

Healing with “spirits”

Ethics issues arising from neoshamanistic practices and similar forms of alternative healing

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Abstract:

The communication with spirits in the “Non-Ordinary Reality” (NOR) represents a central element in neoshamanistic treatment methods. Shamanistic practitioners each have their own personal “power animals” or “spirit helpers”. These provide information that is used both for diagnostic purposes and for everyday practical decisions. With the healing rituals themselves, too, it is not the shamanistic practitioners who initiate the healing process, but the *spirits*. On the one hand, this viewpoint leads to a certain humility, but also presents the question of responsibility because the helping spirits from the NOR are made into authorities that define the actual happenings.

After an introductory part, which will introduce the basics of neoshamanistic practice, ethical problems that may occur in this context will be discussed on the basis of data from a qualitative study on neoshamanism in Germany. These problems are not restricted to neoshamanism and can also be found in other related practices of alternative healing but can be clarified particularly well by this example.

Keywords: Neoshamanism; ethics; ethnomedicine; complementary medicine; concepts of illness

The purpose of this paper is to give a short survey of neoshamanistic or – as they are also called – modern shamanistic practices which gained more and more attention of healing professionals during the last decades. Similar to some other forms of alternative healing these practices raise certain ethical and legal problems. As we are going to see, the structure of neoshamanistic practices which are based on similar ideological views, makes them particularly suitable for working out those problems. Although the following observations are partly based on the results of a field study carried out in Germany (Mayer, 2003) the resulting considerations have to be seen within a wider scope, regarding both other countries and other forms of alternative healing. In many respects, the differences seem to be slightly. The aim of the second part of my paper is not so much to provide answers but to point out a dilemma and to stimulate necessary discussion. To aid the understanding of the following observations, the key points of shamanistic cosmology (from a western psychological perspective) will first be briefly outlined, followed by a presentation of typical forms of modern shamanistic practice in the western world.

Definition and key points of shamanistic cosmology

Due to the varied and non-uniform use of the term shamanism¹, a broad definition should be given. The American psychologist Roger Walsh defined shamanism as follows:

family of traditions whose practitioners focus on voluntarily entering altered states of consciousness in which they experience themselves or their spirit(s) traveling to other realms at will, and interacting with other entities in order to serve their community (Walsh, 1990: 11).

¹ The term “shaman” in its current usage is a construct of the western history of ideas (see Znamenski, 2007, and von Stuckrad, 2003) and has developed into a wide area of meanings transcending ethnological boundaries.

The crucial points are: the deliberate entering into altered states of consciousness (ASC) with the intention of gaining information, service for the community, the assumption of one or more realms of ‘other reality’ (Non-Ordinary Reality – NOR) to which one can, in principle, have access, and the communication with entities (power animals, spirit helpers, etc.) in this ‘other reality’. During his training the shaman encounters his personal *spirit helpers* and *power animals* in this ‘other reality’, which act as guides, informants, and protectors during those travels.

Two other elements are of great importance in understanding shamanism. On the one hand, the shamanistic world view is *animistic*. The whole natural environment is experienced as being alive, and during altered state of consciousness the shaman can communicate with animals, plants, stones, etc. Another important element is the assumption of an *all-embracing connectedness*. In the shamanistic view all things are connected, and this applies both to animate as well as inanimate objects. Based on this assumption the transmission of information becomes plausible, a fact which appears impossible from a scientific worldview. Thinking in analogies and the ‘synchronistic’ interpretation of events are important when adopting this approach.

Shamanism in modern western societies

Core Shamanism

For many neoshamanistic practitioners, the workshops run by the *Foundation for Shamanic Studies* (FSS), developed by the American anthropologist Michael Harner, were a starting point for their own practice.² With his approach, called *Core Shamanism*, Harner tried to free indigenous

² Every year approximately 6.000 persons participate in neoshamanistic workshops run by the FSS throughout the world (von Stuckrad, 2005: 191). An estimation of the spreading of neoshamanistic practices as a method of healing in western societies is not possible as they are often integrated as a part of an eclectic combination of therapeutic

shamanistic techniques from their cultural context and develop a universal form reduced to its core elements. These introductory courses rapidly generated success for most participants, that is, they sometimes had very intensive experiences which were regarded as substantial and meaningful. The communicative exchange between participants and the mutual confirmation of their experiences strengthen their self-evidence, so that soon a more or less 'new' world view is consolidated (Lindquist, 1997). In advanced courses, the experiences and the knowledge can be deepened (for detailed information see Harner, 1990, Lindquist, 1997, and Jakobsen, 1999). It is obvious that *Core Shamanism*, like other forms of neoshamanism, has to be seen as a new development which adopts shamanic traditions in a creative way.³ Furthermore *Core Shamanism* should not to be seen as a technique only, as mentioned by Michael Harner, but as a "highly aggregated ensemble of properties of spiritual techniques of altering consciousness and of religious ideas" (von Stuckrad, 2003: 160 – Translation by G.M.). In practice, *Core shamanistic* techniques are always overlaid by private or culturally shaped spiritual concepts.

Ethno-shamanic approaches

In addition to these offers, there are further ways to approach shamanism, which place other focuses. Ethno-shamanistic workshops, for example, emphasize the authentic culture-specific background of the experts. Native shamans are invited and impart their individual experiences to those interested in the West. Provided they are serious, the interest in such approaches lies in the appreciation and checking of ethno-medicinal healing processes in terms of how they function, their efficacy and applicability. As a result, the spectrum of our conventional healing methods

methods. So there is a fair amount of nonmedical therapists and psychotherapists who use those techniques and refer to neoshamanistic (esoteric) cosmology and models of illness but don't call themselves neoshamans.

³ Those developments are not limited to western societies but can also be found in traditionally shamanic societies, e.g. in contemporary Siberia (Znamenski, 2007: 344-361).

should on the one hand be expanded and, on the other hand, these processes should be strengthened and maintained in their original cultures, where they are greatly threatened by the influence of western conventional medicine.

Neoshamanism as a healing method and as a spiritual way

Whereas the shaman holds a wide range of functions in traditional shamanistic communities (see i.e. Vitebsky, 2001), the focus of those interested in the West clearly lies on the function of the healer. A considerable percentage of the participants in shamanistic workshops are from the healing professions (Mayer, 2003). The range covers psychotherapists, medical doctors, health practitioners, nurses, most of them dissatisfied with traditional western medicine. Above all, they criticize the way human beings are seen, the underlying concepts of illness and also the claim to be in possession of the only valid approach to healing. In their opinion, shamanistic practices should become part of complementary medicine, aiming to use unconventional methods of diagnosis, to heal on a different level, and to accelerate the healing process. In the present health care system, this can happen only more or less covertly since these methods are not acknowledged, and even massively rejected, by the scientific mainstream.

In addition to such attempts at integration, shamanistic practices mainly find their place among the offers of the esoteric scene. They are used there for the purpose of self-actualization and self-healing: the workshop participants are taught shamanistic techniques so that they can “travel” for themselves and with their own responsibility. In addition, there is “travel” for others, i.e. working with clients and patients. Here, the shamans perform a function similar to counselors or spiritual healers. In addition to the support of healing processes for illnesses, personality development, the discovery of hidden potential, counseling for important life matters and concepts of how to lead a “good” life are goals of shamanistic activity.

Particularly the last point indicates that the reception of shamanism cannot just be reduced to the learning of certain techniques, but is regarded by many practitioners as a *spiritual way*. This individualist, non-institutionalized and non-hierarchical form of religiousness promises a direct and abrupt spiritual experience, which is practically automatically given to the shamanistic practitioner during the course of their work.

Illness and healing model

As indicated above, the illness and healing model in neoshamanism is different from the conventional medicine approach. Illness is mostly regarded as the expression of a (mental) imbalance, which can lead to a wide range of symptoms.

One significant concept adopted from indigenous shamanism is the divisibility of souls and thus of the loss of soul. Based on this idea, mostly in the context of traumatic experiences, a division of soul parts is possible, which are subsequently no longer accessible to the affected person. The division mostly occurs for the purpose of self-protection and represents a type of coping strategy, but leads to a general mental state characterized by a deficit, which may manifest itself in illness symptoms. Although the symptoms can be treated with conventional medicine, according to the shamanistic perspective this does not eradicate the cause. By the process of so-called “soul retrieval”, a method common in indigenous shamanism and adopted from this, the shamanistic practitioner can try to reverse this division and make the corresponding parts of the patient’s soul available again (Ingerman, 2003 & 1996).

All people questioned were of the opinion that the shamanistic treatment is successful as a complementary treatment to western conventional medicine or to standard therapeutic processes. The specific form of such a fruitful balance can be shown by one example: a speech therapist reported that she is given hints via communication with the “spirits” as to how she should best establish therapeutic contact with a child whom she doesn’t yet know and who is reluctant:

Then I ask my spirits: which games should I play? And then the parents are really surprised that the child thus establishes communication, but of course it doesn't establish communication with me, but with the game, and I'm merely allowed to take part.

Another woman reported that she occasionally works together with some psychotherapists

who send me their clients when they notice they just aren't getting anywhere ... the part that they actually want to heal isn't at home, as we so aptly put it, then I perform a soul retrieval and they then go back to the therapist ... that's a very nice job.

In both examples, the involvement of shamanistic practices leads to an acceleration of the therapeutic process. The speed with which therapeutic success can be achieved is mentioned by the interviewees as one of three central points which they believe distinguishes shamanism from other therapeutic approaches. Furthermore, you can supposedly reach deep and causal layers of the client/patient; transpersonal aspects were also taken into account. It thus concerns a very comprehensive approach in which ideally everything is taken into account: the social context, the ancestors, the natural and the embeddedness in cosmic contexts.

One interviewee who himself completed a western medical education and is above all interested in ethnomedical aspects points out one important point in the shamanistic healing concept:

The shaman mediates. For him, it is not about assessing who (...) is healthy or not, or giving some kind of stamp or diagnosis, but about rebalancing things that have become imbalanced and mediating between impulses in people, the unconscious and the conscious, between people and society and between people and the cosmos itself, between the holy and the profane. In this I see the central thing about him and of course this creates a great intensity.

As the quotation illustrates, the abstention from labeling is diametrically opposed to the symptom-based categorization attempts of western conventional medicine. A second important point concerns the significance of the *ritual* for the healing process. As Walsh suspects, the

efficacy of shamanistic treatment is first and foremost based on psychological factors, such as suggestion and expectations (Walsh, 1990). From placebo research, we know that the ascribed significance of a treatment/an action can play a greater role for the healing success than the type of action actually performed (see e.g. Moerman et al., 2002). The belief in the efficacy of a procedure doesn't necessarily have to be related to the adoption of a corresponding world view. Thus, all interviewees regard the belief in a shamanistic world view as advantageous for the therapeutic success, but not an absolute necessity. They regard the trust in the personality and competence of the person performing the treatment as important. But alone the great intensity, which develops as a result of the adequate performance of the ritual with the corresponding use of the symbols, can supposedly even be effective for a skeptical client by addressing personality layers which do not correspond to the skeptical ratio.

Neoshamanistic practice – communication with the “spirits”

Communication with spirits in the NOR represents a central element of the shamanistic method. The approach is mainly experience-based, individual and pragmatic. Everyone finds their personal “spirits” that suit them and their own cultural context, and learns through experience how to deal with them. They provide information that is perceived as reliable, which are used for diagnosis and healing, as well as for everyday decisions.⁴

⁴ There are, however, significant differences in psychological as well as in cosmological aspects between traditional and modern shamanistic concepts. The relationship to NOR in neoshamanistic introductory courses is primarily established as a harmonious one, and it is experienced in such a way by most of those involved. Accordingly, the element of fear is usually not present, or is at least underestimated. The “entities” one deals with in the NOR are friendly allies or teachers, and in no way threatening. They are strongly individualized and the practitioners “possess” them to a certain extent (Jakobsen, 1999: 222).

The induction of the ASC usually occurs with drums that are beaten in a fast, even rhythm and which put the experienced practitioner in a trance in a very short time. A high degree of control remains in this shamanistic state of trance which enables the shaman to actively shape the spiritual journey into other areas of reality – similar to a lucid dream. If they perform this ‘journey’ for a client, in this NOR therapeutic measures can be induced on a mental level with the help of the spirit helpers by e.g. searching for divided parts of souls and bringing them back to the affected person. After the ‘return’, the shaman reports back to the client on their experiences and can possibly offer a new interpretation for a problem. The new rational framework can even be regarded as healing per se and be therapeutically effective.⁵

Questions of responsibility – ethical perspectives

The diagnostic and therapeutic possibilities of the shamanistic approach are based on the systematic work with ASC and the assumption of meaningful communication with “spiritual beings” in the NOR. All interviewees stressed that it is not themselves that trigger healing processes or any other kind of effect, but that it is the *spirits*. The wisdom, strength and power lie outside of the person of the shaman and surpass the possibilities of the ‘mediators’. Their attitude is characterized by a mixed form of active acting and passively surrendering to the course of things because they regard themselves as part of a big event, which is ultimately outside of their personal possibilities to take control. This attitude should protect against “egomania”, but amplifies the question about responsibility. The helping “spirits” from the NOR become authorities that encourage decisions and considerably influence the behavior of the person in search of advice. If the information and images from the NOR *alone* induce the actions and the

⁵ See Winkelman for a survey on physiological bases and psychophysiological dynamics of shamanistic healing (Winkelman, 2000).

shaman is unaware of their translator and mediator role with all possibilities of self-deception and misinterpretation, this can become a problem.

Ethical assesement from the outsider perspective

In terms of these specific characteristics of neoshamanistic treatment problems of adequate ethical behavior may be triggered which cannot be easily solved. A systematic treatment of such ethical matters does not exist in German-speaking countries, and in English-speaking countries there is only very little literature on this topic (e.g. Stone et al., 1996, and Cohen, 2000). The reason is obvious: as long as a therapeutic process is not taken seriously by a science based on a biomedical conception of man, such ethical considerations are regarded as senseless. To demonstrate it by means of an example: whether a shamanistic remote treatment on an ill person is ethically reasonable without their knowledge then becomes a question in need of clarification, if the efficacy of such a treatment is not excluded from the outset. The same applies to the sector of 'faith healing' and spiritual remote healing. Thus, the ethical discussion is largely limited to the aspect of deception, charlatanism and greed. Modern shamans, as other traditional or alternative healers, would trick their clients into paying money with false promises and prevent a necessary conventional medicine or classical psychotherapy treatment. The 'treatment' per se can supposedly do no harm as it isn't effective. Reports of therapeutic success – if they are to be believed – are regarded as typical examples of a placebo effect. With this categorization, the therapeutic effect is once again regarded only from the biomedical level and not as a specific method.

A low degree of professionalization

From the viewpoint of practicing neoshamans, there are also scarcely any endeavors to systematically devote oneself to ethical matters. The main reason for this lies in the specifically individualist and experience-related approach to shamanistic practice: every shamanistic

practitioner has their own personal 'spirit helpers' and develops their individually colored method of 'travel' to the NOR. There is only a rudimentary curriculum for the training. Although there is generally a great wish for a better embedding in society and for cooperation with conventional medicine, the degree of professionalization is still low. That is, there are no big organizational structures that represent the interests of neoshamanism to society, operate quality assurance and attempt to protect the clientele from abuse by means of ethical guidelines. Studies to prove the efficacy of the method – also a feature of professionalization in the complementary medical sector – are largely lacking in neoshamanism, as well as proof of the possibility of damaging effects, which would force one to deal with questions of responsibility.⁶

A further feature, which distinguishes shamanistic practitioners from practitioners of conventional medicine, as well as from complementary medicine approaches with a holistic healing system such as homeopathy and TCM, is that the therapeutic competence is frequently regarded as part of a gift or of intuitive abilities. This gift does not have to be developed in lengthy training, but it exists from birth and merely has to be discovered. Here, traditional shamanism even offers a typical structure: the so-called shaman illness. The person affected is forced by the 'gods' or 'spirits' to retreat from societal normality and assume the role of the shaman. Neoshamanistic practitioners are partly guided by this pattern when they retrospectively

⁶ While there are some studies on the efficacy of traditional shamanistic healing (see e.g. Winkelman, 2000) there are not many studies on neoshamanism. As long as neoshamanistic practices remain rejected or not taken seriously there is no funding to carry out well-designed studies on its efficacy. Some research is done on positive effects of drumming, e.g. related to the therapy of drug addiction (Winkelman, 2003), and to the modulation of specific neuroendocrine and neuroimmune parameters (Bittman et al., 2001). The general problem of investigating the efficacy of neoshamanistic practices lies in isolating the decisive factors of such complex composite interventions which include elements of symbolic and ritual healing, of spiritual healing, of trance and altered states of consciousness, of music therapy, and sometimes of group psychotherapy. Healing processes can be stimulated e.g. by directly induced physiological responses, or by placebo effects (meaning responses).

reconstruct their biographical career right through to shamanism. Even if – depending on the individual world view – the ‘gods’ are replaced by the ‘higher self’, by inner mental drives to realize one’s ‘true self’, the relationship to spiritual-religious matters remains intact. As a tool of a divine principle, one can’t help but act correctly – unless one is not open enough, i.e. the channel is polluted by personal matters, e.g. blocked by selfish motives, so that the ‘divine energy’ cannot flow in a pure form. Accordingly, the ‘fall from grace’ of neoshamanistic practice lies in the human hubris, which fails to recognize the divine actions and attributes successful healing to one’s own potency; or – somewhat less reprehensible – in the fact that one is unable to properly distinguish messages from the *spirits*, which concern one’s clients, from those which arise from one’s own wishes and needs.

Legal aspects

A comparison with spiritual healing brings one further important – legal – aspect to light. One can understand neoshamanistic treatment methods as a sub-form of processes in spiritual healing (Wiesendanger, 1996). The reference to spirituality and transcendence is common to both as is the significance accorded to the giftedness, i.e. the ‘gift’ and intuition. Both approaches are holistic: they include the soul-spiritual, the mental and the physical level, although the actual healing takes place on the soul level and can then be transferred to the physiological level. In Germany, a “*Dachverband Geistiges Heilen e.V.*” (*Umbrella association of spiritual healing*) has formed⁷, which has drawn up a code of conduct for its members. A large number of these ethical guidelines are geared towards protecting the practicing spiritual healer from legal prosecution. According to the “German Non-Medical Practitioner Law” (HPG), people without a medical license or who haven’t successfully passed an examination to qualify as a non-medical practitioner

⁷ Apparently only a few of the neoshamanistic practitioners identify with this umbrella association *Dachverband Geistiges Heilen e.V.*, which also feels dedicated to shamanistic healing as a subcategory of spiritual healing.

are not allowed to work as healers. Accordingly, a member of the umbrella association undertakes to “never promise healing or even alleviation”, “not present oneself as a miracle healer”, warn their clients to “in no way exclusively place their hopes in them” and to explain that their activity serves the purpose of activating self-healing powers of the client and does not substitute the activity of the doctor/non-medical practitioner (see <http://www.dgh-ev.de/kodex.html> [19.3.2007])⁸. The stipulations of the German HPG practically forbid attempting to conduct efficacy studies of one’s own accord and urge the avoidance of everything that might resemble a therapeutically effective treatment beyond the activation of self-healing powers. This also includes deeper discussions of ethical matters, which concern the healing process itself and not just questions of the fee and the promises of healing. Thus, it is left up to the individual to what extent they adhere to this.

Recommendations of ethical behavior from an insider perspective

The American healer Loren Cruden is one of the few authors with an insider perspective of neoshamanism to explicitly address the topic “Ethics of Spiritual Practice” (Cruden, 1995: 160-162). Her recommendations apply for a wide range of areas of spiritual work. From the catalogue of 10 points, the first three will be mentioned here, as they particularly refer to the addressed topics and characteristics of a holistic illness or health model, which does not exclude the spiritual dimension:

Permission and trust. These must always be present and honored. It is not enough to know you can do something. You also need to ask "May I?" and "Should I?" These questions are addressed to the person you are working with and to the Spirit that guides you. They need to be asked at each

⁸ A good overview of the legal situation of spiritual healers and providers of alternative healing processes in Germany is provided by Dannecker (2005).

step of the way. Don't presume. Permission for one thing does not imply permission for other things.

Timing. This is knowing how not to interfere with peoples own processes of insight, discovery, and healing. It is knowing what to let be and knowing when to do or say what is needed for you to do or say This is wisdoms core.

Responsibility. Who has it, for what? Obsession with responsibility is an ego-trip, whether you use it to blame yourself or to be the savior. Avoiding responsibility is also unethical. A clarity in this comes with understanding what you are accountable to – then you know what you are accountable for. If you are acting out of neediness or in response to the pressures of expectations, you will keep bumping into problems with responsibility. The pressure to perform will lead you into deceptions, reliance on razzle-dazzle, shortcuts, and avoidance of important follow-up. It can lead to misjudgments. Work this one out – if you are clear you will be a wise and unassailable practitioner. Outcomes are not your responsibility – the present moment is.

These three points illustrate how greatly in these healing processes ethical questions are about personal and scarcely objectifiable responsibility. It is almost impossible to check to what extent a shamanistic practitioner abides by such recommendations and which soul-based and mental degree of maturity they contribute in order to not fall victim to the danger of self-deception and misjudgment.

Tips for the assessment of the seriousness of neoshamanistic providers

This also shows that there can scarcely be any objective criteria to assess the seriousness of a neoshaman. Nevertheless, a few tips can be provided (cf. also Wiesendanger, 1996: 398-421):

- Even more so than with the choice of a general practitioner, it is necessary here for there to be the right ‘chemistry’ between shaman and client so that a good basis of trust can develop.
- Caution is advised if advice is given to avoid conventional medicine treatment methods and the practitioner’s own method is described as a panacea. Serious providers regard a shamanistic treatment as accompanying or complementary, as it intervenes in the healing process on a different level than conventional medicine.
- Exaggerated promises of healing should also make one mistrustful. They tend to point to an exaggerated ego and an unrealistic self-assessment.
- An exaggerated ego can also be expressed by the fact that a provider of shamanistic healing treatments makes a lot of fuss about their own person, demonstrates guru-like behavior, swears by the treatment’s authenticity, excessively advertises with generated healing success and demands high fees.
- A further criterion for the seriousness can be whether or not someone offers shamanistic techniques as one of many other methods, or more or less limits themselves to shamanism, which suggests a great seriousness and a stronger commitment to the ‘shamanistic way’.

Thoughts in summary

As we have seen, neoshamanistic practice occupies an unclear status between therapy, counseling, religious practice and facilitating experience of spirituality. This considerably hinders the assessment of the phenomenon. It is necessary to look at it in a differentiated manner. As interviews with shamanistic practitioners in Germany have shown, serious forms of neoshamanism do indeed exist in which a strong personal commitment is predominant, coupled with an openness for cooperations with representatives of conventional therapeutic processes.

Attempts are made to respectfully encounter traditional shamanism, and endeavors are made towards a fruitful exchange in the ethno-medical sense. However, attempts to commercialize this by “show shamanism” are becoming increasingly apparent. This is likely to have three reasons: a) The increasing popularization of shamanism. This is almost inevitably accompanied by a trivialization. Some may like to adorn themselves with the label *shaman* because they believe that this will increase their attractiveness. b) An increasing number of people want to earn their living with offers in the esoteric sector (workshops, teaching, treatment). The associated existential pressure is likely to have a strong impact on the situation of the ‘scene’. c) The invitations and visits of native shamans do not remain without consequences. Some succumb to the material enticements and comforts of the western world by e.g. giving in to the pressure of the organizer and subjecting themselves to a western oriented time frame to optimize profits by using their treatment methods to treat illnesses every 15 minutes.

One might at first glance be surprised by the fact that everyday practical reference to reality and an animistic world view can coexist in our culture so easily. This is in any case the conclusion one reaches after talking to shamanistic practitioners in German-speaking countries. Most of them have reached their neoshamanistic practice via “detours” and experiments. These examples that show that in neoshamanism there are also authentic and deep personal experiences, which are linked to individual destinies. Communication with “spirits in the NOR” is quite matter of fact and does not lead to adjustment problems. Instead of unworldly remoteness, a healthy down-to-earthness could be ascertained with them, which offers a certain protection from misinterpretations and wrong decisions due to world views. The wish for a higher societal acceptance is strong, and the cooperation with conventional medicine institutions would be seen as fruitful. There are examples of successful cooperations, and the above-described adoption of shamanistic elements in various psychotherapeutic processes can be classed as an indication for the potency that may be contained in such connections. Such endeavors are however countered

by a reductionist medical illness model. An assimilation of complementary medicine approaches to conventional medicine was previously easiest when the reference to the esoteric-world view level was largely abandoned, as is shown by the example of yoga. There, professionalization, popularization and recognition by the health insurance companies were purchased through the loss of its spiritual roots. Yoga became a form of physiotherapy. The following paradox situation emerges for the modern shaman: if they want to get closer to public recognition and cooperation with conventional therapeutic approaches, they will have to undergo professionalization (efficacy studies, binding ethical guidelines). If they do this, they will encounter legal difficulties, unless they change their healing approach until it is unrecognizable so that it could subsequently no longer be described as (neo)shamanistic. Thus, they are forced to move on unsteady ground between therapy, curative treatment and spirituality, or operate religion on the fringe of legality and a special kind of spiritual guidance (cf. Wolf, 2005, particularly 144-151). As long as both the legislation and conventional medicine don't loosen their orientation towards a reductionist human and illness situation, this is perhaps a good thing. On this note, here is a conclusive, long quotation from a talk with a German shaman who took part in a three-year training to become a non-medical practitioner, but did not take the examination for the legal confirmation of this:

I completed the three years, which were exciting and interesting for me and (...) which highly benefited me to see people from this viewpoint. But then my shamanistic practice started to take off, people were coming in droves (...) I simply wouldn't have found the time to prepare for this exam, and I was torn – what should I do because I always thought I needed this to secure my career. And then I had (...) a shamanistic lucid dream in which I addressed the question: Should I take the exam or not? It was really funny. I stood there with a jacket emblazoned with Aesculapian staffs, and I was surrounded by my power animals, spirit guides, people I know who were laughing till their sides split. And then someone said: “And you think you're secure now?” and then I took the thing off and threw it away. And then I realized, I don't need it.

These statements express courage and resist the need for stronger regimentation. The risk here is not borne by the client, but by the shamans who devote themselves to their 'way' with a great deal of seriousness and do not shy away from the efforts of a non-medical practitioner training, but abstain from the legal confirmation. This expresses the willingness to take responsibility for one's own actions, borne by a great spiritual-based trust.

The predicament characterized above, of being situated between tradition, professionalization, and commercialization applies not only to modern shamans, but also many other healers. There are at present no easy solutions, and no simple answers can be given. In the last few years, callings for a change of perspective concerning the medical-therapeutic relationships have become louder: the client or patient should no longer be seen in merely a passive role, i.e. subordinate to the dictating doctor, but be more respected in their right of self-determination: "Paternalistic behaviour is no longer regarded as ethically appropriate, save in the most extreme of cases. It may, in addition, be unlawful if the extent of a doctor's coercion vitiates the patient's consent" (Stone et al., 1996: 265). Furthermore, greater significance should be given to the aspect of personal responsibility. As much as this should be promoted for the field of conventional medicinal-therapeutic care, this applies even more to the fields of complementary-medical processes. Here, a revision of the existing legislation should be demanded, which abandons the one-sided reference to the protection against unqualified treatment in favor of the possibility of self-determination of the client/patient (see Cohen, 2000: 111-124; Stone et al., 1996: 257-269).

In conclusion, to once again address the above quotation of the shaman: the question in the 'lucid dream' "And you think you're secure now?" does not indicate any security to be attained, but an uncertainty of existence due to legal regimentation, which it is impossible to overcome and which must be responsibly faced up to. This applies to both the shamanistic practitioner and their clientele.

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