The Haunting: Cultural Studies, Religion and Alternative Therapies

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In his introduction to the 1988 collection *Not Necessarily the New Age*, Robert Basil claimed that although millions of people had experimented with non-traditional spirituality and with alternative therapies, and although hundreds of books had been written on New Age thinking, there was not one "intelligent tour" of the New Age movement and very few skeptical studies (9). Nearly twenty years on, those hundreds of New Age books no doubt number in the thousands, but the sceptical, critical or simply cultural studies of either the New Age or of alternative therapies have not proliferated at the same rate. There exist a number of sociological studies of the New Age (e.g. Heelas, Hanegraaff), a few Christian critiques of New Age thought (e.g. Rhodes), and a number of academic histories (e.g. Sutcliffe).¹ Alternative therapies have fared rather better than the New Age within the academic literature. Studies of alternative therapies have proliferated within both the medical and social sciences, especially in fields such as medical sociology, nursing, and the medical humanities, where they are examined as sociological, ethical, legal

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Iowa Journal of Cultural Studies 7 (Fall 2005) Copyright © 2005 by The University of Iowa and medical phenomena. As spiritual phenomena, they have received a largely appreciative interest within feminist studies of religion, particularly for the critique of patriarchy implied by the central position of women, as healers and leaders, in some traditions, such as Wicca and modern Spiritualism (including Theosophy) (see, for example, Dixon; Roe). Within feminist studies of religion, the practice of alternative therapies is incorporated into a wider reclamation and recognition of women's authoritative roles in various past and contemporary religious traditions, especially Goddess Religions (Starhawk; Starhawk and Valentine) and Feminist Spirituality (Christ; Jantzen). There is also a significant, if marginalised, interest within the study of Western Esotericism, in particular with regard to the types of bodies and ontologies proposed by the various traditions understood to constitute the discipline's corpus.² Given both this multi-disciplinary academic attention and the weight of popular interest in these practices worldwide, it is a surprise to realize that there is a relative paucity of studies examining them from a cultural perspective. cultural studies, in particular, has had very little to say about the New Age/therapy/alternative health cluster. This is part of the much broader exclusion of religion and spirituality from cultural studies analyses.

There are, of course, exceptions, most of them biting critiques. Susan Sontag's famous attack on metaphysical views of illness in *Illness as Metaphor*, while not situated within cultural studies, has been influential (see, for example, a sympathetic critique of it in Stacey). Rosalind Coward's thorough critique of the concepts of nature and wholeness that underpin alternative health practices (*The Whole Truth*) and Andrew Ross's analysis of New Age philosophy's paradoxical relation to scientific rationality (*Strange Weather*) are two other important contributions. Self-help culture seems to have received more attention than alternative health practices (e.g. Kaminer, Lichterman, Rimke, Rose)—a paradoxical situation, given cultural studies' traditional skepticism about psychology and its interest in the body.

By and large, though, alternative therapies seem to have escaped the attention of mainstream cultural studies, whether as medical, bodily, or spiritual technologies. They have certainly escaped the *celebratory* attention it has accorded most popular cultural practices over the last few decades. As Wendy Parkins has argued, even the self-help genre (which is, perhaps, the best represented of the New Age/alternative health / therapy cluster within cultural studies) "has probably received insufficient academic attention so far and the attention it has received has tended to be negative or wary at best" (146). To take just a few examples: for Rimke, the public sphere and public responsibility "are negated by a life of self-help" (73); for Coward, the emphasis on personal responsibility "rarely generates political empowerment" (204); for Root, "much of the New Age's emphasis on either individual or universal goals means that, of necessity, it forsakes the goals of social growth (74); for Miller and McHoul, intuition, a core New Age/alternative concept, "is no more than the inference-making machine used by every member of 'rational society" (126).

If alternative therapies have escaped the celebratory attention that typifies much cultural studies work, they have also largely not been accorded the detailed, contextual, localized studies that have characterized the best of cultural studies work. Some studies see them as part of sweeping social changes, such as the rise of narcissism (Lasch), while many others have chosen to focus on what diverse therapies share, rather than to analyse particular practices separately, let alone specific communities or contexts of users and uses.⁴ Lichterman's study of a particular community of self-help readers is a rare exception to this tendency to generalize or aggregate.⁵

Most cultural studies approaches to alternative therapies have thus been examples of a great "unveiling" (Sedgwick 141).⁶ Nature is unmasked as culture; intuition is unmasked as social rules; liberation and empowerment as still more subtle forms of enslavement or of narcissism. This exposure, with its concomitant theoretical reliance on "an infinite reservoir of naïveté in those who make up the audience for these unveilings" (Sedgwick 141), runs counter to the respect nowadays accorded to the users of most other pop cultural forms. To what do we owe this special distrust? Two reasons stand out. First, the almost total exclusion of questions of religion and spirituality within cultural studies, where religion is not so much critiqued as sidestepped, either for reasons of cultural sensitivity towards indigenous groups, or because its falsity is taken as self-evident. In short, religion is, in the words of John Frow (who nonetheless argues for its absolute centrality to cultural studies), "an embarrassment to us" (207). The second reason for the almost exclusively negative stance taken towards therapeutic culture is the general (often implicit) disparagement of the discipline of psychology, whether as part of cultural studies' foundational support of collectivities rather than individuals (and the concomitant focus on the social rather than the psychological) or, more latterly, in the wake of the significant intellectual uptake of Foucault within cultural studies.

But a moment seems to have arrived wherein cultural studies is seeking to question some of its hitherto unexamined tropes and its exclusions. Nick Couldry claims that the time has come for cultural studies to "radically expand the aspects of culture we study" (3). Over the past thirty years, he claims, cultural studies has entrenched its own set of exclusions, downplaying, among other things, the "middlebrow," the cultural experience of elites, the cultures of business and science and forms of popular culture that are not "spectacular" or "resistant." Most pertinent here are attempts to address cultural studies' "failure [...] to come to terms with, to theorize in any adequate way, what is perhaps the most important set of popular cultural systems in the contemporary world, religion in both its organized and disorganized forms" (Frow 207). This project has scarcely begun within mainstream cultural studies, but a discourse of spirituality has nonetheless occasionally crept into some mainstream cultural studies writing, albeit largely as a metaphor for the affective textures of everyday life. Thus, Oprah can be read as an exploration of the "spiritual everyday" (Parkins); or shopping as an act of love (Miller). The work of Luce Irigaray has provided some in feminist cultural studies with an avenue to propose a feminine subjectivity that is implicitly related to divinity. This avenue has been relatively palatable within mainstream cultural studies since Irigaray's work is based on a widely accepted critique of phallogocentrism. Still: detailed, empirical, ethnographic and theoretical studies of New Age philosophies-and even less of alternative therapies - are still thin on the ground in cultural studies.

And yet, there are very good reasons why cultural studies might have a legiti-

mate interest in alternative health practices, even within its traditional thematics and preoccupations. For one thing, they are an increasingly important component of popular culture. The New Age/spiritual/alternative movements and their concomitant healing techniques have moved from the counterculture to the mainstream (Basil 9), and the line between alternative and conventional medicine, self-care and professional care, has become blurred (Goldstein 940). Indeed, as Michael Goldstein points out, for many (educated, computer-literate) individuals, "conventional medicine is now alternative medicine, the one they seek last" (940). Alternative therapies are now used by millions of people in the West, whether as first or last resort, and whether in their more conventional guises, such as naturopathy, or in more marginal forms such as psychic healing, kinesiology, or reiki.⁷ They are deeply, if paradoxically, embedded in consumer culture. Of further interest, at least to feminist cultural studies, is the fact that they are dominated by women, both as clients and practitioners.

Alternative therapies are obvious candidates for many of cultural studies' core contemporary themes—resistance, hybridity, interpellation, embodiment, appropriation. They are a useful lens though which to understand contemporary shifts in value and belief. They are implicated in, among other things: an increasing skepticism about and resistance to authority, including medical authority; a crisis in legitimation of scientific knowledge (Lloyd et al. 135); a reaction against the perceived rationalism of late modernity (including both a nostalgic yearning for a supposedly "simpler" and more "natural" past and a utopian longing for a redemptive future); a rise in individualism; an interest in holistic thought; the rise of the body as an object of self-management, and so on. They thus have much to reveal about contemporary values and beliefs, especially about identity, the body, the self, nature, and technology. This broad-brushstroke approach is one of the important contributions cultural studies can make to an understanding of these practices, so long as it is understood, as we have argued above, that it doesn't replace the kinds of nuanced localized studies that are another crucial component of cultural studies.⁸

Finally, and not inconsequentially, alternative therapies are a prime example of the identity work so fundamental to late-modern culture, and, as such, open to the kinds of Foucauldian analyses central to so much cultural studies work. This is, in fact, the approach taken by most of the cultural studies work on self-help/therapy that we have seen. Most such studies still tend to lump alternative health practices into self-help, and self-help into a larger category of therapeutic/self-management practices. Nikolas Rose, for example, argues that despite the heterogeneity of psychotherapeutic practices, the moral codifications they embody revolve around a relatively limited set of terms: "the need to work on the self to improve the quality of life, the achievement of autonomy, the release of potentiality, the opposition of a restricting dependency to a liberating freedom" (Governing 245). Foucauldian-inspired critiques see such practices as paradigmatic technologies of the self, which they read via concepts such as governmentality, confession and discipline (e.g. Rimke; Rose). Although we share Paul Lichterman's concerns about the way such meta-level approaches can tend to amalgamate quite disparate practices into "an indistinguishable part of a unitary cultural vector" (423), they nonetheless represent an important arm of any critical evaluation of the New Age/ alternative therapies and typify cultural studies approaches, and so we will consider them in a little more detail.

Foucauldian Approaches

The most common Foucauldian approach to therapeutic culture, in which Foucault is used to critique normalization processes, is best represented in the work of Nikolas Rose, especially *Inventing Ourselves* and *Governing the Soul*. Rose's particular targets are the matrix of disciplines and practices he terms "psy" (psychiatry, psycho-analysis, psychotherapy), which he claims act as "therapies of normality," "psychologies of everyday life" and "pedagogies of self-fulfillment" (17). This type of Foucauldian approach allows one to critically examine the costs of contemporary forms of subjectification. Late-modern freedom, says Rose, presupposes and produces an autonomous choosing self whose health and happiness are understood as the outcome of individual choices made as part of a universal quest to make a meaningful life for oneself (*Governing* 231). For a Foucauldian, such a freedom is at best equivocal, for it is, paradoxically, an *obligation (Inventing Ourselves* 17):

We have been freed from the arbitrary prescriptions of religious and political authorities, thus allowing a range of different answers to the question of how we should live. But we have been bound into relationship with new authorities, which are more profoundly subjectifying because they appear to emanate from our individual desires to fulfil ourselves in everyday lives, to craft our personalities, to discover who we really are. Through these transformations we have 'invented ourselves' with all the ambiguous costs and benefits that this invention has entailed. (17)

The vast armory of techniques of self-transformation that go under the catch-all rubric of New Age/alternative therapies can be seen as part of the "psy" matrix. They operate within the same "moral territory" (Rose, *Governing* 245) as the psy disciplines, and they are in many ways instruments of a cultural dominant. In Foucauldian terms, they are technologies of the self, or mechanisms for "governing the soul," as Rose puts it.

Alternative therapies are disciplines in the Foucauldian sense, in that they are acts of self-making through submission to bodily regimens in contexts in which power is (arguably) unevenly distributed. Moreover, they often rely on the confessional mode that Foucault saw as paradigmatic of processes of subject formation in modernity. Rose describes this mode thus:

> In confessing, one is subjectified by another, for one confesses in the actual or imagined presence of a figure who prescribes the form of the confession, the words and rituals through which it should be made, who appreciates, judges, consoles, or understands. But in confessing, one also constitutes oneself. (*Governing* 244)

Alternative therapies can be seen as a radical extension of the confessional mode, since healing (and subject formation) occur through narrative, ritual and other bodily techniques in which the subject's entire body is made to speak the truth of the self. For in most alternative therapies, the body itself is understood as a living metaphorics, a set of signs to be decoded and rendered meaningful. Alternative therapies are particularly potent sites of subjectification since they combine this confessional mode with the mechanisms characteristic of disciplinary power. That is, they enjoin participants to adopt techniques of self-management and self-

surveillance—whether it be by changes in diet, posture, lifestyle, thought patterns, or even whole life philosophies—as part of their process of healing, self-understanding, or self-transformation. They are, then, disciplinary technologies *par excellence*.

While there is no doubt that alternative therapies form part of an overarching contemporary cultural logic (that of the "therapeutic' relation to the self" [Rose Governing xx]), they are no simple offspring of the "psy" octopus. Hybrid and dynamic, they appropriate diverse traditions, knowledges and techniques with an often alarming political and intellectual insouciance which means that, whatever else they are, they are no simple fruit of modern psychology. Indeed, many are themselves critical of classical psychology and may even rely on a refusal to construct biographical or psychological interpretations and narratives (a point that should make them open to more celebratory Foucauldian readings as non-normative body technologies predicated on and helping to bring into being non-normative forms of corporeality.) In such a reading, the very eclecticism of alternative therapies becomes less a source of critique as a reminder of the spaces and gaps they open up, since they arise out of and/or appropriate themes, techniques and ideologies from a diverse range of bodily, sacred, or healing technologies. Thus, to understand them properly, one must think them not only in relation to psychology, therapy culture and the New Age, but also in relation to much longer and more diverse traditions of thinking about selfhood-in particular, to a host of spiritual and religious traditions.

Alternative Healing and Religion

In his delineation of the New Age Movement's major trends, Wouter Hanegraaff identifies the religious dimension of healing as the implicit underpinning of contemporary alternative medicine practices:

Because the human body is usually regarded as modelled on the wider universe, medicine has its natural place in a general cosmological or metaphysical context. For this reason, it is common for the domain of healing to shade into the sphere of the religious *per se*. (44)

Hanegraaff emphasizes that the diverse practices that fall under the umbrella of "alternative healing" are not purely a set of "medical" intervention techniques divorced from historical, social and metaphysical contexts; rather, implicit to most (if not all) healing practices are religious frameworks and practices. As Hanegraaff argues, alterative therapies should be considered from both historical and cross-cultural perspectives, rather than simply as a "historically isolated and more or less anomalous phenomenon within modern society" (46). It seems obvious that such an analysis should not exclude religious and/or spiritual discourses, however "suspect" such subjects are considered to be within cultural studies' disciplinary boundaries. As John Frow argues, cultural studies needs "to take religion seriously in all of its dimensions." Such work requires an "ability to respect and honour traditional belief systems," which requires negotiating, rather than ignoring, the "tension between a religious cosmology and the Enlightenment ethos which governs, and which rightly governs, our work" (208).

Encapsulated in Hanegraaff's account of healing is both a form of spiritual "sal-

vation" in the Christian sense of the term, as well as the pragmatics of effecting a physical cure. It is the interconnection between these two spheres—physical/ metaphysical—that gives many alternative therapies enduring appeal. The degree to which underlying spiritual traditions are understood, examined and taken up by individual clients is, of course, variable, but the centrality of specific types of religious and spiritual beliefs cannot be summarily ignored. These traditions provide the viewpoints from which arise the blurring of distinctions between mindbody-spirit, and the understanding that an individual has reciprocal effects (and affects) upon others and the wider environment. Religious and spiritual traditions furnish alternative healing practices with the core ontological characteristics that define the forms of subjectivity that are foundational to their specific healing practices. The two examples that follow—that of acupuncture and Western herbalism—are treated briefly here to signal the richness and diversity of the religious and spiritual heritages that underpin many modalities of alternative healing.

The relation between a religious belief system and alternative medical practice is clearly exemplified by acupuncture (one of the branches of Traditional Chinese Medicine).⁹ This practice (of which there are different types and schools)¹⁰ is founded on the understanding of the individual human being as an interconnected microcosm of the greater universe. The beliefs and worldview of Taoism sit at the heart of these cosmological relations.¹¹ This includes Taoists' belief that human life is comprised of "three treasures": vitality (*jing*), energy (*qi* or *ch'i*) and spirit (*shen*), and that these elements must be kept in harmony with one another for optimal health, as imbalance results in disease. *Jing* is associated with "basic body functions" and creativity, including procreation; *qi* is understood as a vitalistic force, the life-animating essence associated with movements and physical strength; while *shen* or spirit is associated with consciousness and spirituality, including the intellect (Hartz). Interestingly *shen* also refers "to both the deities that inhabit the universe (and, in the view of some schools, the human body) and to the personal spirit of the individual" (Fischer-Schreiber 136).

Of the "three treasures," Qi is particularly important, as it is able to influence both *jing* and *shen*. Acupuncture is a healing modality focused on regulating qi as it travels on pathways—meridians—throughout the body-mind (Hartz 64-65; Fischer-Schreiber 136-137). These meridians comprise an energetic anatomy, of which the body's organs are also a part: "organs are considered energetic, not anatomic" (Pearl and Schillinger 172). In this complex system numerous types of qi, both internal and external to the physical body, are balanced and regulated through the placement of fine needles that redirect, amplify or sedate the interplay of numerous energetic forces. For example, to name only a few types of qi affecting and comprising the individual: cosmic qi (from breathing), grain qi (from food), nutritive qi (from blood), and protective qi (the energetic field around the physical body) (Grossinger 339).

At the heart of this healing modality (which is receiving ever increasing acceptance in Western societies)¹² is a religious and spiritual framework that engages directly with the "spiritual" constituents of the human, including "spirits" believed to inhabit the wider universe, whether they are the spirits of divinity, the deceased or spirits of the weather.

Conversely, Western herbalism would seem to carry none of the implicit religious influence that Traditional Chinese Medicine does. However, its founders and precursors can be seen amongst Pagan and neo-Pagan religions, for example Wicca (Witchcraft) and folk medicine practices, which share a common belief that the human being is part of a divinized nature and can therefore be cured by the natural world's resources (Ezzy 3). This in itself illustrates a belief in the interconnection of nature-human-divine, yet beneath these "natural" knowledges are further layers of esoteric and cosmological influences. For example, Nicholas Culpepper's (1616-1654) popular Herbal, The English Physitian: or an astrologo-physical discourse of the vulgar herbs of this nation (1652) was discredited because of its astrological underpinnings (Grieve xiii). Brian Inglis notes that the stripping away of herbal medicine's astrological and magical associations-usually considered the domain of Western Esotericism-was what made it easier for the medical orthodoxy to appropriate herbal medicine. Inglis cites William Withering's Account of the Foxglove, 1785, as an early example of this process (32). However, as Culpepper's Herbal illustrates, underpinning the pharmaceutical constituents of plants and their curative effects is another order of "medicine."

Astrological and magical knowledge belong to the corpus of the Western Esoteric Tradition. This tradition is infused with material from various religious traditions both Eastern and Western. It has itself been subject to marginalization within Religious studies. However, its areas of study are increasingly gaining a presence within the academies; the Sorbonne in Paris, for example, has a chair in the "History of Esoteric and Mystical Currents in Modern and Contemporary Europe," and topics such as New Age Culture and the modern Theosophical Society are increasingly examined within broader Religious studies programs.¹³ Esotericism is essentially a discipline concerned with the study of physical and metaphysical relations including, more specifically, processural relations as a spiritual teleology-the unfolding of a universal wisdom. The progressive movement towards a spiritual subjectivity, towards "inhabiting" divinity, is one of its foundational premises (which has also had a central influence on New Age discourse).¹⁴ Distinguished scholar of the Western Esoteric Tradition, Antoine Faivre, identifies "the activation of forms of logic that are not classical (nonbinary)" as one of the Tradition's key aspects (Theosophy xxx). It is exactly this style of logic that is utilized in the attribution of planetary correspondences to herbs.

As delineated by Faivre, the first tenet of Esoteric discourse is "correspondences." It calls for an understanding that "all things" exist in relation to one another (both the visible and invisible) and, further, that every phenomenon "hides a secret." Such a perspective proposes various hermeneutic approaches to decipher the mystery in each "thing" that both situates each singularity and relates it to "all" (Faivre, *Access to Western Esotericism* 10). An illustration of correspondences as a precedent with regard to healing, herbalism and astrology is exemplified in the work of Marsilio Ficino (1433-1499), who devoted much attention to studying the effects of the planet Saturn and proposing cures for the melancholia (the philosopher's illness) it produced. Ficino's system continued the medieval (Galenic) belief that an individual is primarily influenced by one of four humors (phlegmatic, melancholic, sanguine, choleric¹⁵) and therefore they were predisposed to particular illnesses: for example, an overly Saturnian person¹⁶ could alleviate her seriousness and depression by recourse to Jupiter, its energies infused into the body by taking medicines and establishing relations to objects understood to bear Jupiter's signature, including silver, amethyst, white sugar, mint, honey, lamb, peacock, eagle, calf, and "constant," "balanced," "religious and law abiding" thoughts (90-91).

Ficino's system was not astronomically¹⁷ reductive, in the sense of attributing illness only to planetary influences.¹⁸ He also considered "natural" and "human" causes, the soul and physical states required for the scholar's practice of study, as the following quotation illustrates:

There are three major reasons why scholars become melancholiacs. The first is heaven-caused, the second is natural, and the third is human.

It is heaven-caused because Mercury, who invites us to begin our studies, and Saturn, who works them out and has us stick to them and make discoveries, are said by the Astronomers to be cold and dry... and this dry condition doctors trace to melancholy.....

The natural cause seems to be that because the pursuit of knowledge is so difficult it is necessary for the soul to remove itself from external things to internal things, as if moving from the circumference to the center.... To be fixed at the center is very much like being at the center of the earth itself, which resembles black bile.

Thus black bile rigorously provokes the soul so that it might gather itself into one piece, stay in one piece, and be contemplated. This drives the student to the center of each thing, like the center of the world, and moves him to understand the highest things, since it is in accord with Saturn, the highest of planets.

Contemplation itself, on the other hand, with a kind of rigorous gather-

ing up, almost a seizing, contracts one's nature like a black bile. (6)

Ficino's system called for an intertwining of the celestial, spiritual and physical, and the linking of these spheres of life required an understanding of an invisible sympathy existing between phenomena. The presentation of corporeality that results is both physical and metaphysical: the individual is presented as being capable of manipulating the invisible agencies of which it is constituted (in particular, for Ficino, three types of force: animal, natural and vital).¹⁹ Such a perspective is a clearly evident aspect of many alternative healing practices, which seek to locate both the cause and the cure for disease in wider contexts than those provided by orthodox biomedicine. The recounting of Ficino's esoteric healing techniques may appear curious in this context, yet the logic with which he associated emotions, plants, animals, specific thoughts, and celestial bodies-the tenet of correspondence-is the same framework of relations that informs Louise L. Hay's contemporary attribution of specific diseases to emotions/thoughts, or Annette Noontil's attribution of specific body organs to concepts (for example, she contends that problems with the nervous system are caused by unbalanced communication). Various forms of esoteric anatomy underpin their conceptualizations. Attributions of emotional states to body organs is also a feature of Traditional Chinese Medicine: "Joy injures the heart, anger injures the liver, over-concentration injures the spleen, anxiety injures the lungs, fear injures the kidneys" (The Yellow Emperor's

Classic of Internal Medicine qtd. in Grossinger: 345).

Alternative Therapies as Bodily Practices

As these examples of acupuncture and Western herbalism make clear, any attempt to understand contemporary uses of alternative therapies is greatly enriched by an understanding of their religious/spiritual context and history.

Clearly, connecting alternative therapies to histories and disciplines other than psychology opens up a great richness of perspective. But any engaged study of alternative therapies involves more than just tracing new genealogies of concepts of the body. It also involves taking them seriously and not *a priori* negatively as bodily *practices*, and being open to the experiential and conceptual richness of many of them and of the modes of corporeality and intercorporeality²⁰ they offer. This is where alternative therapies have much to offer cultural studies, with its preoccupation with practices, concepts and philosophies of the body and embodiment.

One entry point is to consider the question of the bodily effects of alternative therapies. We believe that they need to be taken seriously and to be considered phenomenologically as well as discursively-and of course medically, though a detailed consideration of this latter will lie outside the expertise of most of us in cultural studies. But politically speaking, we do need to take into account the actual health benefits that can and do arise from the practices. While of course a Foucauldian framework allows one to understand how the very expectation of longer life, vibrant health, an enriched psychological life and so on is historically and discursively produced, and how these expectations can be individually and socially burdensome, no account of alternative therapies is complete if it takes into account only this critical and discursive position and ignores the benefits and successes of medicine, whether orthodox or alternative (cf. Williams 20). For this would represent a denial of "the everyday experiences of the lay public" (Kelly & Field, qtd. in Williams: 20).²¹ As Eve Sedgwick puts it, in her compelling argument against the dominance of what she calls "paranoid" modes of reading, "I'm a lot less worried about being pathologized by my therapist than about my vanishing mental health coverage" (141). What she calls paranoid reading strategies are a vital part of the "ecology of knowing" (145), but they are just one strategy. Their unquestioned use may, she claims, "unintentionally impoverish the gene pool of literary-critical perspectives and skills" (144). Thus, we are not ashamed to admit that we're delighted when alternative therapies do indeed work to effect positive transformation-the disappearance of chronic gut pain, the removal of back pain, the relief of stress.

As medical techniques their effectiveness is variable and unpredictable (ranging from startling cures to lack of response). This in itself should be enough to suggest that they operate in rich cultural territory. The question of their medical effectiveness is inextricably bound up in their conceptual and theoretical richness. Alternative therapies have much to offer cultural approaches to the body and embodiment, both as windows onto a significant socio-cultural shift in attitudes to and practices of the body, and as potential sources of conceptual and theoretical models *of* the body. They give insight into the complexities, contradictions and changes in contemporary Western understandings of the body, including contemporary skepticism about biomedi-

cine and scientific-rationalist conceptions of the body. Spiritual and/or magical understandings of the body, which have always persisted in pockets, are being revived and refashioned, often to coexist as seemingly incommensurate bedfellows with a host of other contemporary discourses about the body. Contemporary popular models of the body are, then, plural, dynamic, and conceptually "impure."

This multiplicity and impurity is part of their popular appeal. It is also, of course, part of their academic appeal. One could imagine, for example, the work of Foucault being put to quite different uses - in celebratory rather than critical mode. Likewise, the relation of the subtle body model to Deleuze and Guattari's "body without organs", for example, is as important from a genealogical point of view as from a philosophical one, and we have developed it at length elsewhere (see Johnston and Barcan). But our aim is not to bring alternative therapies to account by weighing up their conservative and radical elements, nor is it to justify or redeem, or to point out their hidden monstrosity or deviance, or to link them to currently popular theorists or philosophers. Rather, we see the task of tracing philosophical links between, say, Deleuze and Guattari and some alternative therapies, as a way of finding pathways between cultural studies and other discourses and traditions, rather than of justifying alternative health practices by "translating" them into terms that meet current standards of theoretical "acceptability." As active and engaged participants in aspects of this culture, we want to be expository and analytical in a way that is neither naïvely celebratory, on the one hand, nor a priori dismissive or unsympathetic on the other. We claim that they are important objects for cultural studies to examine and, moreover, alternative therapies may themselves have much to teach cultural studies. In particular, they can offer cultural studies a variety of new ways of conceptualizing the body and intersubjectivity.

Many alternative therapies, though not all, rely on models of the body that radically challenge modern Western paradigms and which are being actively *lived* by thousands of late-modern subjects. One particularly compelling example is the model of subtle bodies, which underlies a variety of alternative health practices, from yoga to reiki to spiritual healing. We have explored the model of subtle bodies in greater detail elsewhere (see Johnston and Barcan), but will consider it briefly simply as a pointer to the fact that many alternative therapies imply modes of corporeality that are anything but that of the dominant autonomous subject of modernity.

To consider an individual as comprised of a subtle body is to propose the self as inherently extensive, open and multiple, a stark contrast to the bounded singular subject of modernity. In general, the concept of subtle bodies presents the subject as comprised of interpenetrating and extensive sheaths of matter-consciousness (often termed "energy") that extend beyond the physical flesh boundary: the physical body is considered as one sheath or manifestation of matter-consciousness.²² Those "bodies" that do extend beyond the flesh are understood as imperceptible to the five senses, but may be perceived by what is generally termed "intuitive" and sometimes "psychic" senses or vision.

This form of subjectivity is most clearly present in Eastern conceptualizations of the body—mind, specifically Hindu and Buddhist traditions (prominent in Yoga and Tantra and Tibetan Vajrayana), but the concept can also be found in many

other cultures including the indigenous cultures of North America and Africa, Polynesian Kahunas, ancient Egyptians, Incan and early Christian cultures (Tansley 5). It also has precedents in the foundations of Western philosophy, as cited by contemporary theorist Elizabeth Grosz, who refers to Aristotle's *pneuma*, a universe animated by an energetic source. Grosz even identifies the subtle body as a precursor to the psychoanalytic concept of the "body image" (63).²³

Subtle bodies have also been popularized through a Western adaptation presented by the modern Theosophical Society, most directly through the writings of H. P. Blavatsky and Alice Bailey. This model adapts Hindu and Buddhist schemas and combines them with elements drawn from the Neo-platonic Western Esoteric tradition. It is their seven-"bodied" subject that has been largely re-presented within New Age literature. Even though across these various traditions the number of subtle bodies is debated and varies, it is of significant note that each tradition believes the individual to be inherently plural, comprised of a multiplicity of interpenetrating and "invisible" bodies.

Beyond Foucault

As the example of subtle bodies makes clear, the conceptual and experiential world of alternative therapies is rich-one in which bodies know, think, communicate and intersect in radical ways; in which the realm of animals and objects is not utterly distinct from that of humans, in which bodies are open to intersubjective indeed intercorporeal-relations of the most far-reaching kind, enjoining practitioners to create a new ethics of responsibility (Johnston; Oliver). Such a model would call up another kind of Foucauldian responses-one that stressed less the normatively subjectifying power of these practices so much as their potential to create new types of bodily experience and, potentially, new aspects of subjectivity. Moreover, the therapeutic interaction itself is not simply subjectifying-though it is always that. Nor is it even merely an intersubjective engagement; rather, it is best understood as an intercorporeal (and hence mutually subjectifying and transforming) encounter. For those who see the body as the ground of subjectivity, as we do (following Merleau-Ponty and others), the variety of bodily experiences that occur in alternative therapy rooms cannot logically be understood as simply moments where a dominant mode of subjectivity is inscribed, as the Foucauldian paradigm might seem to imply.

The Foucauldian account is one of the best paradigms for understanding the rise of the modern concept of self and for opening up critical spaces in this cultural dominant, and along with postcolonial approaches, it is perhaps the most self-evident approach within cultural studies. But to our mind, it needs augmentation and enrichment, in ways that do not so much contradict it as shift analytical focus. In the case of alternative therapies, a shift is needed towards a richer recognition of both the bodily experiences and the concepts *of* the body they make available. This involves a number of conceptual moves. First, the programmatic pessimism of Foucauldian accounts of selfhood needs to be reconsidered. In the context of alternative therapies, this would mean evading the implicit assumption that self-constitution via confessional and/or corporeal rituals is *a priori* conservatizing, politically complicit, or intellectually weak. It would also mean moving past cultural studies' foundational secularism and being open to a rethinking of notions of spirit—at the very least as an

object of discursive analysis, and potentially as a way into re-theorising the mind/body split and the nature of matter. Moreover, in describing so acutely the way modern selves are produced, the Foucauldian schema risks ignoring other trajectories and in turn replicating a set of dominant assumptions, especially a dualist conception of mind-body relations. As many have argued before, the body in Foucault is too readily understood as docile, passive, a mere effect of discourse (Weiss 2). Although Foucault's account of discipline places the body at the center of the modern concept of self, and although it stresses the unpredictable effects of power, it is nonetheless a body too simply thought of as inscribed by external forces. Countering this involves more than just considering how bodies *resist* power (this is after all an almost mandatory theme within cultural studies by now), but also considering how alternative accounts of the body persisted in the interstices of the dominant.²⁴ This is not just genealogical work; it also may provide cultural studies with some models of the body that would radically invigorate it.

Of course, in all this it is crucial that cultural studies not lose the critical acuity that is its hallmark. The intellectual eclecticism, political agnosticism and occasional naivety of many alternative/New Age advocates impel a critical cultural studies to consider the ways in which alternative health practices may be complicit with a variety of dominant cultural logics, and at times downright offensive (see, for example, discussions of white appropriations of Native shamanism in Root and in Wernitznig). But it also impels cultural studies scholars to consider them as beliefs, practices and experiences whose unorthodoxy opens up strange and sometimes wonderful spaces—archaic persistencies, interstitial spaces, unforeseen horizons, strange cracks, holes and black spaces in the dominant.

While it is no doubt evident that as researchers we haven't fully escaped the seduction of the monstrous, the deviant or the marginal, we are also driven by something less romantic and more pragmatic: a recognition that the persistence and resurgence of alternative therapies is, in the words of Michael S. Goldstein,

not solely due to their ability to survive as deviants within the corpus of medicine. Rather, the public remains attracted to what they have to offer: a greater willingness and ability to provide care to the chronically ill; attention to the individual needs of their clients; an appreciation of the interplay of mind, body, and spirit as they affect health and illness; and a hesitancy to employ 'heroic' measures that often are useless or have disastrous side effects. (930)

The fact that such attractions can be discursively analyzed is not, to our mind, a political or intellectual endpoint, for we share Sedgwick's suspicion of the "paranoid trust in exposure" (141). Rather, the everyday hopes, aspirations, pleasures and fears in relation to bodily life that make people seek out alternative therapies seem to us worthy of the kind of attention Sedgwick, following Klein, calls "reparative," which is not the same thing as "uncritical" or "redemptive."

In following this approach, we hope to participate in a subtle but definable push in recent years to broaden the horizons of what can be thinkable within cultural studies. The body models, practices, paradigms and experiences that underpin and constitute the world(s) of alternative therapies are intellectually and experientially compelling, both for the alternative modes of corporeality they offer up and for the

76 IJCS

alternative visions of subjectivity on which they repose. Underpinning the transformations in health and outlook they offer, however, are others of a philosophical and conceptual (and potentially ethical, religious, political) nature—challenges to and re-workings of the very idea of body and person in late modernity.

Notes

¹Wouter Hanegraaff identifies five categories of literature about the New Age: journalism; Christian analysis and critique; sceptical debunking of the New Age and the paranormal; literature that sees the New Age as an illustration of sociological theories; and literature emanating from the New Age itself. (2-3). He finds "comparatively few" "serious scholarly studies written from a detached point of view" (3).

² For a recent discussion about the definition and constituents of Western Esotericism see Stuckrad.

³ Although she concedes immediately that "it is not necessarily all bad and is in some ways preferable to the harshly scientistic rationality it seeks to challenge" (87).

⁴ For statements about grouping philosophies and practices together, see Coward 5; Rose, *Governing* 245; Ross 22-23.

⁵We are aware of the irony that in the more general parts of this overview paper we too are clustering together a diverse range of healing technologies under general labels, but this paper forms part of a larger project in which the body models underlying a range of different alternative health practices are investigated and compared. This larger project is predicated on the understanding that while there is a great deal of overlap between alternative therapies, they also have their own histories and specificities. The relationship between alternative health practices and the New Age movement is complex, and in any case, the New Age movement itself is characterized by a "bewilderingly diverse array of practices and beliefs" (Basil 11) and can't be treated as an amalgam. As is made clear by our use of different case studies in this paper, we are aware of the specificities of different practices.

⁶ For secular scholars who nonetheless want to take religious or spiritual practices seriously as cultural forms, or for post-structuralists who want to engage with forms such as self-help that take authentic identity as a core assumption, it is very difficult to find a way to skirt around this question of unmasking. In her Foucauldian analysis of self-help texts, Heidi Maria Rimke, for example, claims that the Foucauldian framework "does not seek to reveal falsity but to describe the constitution of truths" (62). This is, in a certain way, quite true, for it is indeed one of the great strengths of the Foucauldian paradigm that it allows one to understand what Foucault called the productive effects of power – that is, precisely how certain ideas or claims become culturally (and hence effectively) true. But to claim that there is no revelation of falsity involved in this critical operation is disingenuous. To take just one obvious example, Rimke's Foucauldian analysis is absolutely premised on a critique of the self-help belief that "we have the freedom to choose every step of the way the manner in which we are going to respond to and deal with [oppressive social] forces" (Scott Peck, qtd. in Rimke: 64-65).

⁷ This division between "conventional" alternatives and "fringe" alternatives is, of course, idiosyncratic—a shorthand reflection of the interests and cultural

background of the authors. We recognize that one person's/culture's orthodoxy is another's novelty.

⁸ For a similar argument, see Lichterman 422.

⁹ Traditional Chinese Medicine (TCM) is accorded a history of more than two thousand years, with the *Canon of Medicine* (also called *Classic of Internal Medicine*) identified as its earliest medical text. Authorship is attributed to the ancient Emperor Huangdi (Yellow Emperor c2695-2589), but it was a product of numerous anonymous authors (Zhang 2; Liu 2). TCM treatments utilize herbs and drugs, acupuncture, hot compresses, fuming and steaming practices using water, mud and wax as well as physical (including breathing) exercises (Liu 8). Many of these practices developed from folk medicine, which is inclusive of esoteric or magical practices (see Strickmann for a discussion of Taoist Magical Medical practices). In 1986, the State Council of the People's Republic of China established the State Administrative Bureau of TCM and Pharmacy to oversee the development of TCM and its combination with Western Medicine throughout China (Zhang 22).

¹⁰ For a history of the development and diversity of acupuncture, see Eckman.

¹¹ Taoism has two streams: *Tao-chiao*, religious Taoism, and *Tao-chia*, philosophical Taoism. Religious Taoist beliefs and practices include a focus on achieving physical immortality that is absent from the aims of philosophical Taoism, whose followers aspire to realize union with the *Tao* (literally "the way"). Religious Taoism includes schools and movements that are also central to philosophical Taoism, for example the foundational teachings of Lao-tzu (a perhaps legendary figure of the sixth century B.C.E.) and Chuang-tzu (c. 370-286 B.C.E.). *Tao-chiao* practitioners utilize a range of practices thought to cultivate immortality, including various types of meditation and physical (including breathing) exercises (Fischer-Schreiber 162-71).

¹² "Whereas in the early 1880's, 'Chinese Medicine' in the West meant primarily acupuncture practiced by elder doctors from Taiwan ... Chinese Medicine in the mid-90's means thousands of new young practitioners licensed every year, practitioners who often also have Western credentials in medicine, physical therapy, pharmacy, naturopathy, or psychotherapy" (Grossinger 336).

¹³ For a discussion of the development of the academic study of esotericism, including the significant influence of Frances Yates and Antoine Faivre see Stuckrad 80-83.

¹⁴ The research of Wouter Hanegraaff has stressed the Theosophical Society as a central precursor to the contemporary New Age Movement, a movement Paul Heelas reads as an attempt to counter and cope with the "uncertainties of modernity" (Hanegraaff 518; Heelas 135-52).

¹⁵ As Frances Yates summarizes: "Sanguine people were active, hopeful, successful, outward-looking, they made good rulers and men of affairs. Choleric people were irritable, inclined to fighting. Phlegmatic people were tranquil, somewhat lethargic. Melancholy people were sad, poor, unsuccessful, condemned to the most servile and despised occupations" (59).

¹⁶ It should be noted that the scholar for Ficino is masculine, as evidenced in the title of his treatise "On Caring for the Health of Men of Letters," which is included in *The Book of Life*.

¹⁷ Astronomy during the Renaissance also included what is now identified as Astrology.

¹⁸ Ficino's system however is much more complex then a simple attribution of a single planet to a personality type. He proposed that the individual was comprised of all of the planets in various degrees. In *The Planets Within: The Astrological Psychology of Marsilio Ficino*, Thomas Moore has psychologized this perspective with reference to archetypes.

¹⁹ Spirit is allied with the vital force and understood as "some vapor of the blood" (4).

²⁰ "Intercorporeality" is Gail Weiss' term for what Merleau-Ponty, in his unfinished work *The Visible and The Invisible*, called "intercorporeity." The incompletion of this work meant that the term is left underdeveloped, but its general import is clear. Merleau-Ponty uses it to refute not only the philosophical conception of the body as an object, but also the characterisation of human interactions (and interactions between humans and non-humans) as either relations between a subject and an object or relations between discrete subjects. The concept of intercorporeality acknowledges "the multiple corporeal exchanges that continually take place in our everyday lives" (Weiss 5).

²¹ Kelly and Field make this comment in relation to sociological critiques of biomedicine rather than alternative medicine, but their point is in this regard transferable.

²² For discussion on the subject as comprised of energetic forces, and the role of these forces in healing practices see Brennan; Collinge; Schrödter.

²³ "Body Image" includes both conscious thoughts about our body and the prereflective, unconscious "map" of our body. It is understood as mediating between mind and body (see Weiss).

²⁴ Note that skepticism towards biomedicine is not a recent phenomenon. It is an inextricable part of the history of biomedicine, even in the twentieth century (Saks; Goldstein).

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