Rumour of angels and heavenly midwives:
Anthropology of transpersonal events and childbirth

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Summary  Some contemporary women can experience non-ordinary states of consciousness when childbearing. The purpose of this paper is to bring a ‘transpersonal’ frame to these non-ordinary states of consciousness (hereafter: NOSC). Transpersonal psychology is an interdisciplinary movement in Western science that studies ‘religious’, ‘peak’ or ‘healing’ experiences in different cultures and social contexts. Between 2001 and 2006 in Auckland, New Zealand, while engaged in anthropological fieldwork, I collected stories from mothers, fathers, and midwives who had participated in transpersonal events during childbirth.

I will compare the local women’s NOSC with ethnographic accounts of spirit-possession and its relationship to indigenous midwifery then revisit and reconstruct the witch-hunts of Medieval Europe from this perspective. Midwives are encouraged to learn to identify and support women’s NOSC during labour and birth as many women find strength and wisdom by passing through these states in labour. The subject is also critical to men, whether they are present with women and birth as fathers or health professionals. The hoped for result of this inquiry is to revalorise NOSC among birth-giving mothers, and to educate birth attendants in this field.

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1. Introduction: birth, ritual, and transpersonal visions

Edith Turner’s Experiencing Ritual described her participation in a healing ritual in West Africa and the uncommon experience of seeing, with her own eyes, a spirit emerge out of a patient’s back. Perhaps seeing spirits is not a common event for most Westerners; and researching these phenomena, until recently, even less. What is a common event for many Western women is birth-giving, and birth-giving can create the similar experiential conditions found in ritual and meditation—from whence visionary states emerge. My research interests are in the relationship between the ‘ritual
process’ and birth-giving—and the so-called ‘dissociation’ that can occur during childbirth. Interestingly, many rituals recapitulate birthing patterns, as Turner observes:

Another childbirth element was, for me, the slow, long build up of the ritual toward climax, and the great relief and joy afterward. Nyakanjata was in pain when she was first brought to the ritual, as if brought to [child] bed. The ritual consisted of a series of episodes, or “starts,” in each of which her body made involuntary movements, just as the contractions of childbirth are episodic and involuntary. Toward the end she was totally shaken out of herself, and so weary that it seemed that nothing was going to happen — and that is when it did. One can talk of dissociation, of reaching lower levels by means of an ordeal. Such processes occur all the time in childbirth and are little mentioned in the literature because the main preoccupation of Westerners regarding childbirth has been prevention of pain, not that something fundamental has changed one’s physical and psychic condition.

It is this change in women’s physical and psychic condition that is the primary concern of this paper. Rather than ‘dissociation’ her experience might be also called an ‘anomalous experience’, or what Western anthropologists have called ‘extraordinary experience’ or even ‘wondrous events’. Furthermore, NOSC “have become common-place in the anthropological study of religion”. These events are important to anthropologists because they may have “stimulated the development of religious ideologies”. This is to suggest that transpersonal (meaning: spiritually oriented) states of consciousness may have accompanied our ancestors at birth for thousands of years. The NOSC of ‘shamans’ (tribal curers) in most cultures are tied to spirit-healing.

More importantly, a thorough exploration of the transpersonal dimensions of women’s experience in childbirth is vital to the contemporary discipline of midwifery. These visionary states may have an inherent ‘healing’ dimension to them tied to the dramatic physiological transformation of women into mothers. However, experiencing transpersonal states of consciousness unexpectedly, or without a supportive container and social sanction, could potentially be fragmenting or frightening to some vulnerable women, especially if their attendants are themselves uncomfortable with these phenomena. Women need to be able to articulate and make meaning of their experience in the company knowledgeable, understanding and insightful caregivers. Understanding and identifying women’s NOSC during labour, birth and postpartum could therefore be an essential part of the support offered to women by all parties concerned with the multiple dimensions of childbirth and human personhood.

2. The anthropological evidence

There is nothing ‘esoteric’ in the anthropological study of NOSC given Erica Bourguignon’s finding that some 90% of cultures have institutionalised forms of them. Anthropologists of recent times have sought entry into the visionary worlds of the cultures in which they study by participating in that culture’s rituals and NOSC. They use their experience in NOSC as important ethnographic data. Once such anthropologist, David Young, in his discussion of ‘spontaneous visions’ and C.G. Jung’s archetypal psychology, argues that when something devastating happens to a person and her or his previous attitudes to life break down, the contents of the ‘collective unconscious’ become activated and are projected externally “which can lead to psychosis unless these materials can assume a communicable form such as a vision”. Successful translation canalisises these powers into consciousness which can then become a source of creative insights and energy.

However, in many non-Western indigenous cultures the visionary states pertaining to childbirth are seen as evidence of “divine election” the “wandering of the future practitioner’s [midwife’s] spirit into the realm of the supernatural”. Indeed the transpersonal visions, in indigenous cultures, assume a form of divine authoritative knowledge. Lois Paul, who studied the visionary initiations of Guatemalan midwives, writes that “Belief in supernatural assistance at childbirth gives midwives and their patients an extra measure of assurance in the face of danger and uncertainty”. The word “belief” however can belie the experiential power, the sense of numinosity, and the hyper-reality of transpersonal visions.

Another important field of anthropological study has been that of ‘spirit-possession’. As Ioan Lewis writes, women’s possession rituals are both “transpersonal and transcultural and can be externally observed”. The cross-cultural ethnographic record shows that women’s maternity and midwifery cults, ritual, and religious activity often display intimate connections with spirit worlds, NOSC, and spirit-possession by an intriguing roster of ancestral spirits. These include deceased children who died from perinatal complications, angry ancestral relations, heavenly midwives, or mothers who died in childbirth. These groups, while showing great cultural diversity, display several similar patterns which, when combined, are suggestive of a gender specific transpersonal healing complex operating in close association with the dead, or the ‘ancestors’.

Importantly it is often the devastations of child mortality which initiate a woman’s transformational crises into a maternity possession cult, or a midwifery/shamanistic career in many parts of the world. Mayan midwives call upon the spirits of deceased midwives ‘comadronas invisibles’ and “During birth they [midwives] are accompanied by these spirits”. This suggests an interface with a culturally refined spirit-world in which encounters with the dead are purposefully evoked and embodied by midwives—a function designed to support the birth of the living.

3. The local angelic helpers

I found, among some contemporary women and men, a rich and variegated vein of transpersonal events that appear to fly ‘under the radar’ and somewhat ‘in the face’ of conventional Western medicine and psychology. The incidents recounted in this paper were often held as deeply private and emerge in conversational anthropology with both women and men. I have written about father’s NOSC elsewhere.

A New Zealand woman of 28 years, who I will call Katie, had her first child in 2001. She told me that when she was in the deepest throes of a long and arduous labour (21 h) in a hospital, she began to feel as if she might die. She also said that she felt in those moments she might have to give up her life in the service of her struggling child (a sacrificial theme).
At that moment (the recognition of death’s door) she said that her recently deceased grandmother came to her in a vision and that somehow her familiar loving presence helped to guide her safely through her labour. The presence of her grandmother was blended with that of her male partner who was competently attuned to her. The reader could note that this is, categorically, an encounter with an ancestor spirit.

Another woman, Kristin, 50 years old, said she was assisted in birth by a woman who’s earthly or unearthly status she was unable to determine. The woman had appeared at her bedside dressed like nun and guided my informant through her difficult labour. Kristin told me that she had been in labour for many hours. "I was out of it" she said, when a woman with "deep blue eyes" appeared alongside her and talked her through her birthing process. My informant said her presence was reassuring and calming and that "she just knew". A few days after birth-giving she inquired among the staff and her husband after this woman so she could thank her. No one else had seen her and she was not to be located among the staff.

Another interesting story was recounted by a friend of mine. She was at church service where, during his sermon, the Anglican minister revealed to his congregation that he had seen their male obstetrician turn into an angel while attending to his wife’s birth-giving. Ascribing angelic qualities to birth attendants is not limited to contemporary Westerners as shown by the following statement from a birth-giving woman in mid-nineteenth century America, "When she came and stood by my bed [the midwife] I thought I saw an angel."

My informants’ narratives may point to sweeping changes in Western societies and a renewed willingness to participate in NOSC. This may, in part, rest with the burgeoning interest in NOSC which has grown rapidly since the 1960s. I cautiously suggest their events may provide some evidence that a ‘re-enchantment of the (Western) world’ is occurring, after birth-magic was developmentally arrested by the Christian inquisition, the rise of empiricism and the medical colisation of birth. My informants’ narratives stand out as ‘extra-ordinary’ or ‘wondrous’ when set against this historical backdrop because it is a history that has been anything but nourishing where ‘spirits’ are concerned.

4. Eve’s revolutionary pelvis

With special attention to NOSC, this paper will now look back on several important epochs in Western reproductive history beginning with Adam and Eve’s evolutionary pathway and then passing through Medieval Europe and finally observing the rise of the mechanistic epoch. However, first I would like wander even further back for a ‘walk-through’ of our early ancestor’s evolutionary pathway. The fruition of colossal pelvic, skeletal, and cranial modifications in our proto-species may have created a relationship between reproduction and NOSC which, in turn, secreted the cultural patterns that would become shamanism and midwifery.

Early hominid childbirth would have been painful and life-threatening, according to biological anthropologists Wenda Trevathan and James McKenna. They write that the shift from quadrupedalism (four-legged locomotion) to bipedalism (upright two-legged walking) narrowed the female pelvis and twisted the birth canal, creating a situation where the foetal person "has to undergo a series of rotations in order to pass through the birth canal without hindrance". This situation became even more hazardous because of the "increasingly large head size associated with the evolutionary transition from Homo erectus to Homo sapiens". To put it somewhat enigmatically, Eve’s desire to go about on two legs, perhaps precipitated by her reaching for that infamous apple on that infamous tree, initiates an evolutionary pathway that would have her bringing forth children in pain and suffering. For the baby homo-sapiens, shedding her mother’s skin is a painful task which can be a fatal one for both of them.

According to some anthropologists fear of death plays a crucial role in reproductive crises. Carol Laderman, writes that "The prolongation of labor because of fear is associated with much higher than normal perinatal mortality rates". James McClenon believes our ancestor’s evolutionary pathway may well have increased the likelihood of childbirth complications, psychosomatic infertility, spontaneous abortion and miscarriage, post-partum haemorrhage, and obstructed labour. He writes that, "Fear results in muscle tension, which inhibits the normal dilation of the cervix". Some researchers speculate that it is possible that our ancestors, H. Neanderthalensis, disappeared because of complications in this evolutionary hike. Birth can obviously kill—but birth, it complications, and therefore death, can also be ritually manipulated in an attempt to tip the balance.

5. Palaeolithic ritual as transpersonal medicine

When a woman and child go into labour there is no guarantee both will survive—this risk-factor may be why cultural assistance with birthing is such a universal. Before the very recent event of Western technologically oriented birthing, culturally embedded ideals embodied by women such as dignity, generosity and fearlessness were geared to alleviate such fears. In other situations the problems fear created were ameliorated through complex symbolic enactments that operate as waking suggestions to birth-giving mothers. These ancient midwifery manoeuvres can include spirit-possession, and other NOSC.

Because fertility and reproductive success were so crucial to our species’ early survival we could surmise that the ritual practices of midwifery-as-spirit-possession and ‘shamanism’, may well have evolved in close association with our ancestors’ birthing bodies and perhaps the NOSC associated with labour. McClenon has recently suggested that ritual and religion may have evolved in this evolutionary matrix because the healing powers of ritual (among them the power to alleviate fear, create psychological relaxation and physiological 'openness') was such that it could increase fertility and reduce childbirth mortality among our hominid and even pre-hominid ancestors. He goes as far as to suggest that the forces of genetic selection might have even tilted our species toward its ability to experience NOSC—and did so in close association with reproductive demands.

6. Indigenous Australian birthing

Birth-giving, because of its important and dangerous nature, was likely an ancient locus of much culturally embedded
birth-magic, ritual and mythology. For example, the Rainbow Snake complex in Northern Australia may be “the longest continuing religious belief documented in the world”. 33 This ancient storehouse of condensed memory winds back through ever returning cycles of reproduction and ritual dreaming for up to 9000 years.

The myths and rituals of the Djanggawul brother and the Wawalik Sisters are concerned largely with childbirth. In the Wawalik cycle the Julunggul (Rainbow Snake) attracted by post-partum blood, attacks the newborn and the mother (the gunman: bleeding afterbirth blood) and religious ritual/dance is used by her sister (the wirril: younger sister non-bleeding) to ward off the attack of the dangerous spirit. Thus, “pregnancy and childbirth are mythically grounded”.34 Anthropologist Phyllis Kaberry wrote in 1939:

“The whole of the ritual surrounding pregnancy, parturition, and lactation... has its sacred and esoteric aspects, which are of the most vital importance to the women, and which are associated specifically with female functions. They are believed to be a spiritual or supernatural guarantee from the Totemic Ancestors that a woman will be able to surmount the dangers of childbirth, bear her child safely, recover from the shock of parturition.35

Older women would go apart with a pregnant woman and dance and sing around her “songs that are fraught with power that they possess by virtue of their supernatural origin. ... their efficacy is attributed to the fact that they are narungani; that they were first uttered by female totemic ancestors”.35 “The woman said it would make birth easier and charm the pelvis and genital organs ... During labour, songs were sung to facilitate delivery and prevent haemorrhage”.35 Aboriginal women also have “myths that establish the ritual method for extracting the placenta”.34 Transpersonal medicine has ancient roots.

7. Forbidden fruits: repression of western women’s spiritual powers

Feminist researchers looking back into Western culture suggested how strong currents of ambivalence, misogyny, and violence toward women’s bodies and the reproductive function were attempts to diminish female status, sacral, and sexual power. This is also to diminish or outlaw women’s claim to transpersonal knowledge. Birth activist Susan Arms, has written about the role of the Mediaeval Church, its style of religious organisation, and its impact on the human psyche, culture, and birthing.36 Arms points out that the Church Fathers would takeover, organise, and prescribe what could be known when it comes to transpersonal experience and this would have dire consequences leading to the deaths of thousands of creative thinkers as heretics and eventually the witch-hunts of the late Middle Ages.

The Second Council of Nicaea, in 787 AD, discarded the concept of personal imagination and individual mystical experience because, it was believed, only church clergy could experience God in a direct way. The church taught that it was impossible for ordinary mortals to experience God directly and to assert that one could do so was blasphemous.36 This spells a ruthlessly enforced andocentric and hegemonic monopoly on transpersonal knowing and this one edict in particular had tremendous impact on the lives of ordinary people and affected women and childbirth for more than a thousand years. With this statement we see that the Church could not have sanctioned women’s transpersonal states catalysed by birthing or the rituals that reproduce these states.36,32,37

Such changes in consciousness are categorised in most cultures as direct ‘unmediated’ mystical experience. The so-called “dissociation” found among birth-giving women in all likelihood would have served an organic physiological ‘rite’ that had (and still has) the ability to take some women into a transpersonal revelation of self and, as transpersonal philosopher, Richard Tarnas puts it, "radical kinship with the cosmos".38 A comforting source of women’s authoritative knowledge—but a heresy for the Church—since no priestly order stands between ‘God’ and the parturient.

The ‘magic’, and folk-wisdom associated with women and midwifery came to be perceived as demonic and heretical witchery.37,38 Certainly the connection between midwives and witches existed in the perverted fantasies of two German Dominicans who wrote the infamous witch-hunting manual, Malleus Maleficarum (1486). Friars Kramer and Sprenger pronounced that; “No one does more harm to the Catholic Faith than midwives”.39 This treatise, widely published (coinciding with the first printing presses) and sanctioned by Pope Innocent VIII, became an extremely influential text.40 Midwives were labelled heretics and witches and became the targets of a brutal political, economic and religious annihilation by the Catholic and then Protestant Churches coupled, eventually, with the growing power of a male medical fraternity.41 The point here is that any mystical atmosphere outside of the Church’s ken was vilified.

8. The demonisation of ‘spirit-possession’

Compounding, perhaps driving, the Christian Churches’ monopoly on spiritual knowing and its narrowing of the epistemological horizon may have been ancient ideas that couple women, sex, and birth with possession. In the Judaeo-Christian world, possession was associated with evil and demonic categories.42 Within the Judaic tradition demonic-possession came to be equated with “impregnation”, “penetration” and “disease”.41 Ancient Hebrew and Greek world-views, and the systems of healing that stemmed from them, associated illness with demons and the “unclean”.41 Rabbinical-healers instigated harsh exorcistic measures for the ‘possessed’ (the physically and mentally ill) but they also presided over women obstructed in childbirth.42 This suggests that birthing complications were equated with demonic-possession. The cure for illness/demonic possession was effected through purification or purgation usually by dramatic exorcism (driving out unclean spirits); and this healing tradition continued into Mediaeval Europe.42

Importantly, anthropologist Yoram Bilu notes that: “Unlike many other cultures … Judaism did not possess the positive category of ceremonial possession, in which the dissociative state is not stigmatised but socially approved, and the adept seeks to establish a symbiotic relationship with the possessing agent".43 Indigenous Europeans (before Greek and Hebrew influences) may well have practiced forms of spirit-possession during childbirth. Basque peasants, considered to be among the last vestiges of early
European tribes, practiced childbirth rituals in the form of ‘couvades’. These rituals are designed to fool, propitiate, or draw-off the dangerous spirits attracted to birth.

There is some evidence to suggest that the “curse” of preeclampsia, which occurs in 10% of all human births, and its corollary, eclampsia, in which a seizure can result in the death of mothers and neonates would have become associated with ‘possession’. Robillard, Chaline, Chaouat & Hulsey also suggest our ancestors would have recognised the preeclamptic condition and responded with cultural patterns around the dangerous condition such as “myths”.

It is probable that these “myths” would be enacted in ritual, i.e. midwifery manoeuvres designed to ward-off the potentially catastrophic condition. Shelia Kitzinger found, for example, that among Jamaican women, the Western medical condition of eclampsia is seen as spirit possession by dangerous ancestor spirits (duppies). Jamaican midwives can also become ecstatic and spirit-possessed in Pentecostal church meetings where they roll around on the floor in a trance-possesion state called “labouring”.

9. Non-ordinary crimes

During the witch-hunts, possession, according to anthropologist H. Sidky, was the central crime of the alleged witchcraft along with such crimes as ‘copulating with devils’, ‘conversing with spirits’, ‘giving birth to demons’ and ‘offering of newborn children to devils’. The phenomena listed above were seen as heresies by the Church or, religious crimes. Anne Oakley maintains, however, these were in fact “reproductive crimes”.

I would argue that these phenomena are all inverted aspects of a special sub-group of indigenous midwifery techniques and have a NOSC logic guiding them. I will outline below how these same possession activities (found in the cross-cultural ethnographic record and free from demonising Judaec/Christian prejudices) are deemed a “legitimate means of contacting the supernatural world” and a legitimate form of midwifery practice.

Bourguignon noted that there exists a predominant aptitude for spirit-possession among women, along with beliefs that spirit beings can enter human bodies and that a human host can either share with, or become, deity, ancestor or demon. Among men it is an NOSC—often involving ‘spiritual flight’ out-of-the-body (not usually associated with possession) that predominates. Susan Sered, a specialist in midwifery manoeuvres designed to ward-off the potentially catastrophic condition. Shelia Kitzinger found, for example, that among Jamaican women, the Western medical condition of eclampsia is seen as spirit possession by dangerous ancestor spirits (duppies). Jamaican midwives can also become ecstatic and spirit-possessed in Pentecostal church meetings where they roll around on the floor in a trance-possesion state called “labouring”.

10. Transpersonal eroticism

A major charge laid against women in medieval times was that of copulating with demons, devils, and beasts. Significantly, Sered notes that in wider ethnographic studies, “women are believed to be particularly skilled at, or prone to, possession trance, the indigenous interpretation (emic) is that women are softer, easier to penetrate and that is why gods or spirits choose them as vehicles”. Again the ethnographic literature reveals that spirit possession practices are also homologous with heterosexual intercourse and pregnancy. According to the Maltese Maleficarum ‘They [witches] infect with witchcraft the venereal act and the conception of the womb’.

Lewis observes the widespread belief in the possibility of human ‘sexual’ encounters with “supernatural” beings, “ecstatic communion is thus essentially a mystical union” implying impregnation. The loa in Haitian vodou has similar erotic parallels with the possessed women seen as a “horse” that the spirit “mounts” and “rides”. Here again positive analogues of these exist in socially supported ceremonial categories in women’s religious cult-groups. Trance states or visions in diverse cultures are equated with the erotic coupling with a deity or spirit thus when someone has an NOSC it is often depicted as sexual union between a spiritual being and a human being.

11. Midwifery as spirit-possession

Bearing children may well have been fruitful experiential training for possession and midwifery. In the Philippines, breech birth, from the fetal standpoint, was a prerequisite for a midwifery career in adult life and was related to a logic that inferred such persons were already well versed in dealing with perinatal obstruction. This pattern follows the “wounded healer” trajectory of the shamanistic career outlined by Joan Halifax.

Midwives in various cultures are known to have transferred the pain of labour (often associated dangerous demons) into fathers or even animals. This action appears to be recognisable as a culturally specific form of symbolic midwifery manoeuvre with links to couvade practices. The husband may well have become ‘possessed’ by the evil spirits associated with the dangers of childbirth. I have not yet
found instances of this particular midwifery/father couvade performance in Medieval Europe, nevertheless, the situation does parallel one of the major charges against witches or midwives, that of causing possession in others.40 Possession is also seen as a practice with community dimensions.50 According to McClain "In the process, [of possession] ties among women are promoted and strengthened, both laterally among cult members and vertically between female ancestors and living female descendants".22 Recruits to female cult groups among the Luvale of Zambia, are women who have previously experienced the devastations of child mortality. Luvale cult adepts utilise possession and trance to evoke female ancestors who aid in the rigours of reproduction. Furthermore, within Cantonese shamanism, the female medium’s dead children are her spirit guides.16 NOSC can therefore aid women incarnate continuous kinship and relationship with her departed family—her familiars. Returning to the European situation, we know that much time and effort was spent by witch-hunters on extracting tortured confessions from women about their erotic contact with ‘devils’ and their conversing with ‘demons’27,40 Compare this with a parallel drawn from the Burmese Buddhist world where nats (spirits) were a key figure at birth.24 In the Burmese case the difference between the female natkadaw and male exorcists is instructive. The woman religious specialist works by propitiating nats, soliciting their help, asking them to possess her, and acquiescing to their power. The male exorcist combats and attempts to drive away nats, using Buddhist power to do so. The natkadaw is a person through whom the nats speak, while the exorcist is one with whom nats speak. The natkadaw shares her body with the nat; the exorcist remains separate—confronting the nat.24,51

In Mediaeval Europe, however, influenced by the Judæo/Christian theologies, what was rumoured as ‘copulating with devils’, ‘conversing with spirits’, ‘giving birth to demons’ and ‘demonic possession’ lives on, in some cultures, as female religious practice, healing, and spiritual midwifery. In short, spirit-possession among females by spirit ancestors and deceased children, suggests a midwifery complex that gleaned its authoritative knowledge from a relationship with the powers of birth, sex and death combined with ritual NOSC. The Church’s misogyny may have been significantly driven by attempts to diminish what they perceived as competing transpersonal knowledge claims emerging through female bodily knowing.

12. The medical repression of midwifery and NOSC

In Europe women were removed from their medico-religious roles, their practices decimated. Birth slowly but steadily became the domain of male physicians. The Western world began to enter into an epoch that would be dominated by Cartesian and mechanistic thinking where spirit and body were split and the human body came to be seen as a machine.52,53,54 Medical anthropologists have explored the ways that cultural preoccupations are etched onto the human body.54 They say that anatomy can become the map for cultural fixations and medicinal treatments reflect the cultural preoccupation,54 especially in childbirth, which is “inextricably bound up with the production of culture”.55 Samuel Osherson and Lorna Amarasingham trace the development of the Western ‘body-as-machine’ metaphor to Mediaeval Europe’s fixation with technology.54 In these times an increasing success with simple machines, water mills, clocks, and pumps was coupled with a growing familiarity and ability to calculate the behaviour of these machines.56 With this mechanical preoccupation as a cultural surround, the female reproductive body came to be hard-wired into its machine metaphor; and perceived as an individual mechanical pump—able to expel a fetus but best attended to by a technician’s tools; his forces.56

The rise of the male medical fraternity (originally under the aegis of the Church) and its fealty to a mechanistic cosmos compounded this situation.27 The rise of empiricism and the Enlightenment’s philosophy of rationalism in the late 17th century spelled for many the ‘Death of God’ and Western intellectuals began to dismiss dreams, visions and religious experience as against the advance of ‘Reason’57 and a misperception of reality. The materialist approach is one that must remove the spirits from the world, to disenchant the world of spiritual phenomena and relocate them in the intra-subjective ‘imagination’. In this epoch transpersonal visions become ‘just your imagination’ and reduced to an epiphenomenon of materialist brain function; the meaningless phantasmasoria (fantasies, hallucinations, mirages, psychosis) of the superstitious, naive, infirm, or excitable.

With the globalisation of European colonialism, special attention was paid to the eradication of tribal curers, menstrual/birthing huts, and shamans as they represented the greatest threat to Christianity and Western medicine.58,59 Anthropologist Hilma Granqvist reported that the British colonial government in Egypt had prohibited the use of the traditional birthing chair,60 no doubt forcing the local women to assume the position most favoured by Western medicine and Christian missionaries.

13. The revelation of Mary

In the wake of these historical epochs, the following narrative shows remarkable traces of these genealogies in the psychic inventory of its speaker. Another woman, a psychologist, who I will call Mary, told me that during the birth of her third child and in the peak of a very strong contraction:

I went to a dark place, like a vault, where a man in suit appeared before me. I couldn’t work out why it was a man, I’m a good feminist woman, I don’t have male doctor, so why was it a guy and why was he in a suit for God’s sake? I asked him if he was my dead father or my grandfather, or an angel, or God and he replied ‘No’. I asked him if he was a ‘part’ of me and he replied ‘no’. I came through the contraction and sort of back to normal consciousness. When the next contraction came I found myself in the same black space and I called out for him and he came. I questioned him a few more times about what he was doing here and eventually he said, ‘I am here to help you birth this baby’. And my baby was born as he said those words. I felt really fragmented after the birth and I thought I might have been a bit psychotic and so I didn’t tell anyone about this experience. I know it sounds a bit ‘funny’, but I
thought I was so opened up that I might be possessed or something. I want to know if the experience was 'real' or not. I had a sense that I had gone into a higher level of consciousness to deal with the pain, you have to or you get taken over by it. But it was definitely like a religious thing, you know like a guardian angel. I suppose because I have a Catholic background I might just think like that.

14. Conclusion: re-enchanting childbirth and midwifery

To find germinal instances of these phenomena among contemporary New Zealand women may suggest that the seeds of ancient female religion were sprouted in the same fertile ground. These events may suggest the innate and organic ability to participate in healing non-ordinary states of consciousness orchestrated in our early evolution but closed-off by the force of cultural prohibitions. In 1969 in A Rumour of Angels: Modern Society and the Rediscovery of the Supernatural, well-known sociologist Peter Berger argued that concerns of the spirit would make a come-back.61 That same year, Transpersonal Psychology became a formal discipline and the study of NOSC its central research concern. If a 're-enchantment of the (Western) world' is occurring, as many suggest, perhaps it would be logical to find transpersonal visions arising among birth-giving women since, with the rise of the transpersonal movement and feminism, there is now more social support for such phenomena.

On an practical everyday level, it is important then, that all persons engaged in birth-giving (and the ritual of birth-giving) understand the ritual process and a birth-giving women's organic potential for participating in NOSC and that these special conditions can lead to transpersonal connections which can be experienced and shaped in diverse, local, and idiosyncratic ways. Further research should be conducted into this integral aspect of the human condition and birth-giving's potential for creating 'radical kinship with the cosmos'.

References


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