

# Shamans as Expert Voice Hearers

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### **Introduction:**

‘Voice hearers’ has become an important emancipatory consumer term for persons that have been diagnosed with experiencing auditory hallucinations ([www.intervoiceonline.org](http://www.intervoiceonline.org)). Voice hearers have often taken back their power, not by simply silencing the voices, but rather by establishing relationships with them. As a clinical psychologist working with voice hearers, I have had the privilege to present with an expert voice hearer. Our dialogue highlighted the parallels between voice hearers and shamans (Lambrecht & Lampshire, 2009). This paper is an extension of the dialogue.

The aim of this paper is to explore the relationship between voice hearing and shamanism. Bentall (2000) asked if there are any implications for parapsychologists concerning the research into psychotic symptoms. He reviews research into delusions and hallucinations that suggest biases in information processing and reasoning, as he claims is also evident in those that believe in paranormal phenomena. He is quick and right to state that this does not establish the non-veracity of some paranormal experiences, as only empirical research could establish this. In this paper, the suggestion is made that research into paranormal and altered states of consciousness could equally benefit theories and healing practices regarding voice hearing and other psychotic symptoms.

In this vein, a dimensional approach to voice hearing is presented as a model. Very intrusive and negative voices which are related to highly distressing, painful and fragmenting experiences during severe psychotic states are located on the extreme left side of the continuum. Such voice hearing is often related to early traumatic experiences (Read et al. 2001). The middle ground holds the non-distressing voice hearing that often occurs in 10% to 15% of the normal population, according to epidemiological studies (Summer et al, 2008). This middle ground also holds those voice hearers that have shifted from being the victims of voices to establishing a mastery of voices by working with the voices in a collaborative manner. In this middle ground the voices are generally experienced as annoying, helpful, even pleasant, and sometimes regarded with curiosity (Johns et al, 2002). The voices are

mostly either positive, mildly negative or neutral. This middle ground also refers to voices heard after a loss, for grieving spouses can have 'hallucinations' of the deceased that are soothing, and they are considered to be non-pathological (Grimby, 1998).

Importantly, the form of the auditory hallucination itself is no different for persons with schizophrenia, compared to those persons with dissociative disorder, or even compared to those non-patient voice hearers (Honig et al, 1998). Therefore psychopathology in itself cannot distinguish between various voices or auditory hallucinations. Voice hearing can be loud and vivid or quieter than real voices, irrespective of diagnostic status (Moritz & Larøi, 2008). In other words, the voices or auditory hallucinations occur with different intensities right across the spectrum.

I would like to propose to stretch the continuum further to the right side in order to also cover further ground that other cultures have held for eons, namely the effective voices. What is meant by 'effective voices' is that some voices become a source of specific and productive information and knowledge serving a person or a community. Shamans are a prime example of expert voice hearers in that they make use of effective voices to heal clients and serve their community. These effective voices are accessed during shamanic trance states. South African shamanism is applied in this exploration because the call or voice of the ancestors is a powerful defining factor of being a sangoma. I realise that especially for modern academic Western discourse this raises controversial issues concerning the limits of reality and epistemology.

Also, some voice hearers have battled courageously with voices that made powerful but ultimately ineffective claims. Voice hearers quite rightly may ask how are voices in a psychotic state, for example command hallucinations, to be differentiated from shamanic voices. These are important questions which in fact relate to certain relevant topics. Such topics include consideration of the historical and political factors affecting the shamans and their voices. Furthermore, shamanic initiation crises have been considered to be psychotic and dissociative, so this needs to be addressed. Furthermore, the criteria for effective voices will be explored. This dimensional model of voice hearing is not new, it is rather ancient and possibly offers some wisdom for us today.

### **Shamanic trance states and voices**

Voice hearing throughout the ages has been a part of the human experience, and the early hunter gatherer societies began to make use of it, often especially through one person in the tribe or group, namely the shaman. The shaman is culturally sanctioned to hear and work with voices and visions. The definition of a 'shaman' has been utilised by anthropologists to denote a specific group of healers in various cultures, societies and tribes, who have also been labelled as witchdoctors, magicians, sorcerers and seers. However, shamanism is ultimately defined not in terms of healing *per se* but in terms of a special interaction with spirits, either seen or heard. While some members of a tribe may be painfully or blissfully possessed by spirits, only a shaman has mastered the spirits, and can introduce these spirits to heal. An anthropologist with personal experience of shamanic practices, defines a shaman as "a man or woman who enters an altered state of consciousness - at will - to contact and utilise an ordinarily hidden reality in order to acquire knowledge, power, and to help other persons" (Harner, 1980, p. 25).

The centrality of trance states in relation to hearing voices in shamanism was certainly true in my own training as a South African shaman, namely a sangoma. In the name of postmodern positioning as an author of this text, it is necessary to state that I have had the privilege to be 'called'. I was traditionally trained and finally graduated as a sangoma, whilst also practicing as a clinical psychologist. Many shamans kindly supported my PhD on shamanic trance states. Equally, I have been privileged to work with many voice hearers both outside and within mental health services in both South Africa and New Zealand.

I consider hearing voices in shamanism to be closely associated with trance states. This is not dissimilar to findings that hearing voices, or auditory hallucinations in the psychiatric literature, may in fact be mainly based on dissociation (Moskowitz & Corstens, 2007). Such dissociations, often based on trauma, could be understood as producing 'uncontrolled trance states'. The shaman on the other hand dissociates in a controlled manner. Currently, there is a greater acknowledgement in the literature that hearing voices is not only negative or pathological (Beavan, 2007). The high prevalence of hearing of voices in the population makes it more difficult to claim it is only a pathological process.

The term 'hearing voices' is currently preferred and it is certainly far more advantageous compared to the term 'auditory hallucinations'. However, from a shamanic perspective it seems slightly 'dissociative' in that for shamans, voices are always an expression of beings, ancestors, spirits, elementals, angels, etc. Therefore shamans seek to relate and engage with ancestors or spirits as whole beings. In the text below references to hearing voices will at times be considered from a shamanic perspective, i.e. as ancestors and spirits that are heard, seen, and that at times talk through the body of the shaman, as in possession trance states.

In terms of hearing voices, many people in non-Western cultures maintain contact with their dead relatives or ancestors through trance states in which they converse with the voices of the departed (Steadman et al, 1996). In the South African context, shamans hear their ancestors in their head or from the outside, as well as offer their bodies to the ancestors so that they can use the shaman as an instrument, a voice to communicate with the community or the client. It is beyond this paper to address the specific cartography of the different shamanic trance states. It is however worth mentioning that the voices of the ancestors are heard during divination, are expressed through the shaman's body whilst dancing, and are seen and heard in dreams or visions (Lambrecht, 1998).

Historically and politically the shaman's relationship with voices has been repressed. Briefly, the stigmatisation of hearing voices specific to shamanism has a long and bloody history. The 'voice of psychiatry' in relation to hearing voices within Western contexts has its historical and political roots in the Christianity of the Middle Ages, in which the voices were related to demonic forces. (Randal, Geekie, Lambrecht, Taitimu, 2008). More recently, early psychoanalysis has pathologised cross-cultural differences (Walsh & Vaughn, 1993), and psychiatry has viewed the bizarre behaviour and symptoms of shamans during trance states as psychotic (Silverman, 1967, p.22). Shamans are seen as being schizoid, "switching into dissociative states and going into shamanic trances to try to put themselves together" (de Mause in Krippner, 2002, p. 966). Thus the shaman becomes "the mad other", and is thus excluded from the realm of expertise on consciousness.

However, ethnographic data from 437 societies world-wide reveal that trance-induced auditory and visual experiences or hallucinations are found in 89% of cultures

surveyed (Bourguignon, 1973). In conventional Western understanding, these hallucinations have been considered to be pathological or at least harmless cultural curiosities. However, such trance states, within their cultural and healing practices, are voluntary and experienced positively. Many cultures use various techniques as voluntary dissociative tools to induce specific altered states of consciousness (ASCs). For example, sensory deprivation, respiratory techniques, or certain herbal substances and drugs can all be forms of induction. These methods of dissociation are taught and practiced in order to provide the shaman's body with a vessel for the ancestral spirits to enter. In contrast, trauma, psychosis, or coma states could be considered pathological non-voluntary forms of induction (Vaitl et al, 2005).

### **Shamanic voices as psychotic entities and dissociative manoeuvres**

Lukoff (1988) notes that there are important overlaps when comparing psychosis, mania, and mystical states. While these states cannot be equated, transpersonal states of consciousness do seem to occur to some degree in certain mental disorders. In this regard, the psychologist Noll (1983) states that "devoid of personal experiences of ASCs, yet quite familiar with altered states of the diagnostic manual, the incredible sagas of the shamans must indeed seem psychotic to an interpreter who only considers experiences in an ordinary state of consciousness to be valid, mentally healthy phenomena" (Noll, 1983, p. 444). However, psychopathology could also be considered to be disturbed states of consciousness, which are uncontrolled or involuntary trances (Silverman, 1975). Peters & Price-Williams (1983) therefore reinterpret schizophrenia as an ASC with a negative outcome, namely an inability to control a state of consciousness. This is supported by Walsh's (1995) phenomenological comparison of psychotic and shamanic states, in which it becomes clear that lack of control and a high degree of psychic disorganisation is a characteristic of the psychotic state rather than the shamanic state.

During a shamanic initiation crisis, common for the shamanic journey, some shamanic trance states could be considered by psychiatry as psychotic states with extreme distress. In South African shamanism this initiation crisis or spiritual emergency is called the *ukuthwasa*. From a Western psychiatric standpoint, it is understandably difficult to distinguish between two forms of spirit possession, namely the *amafufunyana* and the *ukuthwasa*. Both these spirit possessions present with dissociation and psychotic symptoms and are very distressful experiences (Zabow,

2007). The sangoma would make that differential diagnosis most concisely. For example, in South Africa, the shamanic Zulu and Xhosa traditions differentiate clearly between *amafufunyana*, which is considered a spirit possession illness requiring healing, whilst the *ukuthwasa* as an initiation illness requires training (Krüger et al, 2007).

The 'call' of the ancestors, such a classical sangoma phrase, often emerges either through voices or through dreams of deceased relatives, dreams which are often interpreted by other shamans as being a sign or 'call' from the ancestors. Only in the *ukuthwasa* do the ancestor voices demand either training, or drive the person to seek out a teacher, as well as “filling” the person with strong and powerful dreams (Lambrecht, 1998). A common expression amongst South African shamans is that a sangoma through training becomes ‘a strong house of dreams’. Both categories would understandably from a Western psychiatric standpoint be considered to have psychotic symptoms, dominated by auditory hallucinations and social withdrawal, i.e. positive and negative symptoms of schizophrenia (Niehaus et al., 2004).

Further examples would be a Tamang shamanic apprentice in Nepal who is possessed by voices, will shake convulsively, be confused, not eat, have distorted visions, and seek solitude (Peters, 1987). In New Zealand, one *tohunga* or Maori healer considered persons with a diagnosis of schizophrenia in the following manner: “People diagnose it as that thing [schizophrenia], but we would say he was a divine healer. If I ask if a person has these things, what would you call them? We would say a healer. But they say sickness and diagnose.” (Taitimu, 2008, p. 34). Another *tohunga* who worked with a mental health service indicated that he often helped individuals with a diagnosis of schizophrenia to understand their experience as a gift (Taitimu, 2008).

Equally, a South African shaman or sangoma Stan whom I interviewed for my PhD stated that when "you get like that, you don't know that you get very sick. Where other people get put away in Sterkfontein [mental inpatient unit], these people are not sick, they just need to go to school. [...] They said I was crazy, some of the people told me I knocked people out." (Lambrecht, 1998, p. 362) Another shaman Obed noted that during his initiation illness or *ukuthwasa* that “I think I was nearly mentally disturbed." Lambrecht, 1998, p. 374). Credo Mutwa, a very important shaman in

South Africa, in his interview stated that a dissociative experience during a traumatic rape brought him to his aunt for training (Lambrecht, 1998, p. 395).

In summary, modern Western discourse has described and analyzed shamanic behaviour during initiation in terms of acute schizophrenia (Silverman, 1967). As has already been stated, schizophrenia, as well as psychosis, are differentially diagnosed and distinguished from the initiation crisis by the South African shamans themselves (Ngubane, 1977). Furthermore, not all shamans experience a severe initiation crisis that includes psychotic elements. When the psychosis is present, it is short-lived, and seems unlikely to re-appear. Currently, both *amafufunyana* and *ukuthwasa* are considered to be culture specific disorders (Krüger et al, 2007)

It could also be argued that the *ukuthwasa* represents an example of a dissociative trance disorder (DSM IVTR). A dissociative trance may be considered to be an involuntary trance state or possession state which causes significant clinical distress and functional impairment. Furthermore, the social psychology theorist Spanos has argued that dissociative identity disorder and spirit possession are but variants of complex social roles which are enacted by a person within a religious context (possession) or in a secular one (dissociative identity disorder) in order to avoid the responsibility of certain roles (Cardena, 1992). Although a shamanic initiation illness has dissociative features, it cannot be reduced solely to a dissociative trance disorder, for shamans do not consider the shamanic crisis to be defined by functional impairment.

The reason for this is that central to the shamanic training as part of a developmental transformation, is that a shift occurs from being a victim of spirits at the beginning of the training programme to becoming a master of spirits. The shaman is the expert in engaging a meaningful and effective relationship with spirits. The shaman through the training supports the positive and effective relationship with spirit guides and shifts the quality of relationship with negative spirits or voices that could lead to pathological configurations (Lambrecht, 1998), so this becomes a less likely outcome. It is this journey of mastery that allows the shaman to heal themselves in their training in order to heal others by working within the spirit world. The shaman is the archetypal wounded healer.

One study (Hughes, 1992) specifically addresses the issue of special knowledge by comparing two groups, namely persons with dissociative identity disorder compared to persons in possession trance or channeling. Channeling is defined as a communication through a person from a source that claims to exist on another level of reality, and this definition would include classical mediumship, the communication with the departed in a possession trance state (Klimo, 1987, p. 2). Persons from both groups presented with the phenomena of dissociation, yet in this study the channelers did not present with the symptoms of dissociative fugue, depersonalisation disorder, somatization disorder, depression, borderline personality disorder or psychosis, which the dissociative identity disorder group did. As opposed to the persons suffering from dissociative identity disorder, the alternate identities of channelers claimed special knowledge which promoted spiritual teachings and philosophical discussions within their cultural context (Hughes, 1992).

During my own shamanic apprenticeship, I was told by my teacher that the pain would lessen as the relationship between the ancestral voices and the apprentice improves over time during the training. I recall asking my teacher, “How would I know whether the voices I heard are the ancestors or just me simply going mad?” “Ah that’s easy”, my teacher replied, “we test them”. The ‘true ancestral voices’ would be those that in front of others in the community are accurate, valid and reliable, for example, in finding herbs and lost cattle, or in diagnosing and healing illnesses. In other words, not all voices are equal. The community and the shamanic culture have means to ensure validity and reliability, testing for outcomes, such as during the graduation. This is not that different from the demand placed on clinical psychologists working with people who hear voices. They are expected to use psychological techniques and interventions that are evidence based and have good outcomes, for they are then generally considered to be reliable, valid and able to elicit healing.

Similarly, Debra Lampshire an expert voice hearer, tested her demanding and critical voices and found them lacking, i.e. they could not wash her dishes despite claiming to be very powerful. This awareness re-established her relationship with the voices and she took back her power, establishing a more equal and collaborative relationship with her voices (Lampshire, 2005).



### **The shamanic crisis: healing and mastering 'the call'**

Common to the shamanic journey is the shamanic crisis, which is generally understood as a developmental crisis, strongly grounded within shamanic worldview and practices (Eliade, 1964; Halifax, 1979). In alternative Western discourses this is similar to a spiritual emergency (Grof & Grof, 1990), 'mystical experience with psychotic features' (Lukoff, 1985), or part of the 'hero's journey' (Campbell, 1968). When resolution of the crisis occurs, the person appears somehow strengthened by the experience, and goes on to become a healer and contribute to their community. Two types of diagnostic error are applicable in the analysis of spiritual disciplines and related shamanic initiation crises, namely reductionist and elevationist errors (Wilber, 1983).

The equation of shamanic initiation crises with psychopathology, as already discussed, is a reductionist error. The elevationist error is one in which psychopathological processes such as psychosis or residual psychological conflicts are interpreted as being expressions of the spiritual. To a certain degree it could be argued that this occurs in Laing's later writings (Laing 1972). In terms of shamanism, the elevationist error is evident in glorifying shamanism and in minimising any residual psychological conflict emerging during or after the initiation crisis, as is evident in some of Kalweit's writings on shamanism (Kalweit, 1988; 1992). While both pathological and religio-mystical experiences exist, neither can be reduced or solely explained by the other. Another aspect of the elevationist error is the notion that attending a few workshops makes you a shaman.

Also, hearing a few voices does not mean you are a shaman, although this does not deny that shamanic states of consciousness are accessed and experienced. I wonder whether the Western New Age movement would respect indigenous knowledge and practices, in terms of the long training it usually requires and the fact that shamans are defined by the community they serve. No doubt good intentions lie behind The New Age colonisation of indigenous practices.

Within shamanism, the resolution of the crisis makes the shamans "masters of spirits" (Noll, 1987, p.49). The initiation crisis of South African shamanism could be understood as shifting a difficult form of possession trance, with all its anger, pain, illness and crisis material to a beneficial and healing form of possession trance, in

which the shaman has mastered the possession of the ancestors through her/his improved relationship with them. Shaman Paulina therefore stated that with training, the communication with the ancestors becomes more controlled and appropriate (Lambrecht, 1998). This suggests a more healthy integration with the ancestors in the shaman's life. To master the spirits is of course not only limited to shamanism. Jesus commanded spirits, Socrates conversed with his guardian spirit or *daimon*, while Jung spoke about Philemon as his guardian spirit (Noll, 1987).

It is possible to consider Debra Lampshire's journey from being a victim of her voices to being in a master of them as a hero's journey. It is beyond the scope of this paper to outline all the details, but the journey includes archetypically her early trauma and isolation in the community, her sense of being forlorn and giving up on mental health services (the point of deep darkness and distress in her journey), to her finding friends (guardians) who support her through her dark part of the journey towards her own mastery over the voices. It is through her improved relationship with the voices that she returned to society to support other voice hearers, becoming the healer on her return. In this manner there are parallels to the shamanic journey (Lambrecht & Lampshire, 2009).

### **The Access to Effective Voices:**

Besides considering the healing process of mastering voices, it is central at this point to consider the few voices that may be effective and productive. Those voices that are positive and productive have been described in texts that span many thousands of years, including the oracles as important guides in Ancient Egypt, Babylonia, Tibet and Greece (Hastings, 1991). Socrates' guiding voice was his *daimon* or 'the divine'. Jewish rabbis conversed with deceased teachers known as *maggadim*, and Christian mystics heard voices, which they believed were angels, deceased saints, or the Holy Ghost. Islam is based on the voice and vision of Gabriel dictating the Koran (Davies, 2000). Equally, shamans throughout the world converse with their voices (Achterberg, 1987; Harner, 1980). For example, Black Elk, the famous shaman of the Ogalala Sioux, was assisted and guided to a ridge by a voice in order to find the bison (Liestner, 1996).

For South African shamanism, without access to the voice of the ancestors the South African shaman cannot function. If the ancestors "do not speak, he does not know

what they will say; he cannot tell those who come for divination what they will be told" (Callaway [1870], 1991, p. 29). The ancestral voice is used to heal patients. Ancestors are at times effective in acquiring information about the patient's illness before they even arrive, either through dreams or by sympathetic pain in the bodies of the shaman. They provide essential guidance on the use of herbs and medicines, as well as help finding lost objects. In Western literature this is similarly evident in the 'Third Man Factor', in which adventurers in extreme situations have experienced a supportive presence during their trials and tribulations (Geiger, 2008).

Liester (1996) presents a model in which sensory experiences such as inner voices are described as existing on a continuum, the ego being placed at the centre of this continuum. On the left side, the sensory experiences are associated with ego disintegration, regression, pathology and hallucination. On the right side, the sensory experiences are associated with well-being and ego transcendence, reflecting intuitive voices which are ultimately revelatory in nature. Liester (1996) would therefore consider revelations to be messages that are experienced as coming from beyond the ego, and that create states of transcendence rather than disintegration. It is, however, equally problematic to read pathological inner voices as signs of transcendence. "Only a fine line may separate authentic revelation from complete self-delusion" (quoted in Liester, 1996, p. 7). It is important to note however, that spirituality and meaning are equally significant for persons during their experiences of psychotic states (Geekie, 2007).

In terms of this 'fine line', I recall how in South Africa community members test the shaman's effective voices, namely by going to other villages so that the resident sangoma does not have access to local gossip and information. It is not good enough to hear voices, but rather they need to be functional, tested, accessible and practical. One study of inner voices by Heery (1989) is pertinent to this discussion. It divides the experiences of thirty subjects into three categories. The first category is where the inner voice is experienced as a fragmented part of the self, in the second category the inner voice is understood as an experience that allows for a dialogue which enhances the growth of the individual, while the third category belongs to those inner voices that are experienced as "channels opened toward and beyond a higher self" (Heery, 1989, p. 77). In South African shamanism for example, during the *ukuthwasa* or initiation illness, the voices are experienced as persecutory and are experienced as

fragmenting the ego. It is through the training of the shaman in the trance states that the shaman achieves a more beneficial relationship with the voices of the ancestors as a new sense of a healed self is established.

During training, these voices are mastered and become effective, and achieve at times transpersonal qualities. Such experiences could be considered to be a form of spiritual awakening as set out by Assagioli (1991). It could also be characterised as 'peak' or transpersonal experience, as described by Maslow (1972). The inner voice could be considered as operating within the transpersonal bands of consciousness (Wilber, 1977), in which the self is aware of its supra-individual nature. Such a voice becomes a transpersonal experience, "in which the sense of identity or self extends the individual or personal to encompass wider aspects of humankind, life, psyche or cosmos" (Walsh & Vaughan, 1993, p. 203). The South African shamans themselves define the power being with the voices of the ancestors, and it could therefore be said that the voice of the ancestors is experienced as a voice that transcends the ego of the shaman, for the power is contained in the voice of the ancestor and not in the ego of the shaman.

#### **The Training of the Inner Voice:**

Boddy (1992), an anthropologist, notes that often it is only the initial possession which is distressing. A spirit first expresses itself through an illness. Once the spirit is acknowledged, the relationship with the spirit changes and improves through training, and in the end might even benefit the person (Boddy, 1992, pp. 324-325). It is beyond the scope of this paper to outline the full scope of the shamanic training of ASCs. Very briefly however, the training of ASCs requires defining, accessing and isolating certain ASCs through specific induction techniques and practices. The aim is to steady involuntary ASCs, before the next stage of achieving stable ASCs that allow shamans to enter ASCs to serve the community (Lambrecht, 1998).

It could be said that, in fact, the training of the apprentice is not so much the preparation of the novice, but rather the training of the ancestors in relation to the novice. In other words, given that the relationship between the novice and the ancestors is so central, it is not merely the novice who is trained, but also the ancestors of the novice. Shaman Paulina noted this when she said that when " they teach you, but you think they teach Paulina, no they teach your *amadlozi* how to

communicate, how to find things, how to talk, how to think, how to do something" (Lambrecht, 1998, p. 164). Therefore it is the respectful and collaborative relationship that is sought and mastered throughout the shamanic training. The effective voice for shamans is a trained voice.

### **The Shamanic Voices and Psi Effects:**

In terms of quantitative research designs in this field, it is relevant to note that several comprehensive reviews of mediumship methods have been conducted. In Western culture mediumship, i.e. communicating with the deceased, is of course closely related to shamanism. It could possibly be construed as a form of shamanism within Western culture. Mediumship is of course contested within the Western culture itself.

Nonetheless, relevant to effective voices, it may be helpful to point out that various positive single blind, double blind and triple blind studies have been set up, and these studies underscore a significant conclusion: "certain mediums can report specific and accurate information about the deceased loved ones (termed discarnates) of living people (termed sitters) without any prior knowledge about the sitters or the discarnates, in the absence of any sensory feedback, without using any deceptive means or "cold reading" (a set of techniques in which visual and auditory cues from the sitter are used to fabricate "accurate" readings), and without rater bias on the part of the sitters being responsible for the results" (Rock & Beischel, 2008, p. 158).

In other words, effective voices of the deceased or the ancestors have some quantitatively valid and reliable supportive data. However it is important to note, that no matter what irrefutable, methodologically sound and laboratory tested evidence is provided for after life (Fontana, 2004) or for extrasensory perception (Radin, 2006) at the moment, the current embargo on parapsychological research results in Western academic discourse is still operative (Radin, 2006). This taboo, as others in every academic field, is the result of paradigmatic limits and institutional politics.

Some sangomas are "able to perform feats which we would describe as being accomplished through ESP, as well as diagnose illness and suggest a remedy" (Edge, 1986, p. 364). The word 'intuition' is not adequate when describing the psychic abilities required in pre-cognitive dreams, telepathy, and clairvoyance found amongst the South African shamans (Laubscher, 1963). The different trance states, however,

present different categories of paranormal abilities. The literature on shamanism suggests that great shamans are masters of the spirits and in their possession trances not only have produced phenomena revealing extraordinary strength, agility and resistance to fatigue and exhaustion, but they have also demonstrated immunity to fire, the generation of light and heat, as well as the location and control of game, weather control, killing and influencing over a distance, predicting future events, and other such feats (Kelly & Locke, 1982, p.4). One example would be that an African shaman who, while gazing at a 'magic mirror', was able to tell a researcher how far up the river a boat was, and that a tall man on the boat had just shot a large bird. All the statements turned out to be true (De Martino, 1988, pp. 7-8).

Another central psi effect is the ability to find hidden objects during a specific trance state that occurs during dancing. Finding hidden objects is part of this training of psychic abilities which includes listening to the voices of the ancestors. Whilst in this trance state and after having danced, the apprentice has to kneel in front of a person who has hidden an object. I was told by my teacher that as an apprentice, I would need to psychically find this person in the crowd. The apprentice listens to the ancestral voices, then greets a person and states that the person has hidden something. The novice is guided by the ancestors to state specifically what the object is and where it is to be found, and to speak clearly and confidently without the luxury of hesitancy, questioning or exploring. In this regard the ancestral voices work collaboratively with the novice, for both are being tested by the experienced and critical awareness of the community. A small example of this would be, that during my graduation, other sangomas hid the objects without the knowledge of my teacher, so that he would not be able to give away the information. I was to be solely reliant upon my ancestors. Therefore, at times, effective voices through testing can reveal their productiveness.

### **Conclusion:**

In this article shamanic voice hearing has been related to shamanic trance states. Shamanic voice hearing was placed historically and discursively. Shamanic voice hearing is mostly associated with service to the community, thereby dissociating in the service of the self, rather than the splitting or fragmenting the self, as in psychosis. It is equally important to consider such shamanic voices neither in the reductionist or

elevationist mode, but rather to be open and wonder about their effectiveness. Communities with shamans operate with a discerning form of quality control.

A dimensional approach to voice hearing has been taken, in which voice hearing is placed on a continuum. The distressing experiences of voice hearing, often the result of trauma, sexual abuse and substances are placed on the left side of the continuum with the middle ground belonging to voices that are either pleasurable or non-distressing. It is also the ground shared by those who have overcome distressing voices through mastery. The aim of this paper was to stretch the continuum further to the right into the spectrum of more rare voices that are effective at times.

This raises an understandable concern, even amongst voice hearers, about how to differentiate between psychotic voices and effective voices. This was hopefully addressed in this article. Firstly, effective voices are trained and tested, and generally seek to heal others. Secondly, community sanctioned mastery of the voices is a prerequisite for the effectiveness such voices. Therefore, not all voice hearing is equal.

I realise that this for modern academic Western discourse is difficult for it questions the limits of acceptable reality. However, shamans have long been active in that spectrum. The effective voices are rarely immediately given or derived but rather are trained and cultivated during shamanic trance states. Through a developmental process in the form of a shamanic journey (an initiation crisis and an apprenticeship), the shaman as well as the voices are mutated and changed, establishing a workable and collaborative relationship. Through this relationship, a qualitative shift occurs in that some voices become effective, productive and reliable, to generate healing and knowledge. Psi effects are often evident, and are supported by parapsychological research. It is the shaman who is waiting for modern Western discourse to wake up and catch up with what has always been known in other cultures, and for modern Western discourse to bring with it its own unique and valuable contributions to effective voice hearing.

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