017) with varying focuses and subsequent criticism to the original notion implying coexisting bounded systems (LESLIE 1980). Most interestingly, this debate highlights a) the diversity, situatedness and unboundedness of therapeutic practices, including biomedicine (PARKIN 2013; HSU 2018); and b) the need to privilege patients’ perspectives rather than the professionals’ ones (PENKALA-GAWĘCKA, RAJTAR 2016). Scholars have shown that the quest for complementary approaches to wellbeing is a phenomenon growing along with the practices of faith healing particularly in contexts such as Spiritualist, Pentecostal and Charismatic Churches in Brazil and transnationally (CSORDAS 1983, 2009; RABELO 2007; ROCHA 2017).

From the standpoint of transnationalism, studies have approached religion and globalization looking at how discourses, practices and objects circulate transnationally and are transformed in new contexts, and how they travel with migrants to develop cultural heritage in Europe and elsewhere through multidirectional religious flows (CSORDAS 2009; HÜWELMEIER, KRAUSE 2009; SARRÓ, BLANES 2009; ROCHA, VÁSQUEZ 2013; VAN DE KAMP 2016).

This article examines healing practices in a transnational perspective by combining the analysis of therapeutic trajectories with a focus upon the process of learning spiritual trance. Shamanism, possession and mediumistic trance are in fact relevantly present in our societies reshaping healing practices; they «expand and circulate in networks of migration and in transitional media networks», bringing along new subjectivities and the “return of the religious” at a global level (ZILLINGER, BEHREND, DRESCHKE 2014). Rather than hidden, they are overtly expressed in the people’s narratives about their therapeutic experiences. Current research needs to tackle these relevant aspects of human experience rather than bracketing them out as belonging to some kind of marginalized, subaltern or distant oth-

erness (BOWIE 2013), understanding their therapeutic uses and the place they occupy in contemporary societies. In considering these practices in a transnational perspective, this article seeks to broaden the perspective beyond the idea of diaspora with migrants re-territorializing their healing practices in other lands, by examining how these practices actively involve locals in their settling and development in new contexts, changing the grammar of bodies and selves, the approach to illness and health, and the patterns of religious belonging.

In terms of spiritual healing, the scholarly attention has addressed the social aspects of the patients' demand of complementary healing as related to religious mobility exploring the dynamics of social inclusion, religious consumption and the pragmatic aspects of religious choices (RABELO 1993; GREENFIELD 2008) as well as patterns of participation to different healing systems, and its results on the clinical level. Yet, a little attention has been paid to those patients who chose to undertake a training within a religious or spiritual group for therapeutic purposes. By addressing the therapeutic aspects of the process of learning to master different states of consciousness in a spiritual healing practice, I adopt an approach which flips the classical representational and pathologizing paradigms that have marked the field of studies on spirit possession and trance, especially beyond anthropology, such as in clinical studies. This stance unsettles those pathological reductions so as to consider how these experiences are rather used in people's therapeutic trajectories transnationally. Indeed, I rather look at the phenomenon of mediumistic trance in relation to healing, at how it shapes therapeutic experiences, whilst being shaped by culture and a specific learning process. Therefore, I propose the concept of "trance-formative therapeutic experiences" to understand how mediumistic trance is learned for therapeutic purposes fostering a transformation.

My use of the term "mediumistic trance" refers to an ethnographic category in use in Brazilian Spiritualist practices, both in Brazil and beyond. Rather than considering mediumistic trance states as "altered states of consciousness", I approach them in terms of "different modalities of experiencing" (CARDEÑA 2009) as scholars have stressed that trance states are far from being fixed and unchangeable but they contextually present their internal variability (FRIGERIO 1989; HALPERIN 1995). More specifically, I am going to address mediumistic trance as practiced in the rituals of the Spiritualist Christian Order Vale do Amanhecer (Valley of the Dawn). The Order was founded in Brasília in the 1960s and is now spreading transnationally, hence, I am looking particularly at how the development of mediumship is

used for therapeutic purposes in its temples in Brazil, Portugal, Italy, and the US.

Firstly, I will explore this phenomenon in terms of transnational movement showing how besides spreading through transnational religions these practices are increasingly embedded in a growing network of therapeutic practices operating besides the biomedical field.

Then, I will compare the experiences of people with chronic diseases and anxiety who have learned spirit mediumship across the Atlantic between Brazil, the US, and Europe. The mediums' narratives of their therapeutic itineraries highlight a two-fold movement: through different therapeutic domains; and through the phenomenology of mediumistic trance, which is more sensorial, imaginal, and affective, thus, entailing multi-sensory therapeutic images arising from the movement between states mobilizing transformative experiences.

Transnational Movement across Therapeutic Cultures

The Vale do Amanhecer was founded in 1959 by Neiva Chaves Zelaya, the first woman driving a truck in Brazil during the construction of the new capital who then, through spontaneous mediumistic phenomena, became known as the clairvoyant Tia Neiva (Aunt Neiva). The Vale do Amanhecer itself became a renowned spiritualist town near Brasília, counting other 1200 temples in Brazil and around the world. In the last two decades, the Vale has experienced a transnational spread beyond Brazil featuring the growth of many temples throughout the Americas and across the Atlantic, namely in Brazil, Bolivia, Guyana, Trinidad and Tobago, Guinea-Bissau, Japan, the United States, Portugal, the United Kingdom, Germany, Switzerland, Italy, and Spain.

Working as “spiritual emergency units”, the temples of the Amanhecer offer a great variety of healing rituals free of charge that are conceived as complementary to biomedical treatments, and often involve learning mediumistic trance and spiritual healing as part of the therapeutic treatment. Mediums volunteer in their mediumistic practice to help spirits entrapped on earth after death affecting humans, to move on to the spirit worlds. And they do so through the help of spirit guides such as *pretos velhos* (African slaves), *caboclos* (Amerindians), *médicos de cura* (doctors), gypsies, ministers, princesses, knights, among others. Since mediumistic practice is understood as a voluntary charitable work it is kept separate from the profession-

al life that mediums carry out besides the Vale, which is as heterogeneous as it is the social composition of members of each temple. Patients arrive from the many walks of life, in search for assistance for health, emotional, or material matters, and participate in a series of rituals. Some patients are advised about the need to develop their mediumship, and those who decide to do so, undergo a training known as “mediumistic development”, in which they learn to become aware of and control mediumistic phenomena, and eventually become initiated.

In the temples in Brazil, most of my interlocutors’ narratives, seemed to show a trajectory through different religions before arriving in the Vale and developing mediumship—such as Catholicism or other mediumistic religions (Afro-Brazilian and Kardecist Spiritism)—in search of healing or a closer and unmediated encounter with the divine, God, or spirits.

In the temples in Europe, rituals are performed and attended mostly by local mediums and patients rather than Brazilians migrated abroad. Their experiences are primarily marked by a movement in search of healing across a network of holistic therapies.

In Portugal, there are 16 temples, with the first one founded in Porto in year 2000. The temples in Lisbon have Brazilian leaders who settled in Portugal for over a decade, whilst most members and visitors are Portuguese, with some Brazilians occasionally participating while temporarily residing in the capital. Most temples in Portugal, however, are lead and attended by Portuguese mediums and patients. The largest one, the Temple Juaçã do Amanhecer in Porto, counts 2.500 people who developed their mediumship there with 1.400 mediums participating in the temple more or less regularly. With rituals held three times a week, this temple may be attended by an average of 70 mediums and 50 patients per day. As the temple president notes, the number of new patients increased particularly after the pandemic closures of 2020-2021.

In a doctrine founded by a Brazilian woman, Tia Neiva, in which temple leaders are male mediums, interestingly, the Vale do Amanhecer arrived in Portugal through another woman known as Lindinha. Lindinha, a Portuguese healer who travelled to Brazil in 2000, became initiated in the Vale do Amanhecer and when back in Porto she prepared local practitioners in her home, who then became leaders of the main temples in Porto, from which the other temples originated. Her experience echoes that of Portuguese women who had a key role in the spread of Afro-Brazilian religions in Portugal since civil and religious freedom in 1974 by migrating to Brazil

to be initiated and assisting people upon return opening the first *terreiros* (SARAIVA 2011: 58). Thus, the Vale do Amanhecer and Afro-Brazilian religions share this gender peculiarity in their transnational movement along with the increased emphasis on the therapeutic aspects that these practices have acquired in Portugal. In fact, Saraiva notes how those who approached Afro-Brazilian religious in Portugal by means of new alternative therapies we attracted by new forms of perceiving the body that encompass the connection with the supernatural (SARAIVA 2011: 71). In the Vale do Amanhecer the emphasis on the therapeutic aspects is strengthened also by the incorporation of a particular category of spirits. Indeed, among the many categories of spirit guides manifesting in the Vale's rituals in the temples of Portugal, the only spirits manifesting as Portuguese are those of local doctors renowned in Portuguese culture for their miracles, or contribution to social medicine and charitable work, such as: Dr José Tomás de Sousa Martins (1843-1897), Dr Alfredo da Costa (1859-1910), and the Nobel Prize neurosurgeon Dr António Egas Moniz (1874-1955). According to the Adjunto Juaçã Mestre Alexandre, president of the temple of Porto, when they began to hold rituals people had a sort of apprehension over a Brazilian doctrine, whereas talking about complementary therapies has recently become more accepted with the hospital in Porto experimenting with complementary reiki sessions. Therefore, it is not unusual to find medical professionals among the members of the temple. Among the three temples in which I conducted fieldwork in Portugal, it became clear that the idea of the Vale as complementary therapy proposed by Tia Neiva, has taken a further configuration as a "therapeutic extension", or in the mediums' words: «where medicine does not reach, spiritual healing enters». Those patients who arrived in the temples in Portugal presenting cases of illness, anxiety, mental disorders, and then decided to develop their mediumship in the Vale, still continue their treatment in biomedicine. Mediums described both trance and healing as shared processes between humans and spirits. Healing, as pointed out by the Adjunto Onan Mestre Hugo, an instructor in the mediumistic development, depends 50% on the spiritual intervention and 50% on the disposition to be healed: «we don't heal anyone here, we promote self-healing. What does self-healing mean? It's when you find yourself». Trance is also described as a collaborative process between medium and spirit: the medium has to trigger movement, so that the energy can then move the medium.

In Italy, there are three temples both led and attended by Italians in the local language. They are located in the North, Centre, and South of the

country, with plans to open other two in other regions to cater those mediums who are travelling weekly the one in Veneto. The temple in Veneto was indeed the first one to be founded in the country in 2016 by an Italian practitioner who was initiated in Brazil. With the help of mediums travelling from Brazil, he prepared Italian practitioners to develop mediumistic trance and conduct healing rituals for local attendees. Between 2017 and 2022 over 150 Italian mediums from the three temples had been initiated. Among these, some were connected through Catholic pilgrimages to Medjugorje, or spiritual journeys to Brazil. Since the Vale doesn't allow mediums proselytizing, many arrived by word of mouth of friends who attended rituals either through their therapeutic trajectories or as practitioners in the network of holistic therapies, or energy healing, such as: reiki, pranic healing, biotransenergetics, shiatsu, naturopathy, counselling, hypnotic regressions, or shamanic retreats. It is indeed not infrequent that practitioners in these fields may suggest to their patients to go and get a spiritual cleansing in the Vale do Amanhecer. Even the mediums' narratives of their past experiences often show shared references of key practitioners in these therapies (for instance, by having attended the same workshops), whose names are also renowned among practitioners of Afro-Brazilian religions in Italy, configuring this network as a common ground for the spread of transnational Brazilian religions in the country.

In the United States, there are five temples of the Amanhecer: in Atlanta GE—where the first temple was founded in 2000—Framingham MA, Royalston MA, Newark NJ, and Miami FL. After the one in Atlanta, the temple in Framingham, which was founded in 2010, was key to the development of other temples, with small groups of its members moving to other localities and developing new mediums: firstly in Royalston, then in Newark in 2021 and Miami in 2022. I have conducted fieldwork in the temples of Framingham and Newark that are set in Brazilian neighbourhoods, and—consistently with what Vásquez and Alves (2013) encountered in the temple in Atlanta, Georgia—are attended by the Brazilian immigrant community. Thus, rituals are held in Portuguese and are attended by around 40 Brazilian mediums with around 10 patients per day some of which are Americans. Differently from the temples Europe that are set in industrial or residential areas in the outskirts of towns, these temples are visible along commercial streets in town centres besides Brazilian shops and restaurants. Two factors are determining whether the temple members abroad are Brazilian migrants or locals: the use of local language in rituals and the role of presidents of the temple as cultural and linguistic mediators. Whilst the

language used in rituals may represent a barrier according to American patients, Brazilian mediums think there is also a cultural barrier that prevent Americans to begin the mediumistic development: firstly, the difficulty in incorporating spirits that manifest with Brazilian cultural traits (*pretos velhos* and *caboclos*); and secondly, the idea of committing oneself to a single spiritual practice, and so interrupting their movement across different spiritual groups. As the Adjunto Arajá, president of the temple of Framingham noted, however, Americans seems to be less interested in the translation of a message by a spirit guide than they are in the sensation of balance they may achieve in rituals, «what matters to them is feeling».

Most Brazilian mediums in these temples have encountered the Vale do Amanhecer and developed their mediumship in the US. In Newark in particular, the Brazilian mediums I spoke with had a background in Kardecist Spiritism and attended local centres in the area, then came to know the temple in Framingham by word of mouth of relatives or friends. These two temples are in fact situated in contexts of co-presence with other Brazilian religions, such as Umbanda, Kardecism, and Brazilian Evangelical Churches. The temple of Newark, is a peculiar case as it was opened in a building that hosts also an Evangelical Church and a Spiritist Centre that offers meetings, passes, and spiritual surgeries. The mediums tell that the building was a former brothel, and the Temple of the Vale is set in its former gambling room. Thus, they associate the presence of multiple spiritual centres, to the spiritual evolution of the place through the release of disincarnated spirits inhabiting the premises. This co-presence has triggered a form of healing cooperation with patients and spirits moving from one centre to the other. Indeed, according to mediums, patients attending the meetings of the Kardecist centre, may then enter the temple of the Vale and pass in rituals, as much as spirits that cannot be released by the Church or the Kardecist practice of *mesa branca*, may be incorporated by mediums in the Vale and released in specific rituals of disobsession such as the *mesa evangélica*. Similarly, to the temples in Italy and Portugal, also in the US the motivations that lead people to attend spiritual healing rituals besides relational matters include anxiety, depression, abuse, and addictions, as it will be discussed through the cases presented in the next section. The purpose here has been to focus on how this transnational movement of people and practices of the Vale do Amanhecer is shaping new geographies and configurations of spiritual healing: whether through an understanding of spiritual healing in the Vale as a therapeutic extension in the case of Portugal; or as inserted in a network of holistic therapies in Italy; or in a context of

healing cooperation in the US. Therefore, my point is that the transnationalization of the Vale do Amanhecer, should be analysed not only in terms of religious pluralism, but also in relation to the therapeutic cultures that circulate in other countries in which the Vale is expanding.

Being moved by Spiritual Healing: Multi-sensory Therapeutic Images and the Phenomenology of Mediumistic Trance

My second purpose is to deepen the aspect of the phenomenology of trance, and its therapeutic relevance. Therefore, along with moving transnationally and between different therapeutic domains, I am going to delve into another kind of movement in the therapeutic itinerary, which is sensorial, imaginal, and affective in the sense of being moved by spirits, and is the outcome of the experience of learning the practice of mediumistic trance. The participants' narratives of their experiences emphasised the importance of the concepts of "movement" and "substance" in articulating experiences of illness and healing, and a prevalence of multi-sensory images in their experiences of mediumistic trance that were deemed to be relevant by participants in their therapeutic processes.

As an ethnographic category in use in the Vale do Amanhecer and shared with other Brazilian mediumistic religions, the term "trance" is used by mediums to describe a mediumistic state of consciousness that may involve different gradients of awareness in the communication with spirits. The Vale develops two types of mediumistic trance: conscious and semi-conscious trance, with the latter entailing the incorporation of spirits. These states of awareness, although variable in their intensity even within the single trance event in ritual, are commonly used to define the type of mediumship one could develop in the Vale. That of *apará*, the medium incorporating spirits in a "semi-conscious trance", and the *doutrinador*, a state of full awareness described as an "expanded consciousness" that allows the medium to control and indoctrinate the spirits incorporated by the medium *apará*.

Mediumship in the Vale differs in many ways from the European or Anglo-Saxon manifestations of mediumship as "speaking with the dead" or "psychic phenomena", so as to embrace the dimension of healing. Brazilians understand their practice in other countries, also as a way to reframe the concept of mediumship and the role of a medium in terms of healing, spiritual evolution and free service to others. Mediumship is also conceived

not as a property of particularly gifted individuals but as being a substance produced by the human body, and so it could be potentially developed by anyone. When this substance is produced in excess it may cause disturbances, unbalance, illness, or attract obsessing disincarnated spirits that may affect the person. Therefore “disobsessive healing” as practiced in the Vale restores balance by releasing these spirits to the spirit worlds, cleansing the body in its different dimensions.

Elsewhere (PIERINI 2016a, 2020), I have argued that these mediumistic states of consciousness are learned in the Vale through an education of perception, an “enskillment” (INGOLD 2000) that draws upon sensing and feeling. In other words, mediumistic development entails learning a specific mode of knowing in which the cognitive, the bodily and the affective dimensions interweave (PIERINI 2016b). For the purpose of this discussion, I will now explore the role of multi-sensory images spontaneously arising from mediumistic trance states in a medium in development for therapeutic purposes. And so, through a comparison with other mediums’ experiences I will unpack my proposal of the use of term “trance-formative therapeutic experiences” in the light of a sensory ethnography of healing.

Mila, is the pseudonym I use for an Italian woman who was in the process of developing her mediumship in a temple of the Vale in Italy and was then initiated. She decided to attend rituals as a patient following what she described as a “cosmic cry” that she felt within as a result of a combination of health conditions, such as a diagnosed “chronic cystitis”, an early menopause, and an intense and debilitating fatigue with diffused pains, which did not find a medical diagnosis. Whilst these conditions were affecting her daily life, at night her sleep would be regularly interrupted by nightmares. After several types of treatments through biomedicine, as well as homeopathy and acupuncture, she attended rituals as a patient in a temple of the Vale. The spirit guides pointed to an unbalance in her mediumship—that is, she was producing mediumistic force in excess—and thus she needed to develop her mediumship. She took the advice and immediately began the process of mediumistic development, as a medium *apará* learning to incorporate spirits in a semiconscious trance.

The idea of movement permeates the mediums’ descriptions of incorporations, in terms of a collaborative co-production of movement between spirit and medium. In Mila’s words, she felt:

... this sensation of a pillar of fire rising from the low abdomen to the head, and to feel that you are not acting on your own will, it’s beautiful! In those

moments, you feel a particular transportation that can be made of emotion, made of a precise sensation, but in those moments you feel that it isn't you who is doing it voluntarily, but you are in the middle of a collaborative play between yourself and the entity that is acting... Certainly the more you work and the more this thing comes out, [...] there are moments in which you feel... as something is happening: a movement, heat, a force, a vision is happening, any message, let's say, that is no longer voluntary. There are precise moments in which this is strongly perceived.

She felt this heat arising from the lower abdomen, a part she identified as the site of her "targeted" organs. Then she described the images she saw while incorporating her spirit guide in trance, working in a ritual with another medium: a rose, water, and a road. The first image, a pink rose with many petals—she said—was an element manifesting several times as an identification of her spirit guide, as she often sees her spirit guide in a pink dress. In her words:

Then a very crystalline form of water arrived, I saw it flowing sideways, as if it had a very lateral perspective, a very particular thing because I saw the channels intersecting, like seeing just water flowing into other water. As the third next image, it came a very linear country road with a couple of turns, however, it was a very graphic image, with this sand, with very small pebbles, a sand that was not pure white but a cream colour... These images [...] continued to be inside me in a very clear form for days and days... and reappeared to me all the time. One very particular thing, is that I knew that they had a sense of position, that is: the rose that appeared first was on my right side, the water was central and the road was on the left.

She then interpreted the fact that two days later her period reappeared after two years of menopause as the action of these images that «have moved something within» her body. This occurrence coincided with the day of Yemanjá, the Brazilian deity of the waters. She understood waters and flow in relation to what she called her «pathology of stagnating waters», namely early menopause and chronic cystitis, a condition that she associated to the difficulty in maintaining the right balance between oneself and the others, without overstepping boundaries, and so to the need to become aware of one's individuality. Water was then linked to letting everything flow, without judgement or self-judgement. She envisioned a therapy, that moved beyond both the mental and unconscious structures, that draws upon energy, entailing flowing without fear of change. But what distinguishes healing in the Vale from other medical, energetic or holistic therapies that she had experienced before? «They all offered a space where one feels she is being taken care»—she said—«we need physicality, connection through the body, through images, through sounds, but in the Vale you are not dealing

with a therapist with whom you can exchange experiences and knowledge; the fact of being able to speak directly with a higher entity, that gives you a personal message, is something incredibly powerful».

The value of the presence of spirit guides was also remarked by other mediums transversally between Europe, the US, Brazil. It is their tangible, physical experience, the way they gain form through incorporation that grants the spirits' presence in one's therapeutic process. In observing how the Brazilian mediums visiting the temples in Italy were incorporating spiritual entities Mila said that «it is as if in each of their cells there were movement, they don't have any kind of judgement or shame in expressing what moves through within. It's a movement of the whole body, the voice, the whole being, it becomes pure heat that is expressed».

Another woman in Italy, Anna (pseudonym), suffered of anxiety after a period of crisis in her job. When she began to develop her mediumship, she was learning to incorporate her spirit guide, a *preta velha*, and while in a mediumistic trance the image of a light feather emerged to her "inner eye" prompting a feeling of peace and lightness. According to Anna, this image corresponded both to a manifestation of her *preta velha*, and to her own need of letting go of the tensions in a moment of crises and letting life flow with lightness.

Carla (pseudonym), a Brazilian woman who moved to the US fifteen years earlier, suffered from depression and anxiety following abuses. She experienced different therapies such as psychotherapy, parapsychology, psychodrama, and she attended Catholic groups. Later on, in the US, she encountered the temple of the Vale. When she began to develop her mediumship, she trusted her phenomenon of incorporation as she felt a transformation in her bodily feelings, posture and voice that led her to distinguish herself from spirits. In particular, she was able to release the excessive tensions during the incorporation of suffering spirits dismantling layers of heaviness, breaking a shell, so she could discern and know her self. She then wondered if the suicidal thoughts she had in the past had been hers or those of a spirit attached to her. Meanwhile she had been working parallelly with a Brazilian psychotherapist with whom she could discuss also Spiritist matters, as he was open to an approach that encompassed psychological and spiritual treatments. Through psychotherapy she could work on herself "as a person in relation to society" and discern this person from the child she was when she went through traumatic experiences. Through her mediumship she had learned to discern herself from suffering spirits

that may affect her emotions and thoughts, gaining clarity and certainty in her thoughts and decisions. She understood these treatments to be distinct in their effects yet complementary in their purpose. Discernment in her case, allowed for a multi-perspective forging of the self as emplaced. While she regularly continues her practice in the Vale do Amanhecer in the US, she occasionally travels to Brazil to participate in major ritual in temples of the Vale near her place of birth.

Cleide (pseudonym), a woman who was developing mediumship in Brazil, arrived in the Vale with breathing problems due to tuberculosis, which had left her six months in bed with a lung injury, and she was in a waiting list for a major surgery. She also suffered from anxiety accompanied by tachycardia following an abusive relationship. While being under biomedical treatment she also sought support in meditation practices such as the Hawaiian Ho'oponopono and techniques of Harmonic Resonance taught by Hélio Couto. Although her background was Catholic, before her illness she had no experience of spiritual or even Spiritist practices. When sought assistance in the Vale she has chosen to develop her mediumship. While learning mediumistic trance she felt «an opening, as if it were an emotion of fulfilment... pleasure... expansion» and though this opening she was able to see lights and images, and to hear a voice, not through her eyes or ears but as an emotion, and so she let this emotion and images guide her. She said that through learning to “*entregar-se*”, that is to yield or give herself in to her spirit guides as an instrument for spirits to heal the others, she felt peace, release, and eventually experienced healing as her breathing improved and her pneumologist suspended both her operation and the treatment with inhalers. She eventually moved to live in the main temple in Brasília with her children who also began to develop their mediumship.

This transnational comparison of therapeutic experiences shows how the mediumistic practice of the Vale do Amanhecer may be considered to some extent to be a “portable practice” with a “transposable message” in Csordas’ sense, consisting of «rites that can be easily learned and require a little esoteric knowledge» (CSORDAS 2009: 4). However, differently from the feature of a portable practice as described by Csordas—namely, “that can be performed without commitment to an elaborate and or institutional apparatus» (*ibidem*)—these experiences implied a long-term commitment cultivated through a learning process that eventually led these mediums to an initiation.

Trance-Formative Therapeutic Experience

Going back to Mila's training in learning mediumistic trance, she said: «we can experience mediumistic development classes as words that flow, or as formative experiences». I therefore use the term “trance-formative therapeutic experiences” to address the therapeutic aspects of learning trance, tackling the processual character of these experiences; treating them not as a one-off event, but in a broader perspective of a practice in development, implying long-term commitment and responsibility, growing into something along time, re-shaping bodies and selves, the effect of which expands beyond the single occurrence of a mediumistic trance state in a ritual. I am pointing to a process which is “incremental”, in the sense that Csordas intended as a re-orientation of somatic attention (CSORDAS 1994: 67) and therefore differs, as noted by Strathern and Stewart, from what may be called “miraculous healing” (STRATHERN, STEWART 1999: 130).

An illness that according to the patient seems to still be invisible to biomedicine—such as Mila's chronic disease—is made visible by spirits by being acknowledged and providing a spiritual aetiology for that illness (that is, being due to the action of a spirit or an undeveloped mediumship). Then, multi-sensory images in trance (like the waters, the feather, and so on) are considered by these mediums to evoke a therapeutic pathway. These images, although sudden in their manifestation to the medium's awareness, are said to continue to work within the body as multi-sensory images. Which brings me again to the idea of “imaginal performances” in charismatic ritual healing proposed by Csordas, and how these sequences of revelatory images, or diagnostic images, may enhance the patients' disposition to be healed (ivi: 103): «imaginal performance is a bodily practice insofar as it engages multiple sensory modalities» that constitutes healing as real (*ibid.*: 141).

The images emerging from these mediums' experiences are not just visual, but they are corporeal in that they are accompanied by emotions, feelings and sensations. They do not just represent movement, as they are images in motion rather than static; they arise from movement between states and they continue to move through the body even after the mediumistic event mobilizing somatic transformative experiences, shifting the somatic attention and the sense of self, and so they may be conceived as therapeutic.

Roger Canals proposes a perspective that prioritizes a performative over a representational paradigm when addressing images (CANALS 2023).

He refers to a project on “therapeutic images” designed for neurostimulation by a company in Barcelona to address cognitive disorders and mobility problems. These therapeutic images, used in several health centres, are projected in the room of patients offering an immersive sensory and emotional experience. Examining their therapeutic action, he emphasizes their transformative action—similarly to religious images—for their «ability of intervening in the world and altering it by producing a sense of presence» (*ibid.*: 258). Whereas, the representational paradigm is driven by referentiality and mimesis, creating a separation between images and the world.

Images, as “vital signs” (MITCHELL 2004: 6), do not reflect the world but form a part of it and transform it. The representative function that certain images bear is inseparable from their value as social agents. The case of these therapeutic images is an extreme example of the performative dimension of images and the limitations of the representational paradigm to which I refer here. It is clear that the objective of this program of visual experiences is not to denote the “real” world but to intervene in it... Therapeutic images are actions, not representations (CANALS 2023: 253).

In a similar vein, although from a somatically-oriented perspective, Paola Esposito (forthcoming) moves away from the idea of “representation” in addressing the images, or «“imaginary constructions” of the body emerged through a butoh style somatic attention». In learning Butoh dance—a Japanese genre practiced transnationally—she cultivated the skills of “somatic attentiveness” that she used to manage chronic pain. Differently from the therapeutic images designed for patients and projected in health centres discussed above, these images are yielded by kinaesthesia and appear from the inside to her “mind eye” not only releasing tensions but also replacing the “diseased images of the body”:

This process, that I named somatic morphogenesis, coincides with a re-imagining the body “from the inside”, whereby spontaneous images were not anchored onto optical visibility, as with mirror images, but emerged through reflexive engagement with its somatic unfolding, as mediated by proprioceptively and interoceptively inflected kinaesthesia. In my auto-praxeographic account, these were experiential, multimodal images that brought the world back into the body interior (ESPOSITO, forthcoming).

These images engendered by skilled somatic attentiveness speak directly to what I am describing. In the case of dance, the somatic dimension permeates the studies in this field. In the case of approaches to spirit possession, however, classical psychological anthropology and more recent cognitive approaches have disentangled conceptual categories from the perceptual dimension (ESPÍRITO SANTO, HALLOY 2010) often resulting in interpreta-

tions of these phenomena as projections, representations, or mirrors, of desires not recognized by the individual or even psychopathologies (PRESSEL 1974; BOURGUIGNON 1989) as if these phenomena were to involve a disembodied mind while the body is taken over by a spirit. It is indeed the mind-body divide that has driven such interpretations. A shift from a representational to a performative paradigm may, thus, be particularly productive in this field, for accounts of mediumistic trance are deeply sensorial, grounded in bodily feelings intertwined with imagination that shape therapeutic experiences.

Alternative and complementary therapies, have been approached by Ruth Barcan as “sensual practices” that may focus on particular senses—touch for massage; smell for aromatherapy...—or on intersensory or synaesthetic experience: «sensory experience is conceived of as a pathway to self-knowledge, and the senses frequently operate as “ways into” different aspects of the body and emotional life, opening up new ways of knowing the body. Practitioners see with their hands, feel with their eyes, listen with their intuition» (BARCAN 2011: ch. 5).

Similarly, mediums in the Vale learn mediumistic ways of knowing. While learning is multisensorial, synaesthetic sensory experiences underpin mediums narratives of trance. Mila’s narrative describes an interplay between thermoception (the feeling of heat in her body) and extended vision (images of colours). She considered the predominance of vision in her experience to be related to her work as a skilled graphic designer. Moreover, these images are shared, they are intersubjectively constituted, they may be engendered or apply to both the medium and the patient, and as such, they may be equally interpreted by both. What these experiences tell us, however, is that we cannot consider just the single senses. Spiritual healing—as Barcan reminds us—is a form of «embodied knowing, irreducible to vision, or even vision supplemented or accompanied by other senses», it is inter-sensoriality, despite our awareness of it (BARCAN 2011: ch. 2). In Mila’s narrative images of waters acted in moving the substances perceived as being stagnant in her body. Developing mediumship is a way to put substances into motion, to regulate their production and balance. Here, balance should be intended in the terms advocated by Elisabeth Hsu, when she examines notions of the body in balance, in practices of humoral medicine, namely, not as *equilibrium* but in a sense of «everchanging fluid interdependencies», «in the sense of moderation (as opposed to an oscillation between extremes)» (HSU 2013). Therefore, mediums’ experiences mobilize ideas of lightness, letting go, balance, presence, movement, and

mostly the idea of “*entregar-se*”, that is “yielding”, or “giving oneself”. Mediumistic development implies learning to yield to spirits while controlling them. Yet, there is also a sort of resistance of non-Brazilian mediums in development to yield, as they may excessively hold on to conscious control over the phenomenon; hence, balance again plays a key role in a co-production of movement.

Moving through and between therapies already puts something into motion, but being moved from within—be it through emotions, sensations or multisensory images—is linked to experiences of surrendering and letting go that trigger openness to transformation. In other words, moving mediumistic substances, moving bodily fluids, having ones’ body moved by spirits and multisensory images, is attuning oneself to a new rhythm of life, as a reaction to the stagnation caused by, or even causing illness; opening up possibilities of change, of transformation, and in this case by means of trance, through a particular formative process, or trance-formation.

Spirit mediumship and possession are then something more than marginal practices depicted by the literature as some kind of pathology, representation of something else, or as phenomena belonging to some distant otherness. They are rather increasingly transnational, and so they should be considered along with contemporary therapeutic practices operating besides the biomedical field, in relation to both spiritual and therapeutic networks.

Acknowledgements

The research upon which this article is based is part of the Marie Skłodowska-Curie project *THE TRANCE-Transnational Healing: Therapeutic Trajectories in Spiritual Trance* undertaken between Sapienza University of Rome, Universidade Federal de Santa Catarina (PPGAS-UFSC), the School of Anthropology and Museum Ethnography at the University of Oxford, and CRIA/ISCTE Lisbon. This project has received funding from the European Union’s Horizon 2020 research and innovation programme under the Marie Skłodowska-Curie grant agreement No. 895395. I thank Pino Schirripa, Alessandro Lupo, Alberto Groisman, Vânia Zikan Cardoso, Ramon Sarró, Elisabeth Hsu, Paola Esposito, Eugenia Roussou, and Roger Canals. I thank the presidents and mediums of the temples of the Vale do Amanhecer for their contribution to this research. Earlier versions of this article have been presented at the EASA 2022 Conference in Belfast, the seminar of the Network for the Anthropology of Religion (CRIA), and the Brazil Seminar at Columbia University, New York.

Bibliography

- BARCAN R. (2011), *Complementary and Alternative Medicine: Bodies, Therapies, Senses*, Berg, London & New York, eBook.
- BOURGUIGNON E. (1989), *Multiple Personality, Possession Trance, and the Psychic Unity of Mankind*, "Ethos", Vol. 17(3): 371-384.
- BOWIE F. (2013), *Building Bridges, Crossing Boundaries: Towards a Methodology for the Study of the After-life, Mediumship, and Spiritual Beings*, "Journal of the American Academy of Religion", Vol. 81(3): 698-733.
- CARDEÑA E. (2009), *Beyond Plato? Toward a Science of Alterations of Consciousness*, pp. 305-322, in ROE C. A., KRAMER W., COLY L. (Eds.), *Utrecht II: Charting the Future of Parapsychology*, Parapsychology Foundation, New York.
- CANALS R. (2023), *Epilogue. Healing, Images, and Trust*, pp. 250-267, in PIERINI E., GROISMAN A., ESPÍRITO SANTO D. (Eds.), *Other Worlds, Other Bodies: Embodied Epistemologies and Ethnographies of Healing*, Berghahn, New York & Oxford.
- CSORDAS T. J. (1983), *The Rhetoric of Transformation in Ritual Healing*, "Culture, Medicine and Psychiatry" Vol. 7: 333-375.
- CSORDAS T. J. (1994), *The Sacred Self: A Cultural Phenomenology of Charismatic Healing*, University of California Press, Berkeley & Los Angeles.
- CSORDAS T. J. (ed) (2009), *Transnational Transcendence: Essays on Religion and Globalization*, University of California Press, Berkeley and London.
- ESPÍRITO SANTO D., HALLOY A., LIÉNARD P., COHEN E. (2010), *Around The Mind Possessed: The Cognition of Spirit Possession in an Afro-Brazilian Religious Tradition* by Emma Cohen, "Religion and Society: Advances in Research", Vol. 1: 164-176.
- ESPOSITO P. (forthcoming), *Reimagining the Body-With-Chronic Pain Through an 'Anthropology with Butoh Dance': From Bodily Hylomorphism to Somatic Morphogenesis*, in GATT C., LOOVERS P. (Eds.) *Beyond Perception: Correspondences with the work of Tim Ingold*, Routledge, London.
- FRIGERIO A. (1989), *Levels of Possession Awareness in Afro-Brazilian Religions*, "AASC Quarterly", Vol. 5(2-3): 5-12.
- GREENFIELD S. M. (2008), *Spirits with Scalpels: The Cultural Biology of Religious Healing in Brazil*, Left Coast Press, Walnut Creek.
- HALPERIN D. (1995), *Memory and "Consciousness" in an Evolving Brazilian Possession Religion*, "Anthropology of Consciousness", Vol. 6(4): 1-17.
- HÖRST V., GERRETS R., SCHIRRIPIA P. (2017), *Revisiting Medical Pluralism*, "L'Uomo. Società Tradizione Sviluppo", Vol. 1: 7-26.
- HSU E. (2008), *Medical Pluralism*, pp. 316-321, in HEGGENHOUGEN K., QUAH S. (Eds.), *International Encyclopaedia of Public Health*, Academic Press, San Diego.
- HSU E. (2013), *What Next? Balance in Medical Practice and the Medico-moral Nexus of Moderation*, pp. 259-280, in HORDEN P., HSU E. (Eds.), *The Body in Balance: Humoral Medicines in Balance*, Berghahn, New York & Oxford.
- HÜWELMEIER G., KRAUSE K. (Eds.) (2009), *Traveling Spirits: Migrants, Markets and Mobilities*, Routledge, London.
- INGOLD T. (2000), *The Perception of the Environment: Essays on Livelihood, Dwelling and Skill*, Routledge, London.

- LESLIE C. (1980), *Medical Pluralism in World Perspective*, "Social Science and Medicine", Vol. 14: 191-195.
- MITCHELL W. J. T. (2004), *What Do Pictures Want?: The Lives and Loves of Images*, University of Chicago Press, Chicago.
- MOREIRA-ALMEIDA A., LOTUFO NETO F., KOENIG H. G. (2006), *Religiousness and Mental Health: A Review*, "Revista Brasileira de Psiquiatria", Vol. 28(3): 242-250.
- MOREIRA-ALMEIDA A., SHARMA A., VAN RENSBURG B. J., VERHAGEN P. J., COOK C. H. (2015), *WPA Position Statement on Spirituality and Religion in Psychiatry*, World Psychiatric Association.
- PARKIN D. (2013), *Medical Crises and Therapeutic Talk*, "Anthropology & Medicine", Vol. 20(2): 124-141.
- PENKALA-GAWĘCKA D., RAJTAR M. (2016), *Introduction to the Special Issue 'Medical Pluralism and Beyond'*, "Anthropology & Medicine", Vol. 23(2): 129-134.
- PIERINI E. (2016a), *Becoming a Spirit Mediums: Initiatory Learning and the Self in the Vale do Amanhecer*, "Ethnos: Journal of Anthropology", Vol. 81(2): 290-314.
- PIERINI E. (2016b), *Embodied Encounters: Ethnographic Knowledge, Emotion and Senses in the Vale do Amanhecer's Spirit Mediumship*, "Journal for the Study of Religious Experience", Vol. 2: 25-49.
- PIERINI E. (2020), *Jaguars of the Dawn: Spirit Mediumship in the Brazilian Vale do Amanhecer*, Berghahn, New York & Oxford.
- PIERINI E., GROISMAN A., ESPÍRITO SANTO D. (2023), *Other Worlds, Other Bodies: Embodied Epistemologies and Ethnographies of Healing*, Berghahn, New York & Oxford.
- PRESSEL E. (1974), *Umbanda, Trance and Possession in São Paulo, Brazil*, pp. 113-126, in GOODMAN, F., HENNY J. H., PRESSEL E. (Eds.), *Trance, Healing and Hallucination: Three Fields of Studies in Religious Experience*, John Wiley & Sons, New York.
- RABELO M. (1993), *Religião e Cura: Algumas Reflexões sobre a Experiência Religiosa das Classes Populares Urbanas*, "Caderno de Saúde Pública", Vol. 9(3): 316-325.
- RABELO M. (2007), *Religião e a Transformação da Experiência: Notas sobre o Estudo das Práticas Terapêuticas nos Espaços Religiosos*, "Ilha: Revista de Antropologia", Vol. 7: 125-145.
- ROCHA C. (2017), *John of God: The Globalization of Brazilian Faith Healing*, Oxford University Press, Oxford.
- ROCHA C., VÁSQUEZ M. (Eds.) (2013), *The Diaspora of Brazilian Religions*, Brill, Leiden.
- STRATHERN A., STEWART P. (1999), *Curing and Healing: Medical Anthropology in Global Perspective*, Carolina Academic Press, Durham, N.C.
- SARAIVA C. (2011), *Energias e Curas: Umbanda em Portugal*, "Revista Pós Ciências Sociais", Vol. 8(16): 55-76.
- SARRÓ R., BLANES R. (2009), *Prophetic Diasporas: Moving Religion across the Lusophone Atlantic*, "African Diaspora", Vol. 2(1): 52-72.
- VAN DE KAMP L. (2016), *Introduction. Religious Circulation in Transatlantic Africa-Special Issue*, "African Diaspora", Vol. 9: 1-13.
- VÁSQUEZ M. A., ALVES J. C. S. (2013), *The Valley of Dawn in Atlanta, Georgia: Negotiating Incorporation and Gender Identity in the Diaspora*, pp. 313-37, in ROCHA C., VÁSQUEZ M. A. (Eds.), *The Diaspora of Brazilian Religions*, Brill, Leiden.
- ZILLINGER M., BEHREND H., DRESCHKE A. (Eds.) (2014), *Trance Mediums and New Media: Spirit Possession in the Age of Technical Reproduction*, Fordham University Press, New York.

Scheda sull'Autrice

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Abstract

Trance-formative therapeutic experiences. Moving and being moved by spiritual healing across the Atlantic

Spirit mediumship and possession are often conceptualized as being individual psychic phenomena or marginal practices belonging to some distant otherness, or even reduced to some kinds of pathological categories. However, besides spreading through transnational religions they are increasingly embedded in a growing network of therapeutic practices operating besides the biomedical field. One of such instances is the transnational spread of the Brazilian Christian Spiritualism of the Vale do Amanhecer (Valley of the Dawn) and the development of what mediums describe as “mediumistic trance”. By examining the experiences of people with chronic disease and anxiety learning spirit mediumship across the Atlantic between Brazil, the US, and Europe, I will show how the mediums’ narratives of their therapeutic itineraries highlight a two-fold movement: through different therapeutic domains; and through the phenomenology of mediumistic trance, which is more sensorial, imaginal, and affective engendering multi-sensory therapeutic images arising from this experience. I therefore propose the notion of “trance-formative therapeutic experiences” to analyse how mediumistic trance is learned for therapeutic purposes fostering a transformation.

Keywords: mediumistic trance, healing, transnationalism, therapeutic images, Valley of the Dawn

Resumen

Experiencias terapéuticas trance-formativas. Moverse y ser movido por la sanación espiritual a través del Atlántico

La mediumnidad y la posesión han sido conceptualizadas como fenómenos psíquicos individuales o prácticas marginales pertenecientes a alguna otredad distante, o reducidas a algún tipo de categoría patológica. Sin embargo, además de difundirse a través

de religiones transnacionales, están cada vez más integrados en una creciente red de prácticas terapéuticas que operan fuera del campo biomédico. Un ejemplo de ello es la difusión transnacional del espiritualismo cristiano brasileño del Vale do Amanhecer (Valle del Amanecer) y el desarrollo de lo que los médiums describen como un “trance mediúmnico”. Al examinar las experiencias de personas con enfermedades crónicas y ansiedad que aprenden la mediumnidad espiritual a través del Atlántico entre Brasil, Estados Unidos y Europa, mostraré cómo las narrativas de los médiums relacionadas con sus trayectorias terapéuticas resaltan un movimiento dual: a través de diferentes dominios terapéuticos y a través de la fenomenología del trance mediúmnico más sensorial, imaginal y afectivo – generando imágenes terapéuticas multisensoriales que emergen de tal experiencia. Por lo tanto, propongo la noción de “Experiencias terapéuticas trance-formativas” para analizar cómo se aprende el trance mediúmnico con fines terapéuticos que promueven una transformación.

Palabras clave: trance mediúmnico, cuidado, transnacionalismo, imágenes terapéuticas, Vale do Amanhecer

Résumé

Expériences thérapeutiques transe-formatrices. Bouger et être ému par la guérison spirituelle outre-Atlantique

La médiumnité et la possession sont souvent conceptualisées comme des phénomènes psychiques individuels ou des pratiques marginales appartenant à une altérité lointaine, voire réduites à une sorte de catégorie pathologique. Cependant, en plus de se propager à travers les religions transnationales, elles sont de plus en plus intégrées dans un réseau croissant de pratiques thérapeutiques qui opèrent en dehors du domaine biomédical. Un tel exemple est la diffusion transnationale du spiritisme chrétien brésilien de la Vale do Amanhecer (Vallée de l’Aube) et le développement de ce que les médiums décrivent comme une « transe moyenne ». En examinant les expériences de personnes souffrant de maladies chroniques et d’anxiété apprenant la médiumnité spirituelle outre-Atlantique entre le Brésil, les États-Unis et l’Europe, je montrerai comment les récits de médiums liés à leurs parcours thérapeutiques mettent en évidence un double mouvement: à travers différents domaines thérapeutiques et à travers la phénoménologie de la transe médiumnique – plus sensorielle, imaginaire et affective – générant des images thérapeutiques multisensorielles qui émergent d’une telle expérience. Je propose donc la notion de “expériences thérapeutiques transe-formatrices” pour analyser comment la transe médiumnique est apprise à des fins thérapeutiques favorisant une transformation.

Mots-clés: transe médiumnique, soins, transnationalisme, images thérapeutiques, Vallée de l’Aube

