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研究課題名(和文) Experiences at the Edge of Science and Religion: a Comparative Research on Exorcism in Contemporary Japan, Italy and Austria

研究課題名(英文) Experiences at the Edge of Science and Religion: a Comparative Research on Exorcism in Contemporary Japan, Italy and Austria

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研究成果の概要(和文)：現代イタリア、オーストリアと日本における憑依と除霊についての資料研究・フィールドワークを実施した。イタリアでの調査は8月、9月上旬と3月、日本での調査は2月、8月と9月に実施した。イタリアでの調査はローマカトリックの悪魔祓いに注目し、エクソシストへのインタビューと中部イタリアにある教会で悪魔祓いでのご参加観察を行った。主に悪魔に憑りつかれている一人の女性に対する悪魔祓いに年に3～4回参加した。現在、彼女との共著が執筆中だ。
日本での調査は特に徳島県三好市にある賢見神社に着目した。ご祈祷を受けた150人位に対してインタビューを行った。
研究成果は国際的に発表され、現在注目を集めつつある。

研究成果の概要(英文)：The research relied on archival research and fieldwork in Italy, Austria and Japan. Fieldwork in Italy was carried out in August-September and March; fieldwork in Japan in February, August and September. In Italy, I interviewed several exorcists and carried out participant observation during Roman Catholic exorcisms in Central Italy. I started a long-term collaboration especially with a possessed woman, who allowed me to follow her case and to publish about it. We are working on publishing her story together.
In Japan, fieldwork has focused mainly on Kenmi Jinja (Tokushima Pref). The fieldwork has given very good results both about (inugami) possession and ritual healing.
By interviewing also psychiatrists and specialist in biomedicine in both contexts, I understood the dynamics through which possession emerges in the interaction between medicine and religious healing. Research results were published internationally and I started working on a monograph to be published in 2019.

研究分野：文化人類学

キーワード：Exorcism Spirit Possession Religious Healing Ritual Psychiatry Biomedicine

1. 研究開始当初の背景

In the past few decades, anthropology witnessed an increasing interest in embodiment. Corporeity has been recognized as a condition of human experience and the body as the “existential ground of culture and self,” (1) a source of perception, and a bearer of practical knowledge and skills, developed through practice, with which we dwell in the world (2). This ecological approach pointed out the necessity of investigating human experiences and social phenomena from the perspective of perception of the body in its interaction with the environment, i.e. not only with other humans, but also with non-humans.

Studies on social suffering pointed out the relations between experiences of suffering and power,(3) while medical anthropologists showed that healing is a process that involves several interactions among a wide array of human and non-human material actors, in which the body and its materiality become central (4). Yet, these approaches do not take spiritual healing into consideration, thus not explaining how non-material actors (e.g. spirits, demons, saints) can contribute to possession and healing experiences. These questions were taken into account by Csordas (5) who, in his studies on charismatic healing in the US, while focusing on the body, shed light also on the importance of embodied memories, imagination and affect in healing, that also involves the reconstruction of the patient’s “self” within the larger groups to which that person belongs. Similarly, Ishii (6) pointed out that the reality of “divine worlds” is created through concrete actions and relations among humans and things, through which spirits and deities take tangible forms through lived experience.

Although these studies were ground-breaking, however, they did not explain the reasons why people choose religious healing and, in case they chose to be treated through “modern” medicine beforehand, why they did not heal. Moreover, they focus on particular groups within which, to a certain extent, knowledge about the “divine worlds” that are expected to come into play is already shared. Thus they do not explain how the reality of one particular deity or spirit rather than another takes form. Finally, although they focus on the body, an explanation of the physiological processes that underlie those experiences is missing.

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2. 研究の目的

- (1) Providing a new understanding, based on empirical data, of the role of the lived body moving in the world, in the construction of experiences of possession and exorcism in contemporary Japan, Italy and Austria
- (2) Providing a comparative perspective based on an ecological approach, integrating anthropological theory with perspectives on the body in physiology, physiotherapy, psychology and cognitive sciences.
- (3) Focusing on patients’ experiences from when the first “symptoms” appear to when they heal through exorcism, including their experiences with (bio)medical science, thus revealing the processes that underlie the construction and negotiation of discourses of (medical) “science” and “religion” through practice.

3. 研究の方法

This research relied on three different, yet interdependent methods

- (1) Bibliographic research about the theoretical framework on the body.
- (2) Research on the history and formation of discourses of spirit possession and exorcism, particularly in relation to (bio)medical science in Japan, Italy and Austria, relying on primary and secondary sources.
- (3) Ethnographic fieldwork in Japan, Italy and Austria, that produced the main dataset. Participant observation during rituals (including undergoing

rituals myself) and interviews to patients, exorcists and specialists in (bio)medicine and psychiatry, were integrated with surveys on narratives about spirit possession and exorcism in the media (documentaries, television programs, websites, SNS).

4. 研究成果

The research focused on experiences of patients undergoing exorcism in contemporary Italy, Austria (Roman Catholic) and Japan (Nichiren sect, mediums and Shinto shrines). The main dataset was gathered through ethnographic fieldwork, but also bibliographic and archival research, as well as a media (documentaries, television programs, websites, SNS) survey were carried out.

As for Italy and Austria, the fieldwork included:

- (1) Participation in the formation course for exorcist, held at Regina Apostolorum University in the Vatican (one week, April 2015), where interviews were carried out.
- (2) Interviews to roughly twelve practicing exorcists in Italy were carried out. Because of practical issues, the research has focused mainly on Northern and Central Italy. I also interviewed and repeatedly met two exorcists in Austria.
- (3) Through exorcists, also medical practitioners (mainly psychiatrists) who collaborate with them were contacted and interviewed when possible.
- (4) Participant observation during exorcisms was carried out. Accessing patients has proven very difficult, because of the strict privacy policy that exorcists apply. Yet, an exorcist in Central Italy granted me access as a helper to the rituals performed on a possessed woman. I have followed mainly her case in the last three years, thus highlighting the changes in her condition.
- (5) Information on other possessed people's experiences was gathered through interviews to exorcists, as well as through accounts written and published by them.

Also in Japan interviews to exorcists and religious healers were carried out.

- (6) Interviewees included traditional female shamans (*itako* in Aomori Pref., *yuta* in Okinawa, *ogamiyasan* in Tokushima Pref.), mediums

(*reinōryokusha*), mainly in the Kansai area, and a Buddhist monk of the Nichiren sect in Kyoto, who has become famous for his exorcisms. However, they did not grant me access to their patients.

- (7) Participant observation focused on a Shinto shrine (*Kenmi jinja*) in Tokushima prefecture, where an overall number of roughly hundred and fifty people undergoing exorcisms was interviewed.

- (8) Local medical practitioners were contacted and a collaboration with them has started.

The main findings of the present research can be summarized as follows:

- (9) Patients undergoing exorcism both in Italy and Japan did not do it because of their beliefs. Rather, they accessed exorcism as a last resort to solve mainly physical problems that could not be solved by biomedicine.
- (10) Belief emerged mainly as a consequence of the efficacy of ritual. This applied to both exorcists and patients, both in the Italian and the Japanese case.
- (11) Rituals were generally efficacious and patients tended to feel better after having undergone them. Yet, the healing process may require the regular repetition of exorcisms, even once a week for many years, particularly in the case of Italy.
- (12) "Possession" emerged over time and the "diagnosis" was generally confirmed by the efficacy of the ritual, rather than by the patient's or the exorcist's beliefs.
- (13) Very few patients presented symptoms that could be related to psychiatric or psychological conditions. The majority presented physical symptoms that did not heal, conditions for which no medical diagnosis was found, or chronic illnesses.
- (14) In this sense, bodily perceptions and feelings played a major role in the construction of a patient's condition as possessed.
- (15) Although central, bodily symptoms were not enough to determine "possession". In general, they were associated with misfortunes, problems in social relations (generally within the family or the workplace, both in Italy and in Japan) and happenings such as accidents or sudden commitments while going to the place

where the exorcism would be performed. The reality of spirit entities in patients' lives emerged also through these events, experienced as hindrances by spirits.

- (16) Cases of possession presented higher similarity with one another in the Italian case than in Japan. This was due to the higher level of institutionalization of what was considered possession and to the fact that exorcists performed "tests" to identify possible symptoms of possession, especially aversion to the sacred. No matter what issues patients presented, if they did not positively react to the exorcists' tests and show aversion to the sacred, exorcisms would not be performed.
- (17) In the case of Kenmi shrine, there was very little interest in identifying possessing entities. Both the priest and the people undergoing exorcisms were satisfied as long as patients felt better after it. In Italy identifying the name of the possessing demon(s) was central in the ritual and the healing process. Yet, there was no particular symptom associated with any specific entity.
- (18) Therefore, the research highlighted that "possession" is a multiple phenomenon, whose symptoms can be vary variegated even within one single context.
- (19) Most patients reported unusual feelings during the ritual, both in Italy and Japan. The woman in Italy claimed that she entered an altered state of consciousness, but that she remembered some visions and perceptions that she had. In Japan, different people reported different feelings or unexpected/uncontrollable bodily reactions (such as vomiting, drooling, yawning, flatulence, or shedding tears) during the ritual, but no altered state of consciousness. These feelings clearly contributed to the reality of the experience of being exorcised, i.e. of feeling something that "goes out".

Therefore, the research confirmed the fundamental role of bodily feelings in the emergence of possession, possessing entities, and healing, both in Italy and in Japan. Yet, these feelings are entangled with other symptoms, which vary greatly from individual to individual.

This goes against cognitive or psychiatric understanding of spirits and possession phenomena, while pointing more at bodily perceptions and feelings that emerged in the interaction with the environment, social relations, and non-humans.

Rituals relied on relieving the symptoms, thus creating a condition and self-perception of "feeling good" or "being healthy", which needed to be kept through further rituals.

The whole process revolved around what I called modalities and skills of "feeling with the world", through which spirit entities manifested themselves, acquired social lives and influenced sociality.

Research results were published internationally, receiving a remarkable amount of attention. I am planning to go to sabbatical next year and write a monograph on the topic.

5. 主な発表論文等

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〔産業財産権〕

出願状況(計 件)

取得状況(計 件)

〔その他〕

ホームページ等

6. 研究組織

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