CHAPTER 1

The Phantom Child in Haitian Voodoo: A Folk-Religious Model of Uterine Life

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HAITIAN FOLK RELIGION

THERE IS an interesting analogy between the reaction of the outside world to the popular language of Haiti on the one hand and, on the other, to the popular religion. The language spoken by the Haitian people, Creole, used to be dismissed as merely a form of broken French. Scientific analysis of the structure of Creole, however, reveals that it is not a dialect of French (Hall, 1953; Valdman, 1980). Though possessing a French-derived vocabulary, Creole has an internal syntactic structure that in several crucial ways is quite unlike that of French, and some scholars have posited West African elements in Creole clause structure. Whether their analysis is correct or not, it is clear that to construe Creole as distorted French or distorted Yoruba is off target. Creole is an independent language containing elements from several traditions but which has its own structure that must be analyzed in its own terms.

The same can be said of the folk religion still practiced by large numbers of people in rural Haiti: Voodoo. Catholic priests or Protestant pastors may look at the combination of Catholic and West African elements in a ceremony and dismiss Voodoo as a garbled form of Catholicism, much as Creole is dismissed as a form of broken French. Christian clergy, be they Haitian or foreign, are uncomfortable with this mixture. They would rather purify village religion by eliminating the African elements.

There is also a tendency toward a reverse type of distorting cen-

sorship. Certain intellectuals might observe the same ceremony, in which Catholic prayers and symbols mingle with African or locally derived symbols, and feel uncomfortable with the presence of these Western religious elements. They would prefer to view Voodoo as an African religion that has been distorted by the superimposition and intrusion of Christian symbols.

This interpretation of Voodoo is equally questionable. Analogies must be used cautiously. But just as a true grasp of the structure of Haitian Creole presupposes that we examine it in its own right, with no sense of discomfort at either the French vocabulary or the West African elements, so also our understanding of the structure of Voodoo as a religious system presupposes a willingness to view it as a historically derived complex with elements from several traditions but with a character and structure of its own.

The structure of a religion, however, is not as neutral as the structure of a language. In the case of a postcolonial society such as Haiti's, the mixture and synthesis of two traditions has been achieved in the crucible of social tension and conflict. The two major external sources which fed into Voodoo, European Catholicism and West African religious traditions, are not socially equal contributors. In the context of the colonial society of Saint Domingue they were hierarchically arranged, with Catholicism superimposed from above and the African elements dynamically active at the base. There has been tension between these two traditions from the outset.

The most obvious form of tension consists of the efforts of governments and churches to eradicate Voodoo. Conversely there have been counterefforts, after the fall of Duvalier, to have Voodoo declared as a national religion. But during two years of anthropological fieldwork in a Haitian village, I was directly confronted by more subtle tensions between the two traditions. The internal theological and ritual structure of Voodoo as practiced by the villagers was not a comfortable mix of two traditions. It was less in the nature of an alliance, more in the nature of a temporary truce.

During my fieldwork villagers told me about an illness that affected many of the women in the village but which had never been described in the literature on rural Haiti: the entrapment of unborn children in their mothers' wombs, producing a situation in which many Haitian women claim to be pregnant for two, three, or more years. In my view this particular belief, though it flies in the face of

THE THEOLOGY OF VILLAGE VOODOO

I first learned of uterine entrapment fears while doing anthropological fieldwork in a small village in the Cul-de-Sac Plain of Haiti. Though ostensibly a medical phenomenon, the Haitian belief in unborn children trapped in the womb is part of the folk-religious complex of rural Haiti, commonly known as Voodoo. To gain an understanding of the logic of village fertility beliefs, therefore, required the gathering of information on village theology and ritual as well.

The term Voodoo in English is associated with the concept of "magical death," not only in popular speech, but also in at least some scholarly treatments (e.g., W. B. Cannon, 1942; D. Lester, 1972; B. W. Lex, 1974). In contrast, by the time my fieldwork began in the 1970s, several decades of research (e.g., Melville J. Herskovits, 1937; George Eaton Simpson, 1945; Alfred Metraux, 1959; Harold Courlander, 1960; Frances A. Huxley, 1966; James Leyburn, 1966; Maya Deren, 1970) had provided irrefutable evidence that Haitian Voodoo is a complex religious system in which sorcery plays a visible but secondary role. With the exception of several elements, the belief system and ritual practices of the village where I conducted my research (Murray, 1976; 1977; 1984; Murray and Alvarez, 1981) were a local variant of the system that had been described by those other researchers.

Haitian Voodoo is thus best analyzed using the same categories, and with the same methods, that anthropologists use to describe any other bona fide religion. There are at least three constituent elements that can be found in most religions. The first element is the pantheon; that is, the cohort of spirits in whose existence the practitioners of the religion believe. As is true of Haitian society itself, the Voodoo

pantheon is stratified. That is, not all the spirits are equal. At the top is a Supreme Being, referred to as Bondye ("Good God") or as Gran-Met-la ("The Great Master"). Bondye is viewed by villagers as the creator of the world and of all other lesser spirits.

Under Bondye the most important spirits are less powerful anthropomorphic spirits referred to as loua. These loua have individual names. They make their presence felt to believers in at least four ways. They contact them in dreams. They possess them, dancing in their heads and speaking through their mouths during ceremonies. They speak to them from a govi (ritual jug) when summoned by a Voodoo priest. And they grab them, or kenbe them, making them ill, if any offense has been committed.

Every family is believed to have its own separate loua, even though the loua may have the same names as the loua of other families. In this sense village Voodoo is highly familial, highly ancestral in its focus. The loua that I serve, even though they have the same name as the loua that you serve, are really not the same spirits. There is no similar "familialization" of the spirits in traditional Christianity; the St. Peter to whom I light a candle is the same St. Peter to whom you light a candle.

In addition to the loua there are many other categories of spirits. Ceremonies are offered to lemò, one's dead parents and grandparents. Rural Haiti is filled with lougarou as well. A mixture of werewolf and vampire, this dangerous creature will be discussed further later on. Villagers also believe in the existence of Vierge Marie and the Catholic saints. Though they are invoked in litanies at the beginning of certain ceremonies, the saints play a very minor role in the theological landscape of the village where I lived.

The second major element of any religious tradition following its pantheon is its repertoire of rituals. Practitioners of Voodoo participate in a small number of Catholic rituals. Few people go to weekly mass, but virtually all children (except converts to Protestantism) are baptized in the Catholic church. In the village where I lived, baptism at the hands of a priest is believed to be a requirement for acquiring a human soul. In the language of the villagers, "tout tan pitit-la poko batize, li poko gen nanm." Until the child is baptized, it has no soul. There are certain types of folk baptism, or andwayaj, performed by local people, but these are not believed to be a substitute for baptism in the Church. Church burial is also seen

y villagers, even the most ardent Voodoo devotees, as an absolutely ecessary finale to one's life.

But African-derived rituals make up the vast majority of rituals n which villagers participate. The five most frequent types of rituals which occur, as defined by their function, are (1) divination rituals, isually but not always geared to learning the causes of illness; (2) realing rituals; (3) recreational rituals (dans vodoun); (4) large family ituals held once a generation (sèvis loua); and (5) sorcery rituals, in which evil spirits are unleashed against an enemy. The first four ategories of ritual are totally public. Among the rituals listed above, the only truly secret rituals are the sorcery rituals. If we categorize the rituals not by function but by type of ceremonial behavior, we find spirit possession, exorcism, singing, drumming, dancing, and animal sacrifice among the most frequent ritual behaviors.

The third element by which Voodoo may be compared with other religions concerns ritual leadership. Within Voodoo certain individuals are believed to be more powerful than others in contacting and appeasing the spirits. These are referred to as houngan or, if they are women, mambo. There were two categories of houngan in the village: houngan makout, who had learned their powers from their parents or in dreams; and houngan asson, who had purchased their secrets and passed through kanzo, a special initiation ritual, at the hands of other houngans. Houngans participate in most of the rituals described above. Some, though not all, houngans set up special cult centers called hounfo. Fewer than five percent of the peasants attach themselves to any such cult center. That is, though they will call in houngans as their ritual services are needed, most peasants are not members of any Voodoo congregation or Voodoo "parish." They are members of the local town Catholic parish and, of course, use the services of the Catholic priest for the baptisms and burials mentioned. There is no analogous parish membership structure for participation in the folk religion.

THE STRATIFICATION OF THE PANTHEON

I will discuss in more detail the stratification of the pantheon. One dimension of theological stratification is to be seen in the creator/creature difference. The superiority of Bondye to the other spirits is

found not only in his greater power. More fundamentally, in the eyes of the villagers, he is the creator of the other spirits, and any activity or intervention which they initiate is done with his permission.

Linked to this ontological difference is a differential allocation of powers. In village theology creative and procreative functions are allocated to Bondye. Only he can create rain, for example. Once the rain clouds are there, the loua can mischievously move the clouds around to help or punish someone; and they can tie up the rain to prevent it from falling. But they are powerless to create rain. Only Bondye has that power. Likewise only Bondye has the power to make the land fertile and the crops grow. Once the crops are there, the loua can cause them surreptitiously (and mischievously) to go from one person's garden to another, but they cannot create the fertility that makes the crops grow. Most importantly for this discussion, only Bondye can create life in the womb of a woman. This, as we shall see, creates a theological dilemma in the village, because in village theology Bondye is inaccessible to human petitions. It is this dilemma, I believe, that led to the emergence of the phantom child in Haiti.

THE ETHNOGRAPHY OF PHANTOM CHILDREN

I recorded beliefs in the phantom child during fieldwork in a Haitian village. This "illness" surfaced during preparation of a demographic questionnaire on the fertility history of women in the research community. Such probes often enquire not only about the number of children, alive and deceased, which the women in the research sample have, but also about the number of women who are currently pregnant.

One of my village neighbors agreed to be interviewed during the pre-test stage of the questionnaire. Having elicited a list of her children, I then asked if she was pregnant. Her affirmative answer surprised me. I had known the woman for months and was unaware of her pregnancy. The follow up question to a "yes" answer on the pregnancy question was: "How long have you been pregnant?" Her answer was dez an—two years. Never having met a woman in her second year of pregnancy, I assumed my Creole was defective and rephrased the question. "How many months has the child been in

Further enquiry among other village women revealed that this illness-called pedisyon ("perdition")-was quite common in the village. One man said proudly that he had been in his mother's womb five years. People were surprised at my ignorance of this rather common illness. Didn't women in America ever have children trapped in their wombs? Since my wife and I were then childless, they advised us to check whether she also had a child that was trapped.

Not being a physician and having a profound respect for the rationality of the villagers, I began wondering whether there was a gap in my own knowledge of reproductive biology, and I asked an American physician in Port-au-Prince if women could be pregnant for two years. He looked at me with concern, asked me how I was feeling and suggested it might be time for a vacation from the village. He and his colleagues assured me that the notion of two or three year pregnancies was irrational.

On the contrary, however, I had long since learned the underlying rationality of Haitian peasant belief and behavior. I refused to dismiss this admittedly unusual belief in trapped unborn children without first exploring exactly what this illness was. I interviewed several people at great length and finally got at least a descriptive picture of the illness, its causes, and its remedies. In the following paragraphs I will sum up what villagers told me about the illness.

THE NATURE OF PERDITION

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The unifying feature among all cases of perdition is the presence of an unborn child trapped in a woman's womb, a child that pa ka fet ("can't be born"). The child is there, but its development is arrested. The arrest can happen at any stage during pregnancy and occurs when the mother's uterine blood is suddenly removed from its usual position and diverted from its normal function. It is believed that the blood itself nourishes the child during pregnancy. It is for this reason that menses cease during pregnancy. God has arranged matters in a way that the blood that would otherwise flow out each month is trapped in the womb during a woman's pregnancy and used as food by the developing child. The bleeding that occurs during childbirth is simply the unused residue of this blood that has been used by the child as an important element in his or her intra-uterine nutrition.

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But the illness of perdition interrupts this natural process. The internal blood supply suddenly bursts open and flows out the woman's vagina, bringing to an immediate halt the growth and development of the child in the womb. The loss of the blood supply not only halts the development of the child, it also reverses it. When perdition occurs in later months, the child in the womb reverts to embryonic status and becomes a tiny fleck in the womb. But the child is not expelled with the blood. It remains attached to the womb. and the monthly flow of blood bypasses it. In a normal pregnancy the child is believed to be "working" in the womb for nine months. moving and maneuvering to get nourished and to grow. During perdition the child loses the ability to "work." It stays alive but cannot grow.

Villagers cautioned me against one source of confusion. I inquired whether the sudden reemergence of monthly blood flows might not be by-products of a miscarriage, that perhaps the fetus was expelled but was at such an early stage as to be confused with a ball of blood. I was vigorously corrected. We know quite well what a miscarriage (fos kouch) is, the villagers assured me; it happens as well. But it is different from perdition. ("Fos kouch se younn; pedisyon se lot.")

Nor must the monthly bleeding of perdition be confused with menstruation, they said. The bleeding during perdition tends to last longer than normal menses—five to seven days. Besides the monthly blood loss, the woman in perdition may experience other symptoms as well: weakness, stomach pains, back pains, paleness, or weight loss. Each woman seems to develop her own cluster of symptoms, I was told.

The presence of a trapped child can be quite problematic for the woman and her spouse. While in perdition she cannot conceive another child, an often frustrating state of affairs. Some women have resorted to local abortive techniques to remove the trapped child, to free the womb for occupancy by another child that will grow. But such attempts to abort the child never succeed, I was told-nobody has ever reported seeing a child of perdition successfully removed. The only solution is to cure the perdition and to reinstate the growth of the child.

No matter how many months the child had been in the womb

before perdition occurred, it will take nine months of growth after the onset of perdition to bring the child to term, I was told. And the children who have spent years in their mothers' wombs emerge none the worse for their prolonged captivity.

I was further assured by people, not only in my village, but in other parts of Haiti as well, that no additional male input is needed once perdition is cured. The child will emerge nine months later even though the woman has had no recent conjugal contact with her spouse or any other male. Villagers report cases of men and women separating for one reason or another while the woman is in perdition, and following a cure the woman has delivered the trapped child nine months later with no subsequent biological assistance from the former spouse or any other male. This assertion, which raises great skepticism among non-Haitians, has been made over and over again, not only to me, but to other researchers of perdition as well. This matter is taken so seriously by those affected that a woman who separates from one spouse while carrying a child of perdition must inform any new spouse that she is in perdition from a former union. If the perdition gets removed and the child finally emerges, that child will be viewed as the child of the former spouse, no matter how long the current union may have been in existence. The current spouse may rear the child, but only as a stepparent or foster parent.

NATURAL CAUSES AND CURES

Based on information given to me by the villagers, it is clear that perdition should be viewed in the general context of Haitian folk religion and folk medicine. That is, the same roster of healers and the same cluster of diagnostic and therapeutic strategies invoked for other illnesses are also activated in cases of perdition.

Most cases of perdition are initially self-diagnosed. A woman has been having conjugal relations with her husband; her menses cease for several months; the couple knows that she is pregnant. Suddenly there is an onset of vaginal bleeding, resembling, but different from, normal menstrual flow. No embryo or fetus appears to be expelled with the flow—it is not a miscarriage—the child is still in the womb. A month passes and the flow occurs again. Another month, and the same flow. The couple suspects that the wife is in perdition.

What brings about this illness? It is one thing to know that one has an illness, but quite another matter to know the specific cause

or the specific remedies which will remove the condition. For this diagnostic and therapeutic work, one needs the assistance of specialists.

Villagers have two general types of healing specialists to which they can go: modern physicians or one of the several types of traditional village healers. It is generally recognized that each of these healers is strong in some matters and weak in others. Modern physicians can better deal with certain types of illness; but others exist which traditional healers have greater skill in recognizing, diagnosing, and curing. Perdition is clearly something which modern physicians are ill-equipped to handle, and villagers must therefore go to a folk healer.

But even within the folk-healer set, there are two general subclasses of healers. On the one hand there are "natural" healers healers who deal with illnesses caused by natural events such as burns, falls, or woundings, or by natural agents such as "gas," "air," or "cold." In no way is it believed that every ailment is caused by spirit intervention. These healers deal with illnesses generally referred to as maladi Bondye, illnesses caused or permitted by God.

It is possible to contract perdition by purely natural means, with no malevolent assistance from hostile supernatural agents. The major natural cause of perdition is *fredi*, or cold. A pregnant woman must be very careful not to let cold get up inside her womb. If she goes out in the early morning or late at night, she must wear particularly heavy clothes. During these periods she must under no circumstances walk barefoot in puddles or go out in the rain. When crouching she must avoid the normal spread-legged position and keep her legs together. Failure to take these precautions can result in the intrusion of cold into her vagina and uterus and the possible onset of perdition.

Cold can also get into her womb through the vehicle of the tay ouve, the open waist. If the woman lifts heavy loads, as the Haitian market woman often does, she may cause a separation of the bones in the dorsal area of her waistline (zo tay), and the cold will enter through this aperture.

The healer par excellence who can diagnose and heal cases of perdition caused by natural causes is the fam saj, or village midwife. The midwife is not only called on for delivery and prenatal care, she is also expert in the diagnosis of a variety of illnesses affecting village women, among them perdition. Her major skill is her ability to

massage with her hands, both as a diagnostic and a therapeutic technique. Exploratory probing tells the midwife what it is that the woman has, what inside of her may be out of place. Vigorous, energetic massaging solves the problem, and puts the displaced organ or object back in place. In the case of perdition, this means closing gaps through which cold can enter or has entered, and massaging out the cold that has intruded and caused the woman and her child to be victimized by perdition.

In addition to massaging, there are special drinks which the midwife knows how to prepare to combat harmful intra-uterine cold. In the case of separated waist bones, the midwife may even prescribe a special plaque or compress, available in Port-au-Prince pharmacies, which when applied to the affected region will reinstate the proper degree of closure of the bones.

If the midwife is successful in her ministrations, the cold will be removed, the child's ability to "work" in the womb will be revived, the monthly blood flow will again cease, and nine months later the child will emerge none the worse for his temporary imprisonment in the womb.

SUPERNATURAL CAUSES AND CURES

Not all perdition cases, however, are caused by the impersonal vehicle of intra-uterine cold. In many cases, perhaps a majority, the malady is believed to have been caused by the malevolent action of some spiritual agent. The spirit attacking the womb of the woman may be acting on his own initiative or at the behest of human agents who have unleashed aggressive spirit forces. But in such cases the diagnostic and therapeutic procedures are quite different from those utilized by the midwife. There are at least four different types of spirit agents who can cause perdition.

The family loua demand attention from their children. If not satisfied by proper rituals, they will kenhe ("grab") the offender with an illness. More often than not they will take out their anger, not on the negligent family members themselves, but on their children. Many childhood illnesses that defy normal diagnosis and treatment are attributed to the loua. But the loua can grab a child even before birth. A child still in the mother's womb can become the victim of an offended loua and receive the punishment generated by a parent's negligence. The major form of intra-uterine punishment used by the

loua is perdition. When a loua causes a woman to fall into perdition, he is said to be "tying up her womb" (mare vant li). The offending adult need not be the mother; many cases of perdition are due to neglect by the father of his family loua.

In such cases the services of a specialist are needed. These folk spirit healers, called houngan if they are male and mambo if they are female, employ a series of diagnostic techniques to determine first which general class of spirit is causing the malady and then the specific identity of the spirit, all with a view to prescribing the proper remedial rituals. The diagnosis is generally done "long distance;" the husband will go to the houngan for a diagnostic session in which through card reading (see chapit) or some other method the houngan divines the reason for the visit and the identity of the offending spirit. The houngan may never actually see the woman during the diagnostic stage. The prescribed rituals may entail animal sacrifice or some other expensive ceremonial event.

The houngan may determine that the perdition is being caused, not by family loua, but by the dead parents of one of the couple. The dead also demand ritual attention. They are owed a death meal (manje md) and other celebrations sometime after their death. If their children neglect them, the parents may retaliate, not against the offenders themselves, but by grabbing their own grandchildren.

Much more serious is a third type of spirit agent, the longaron. Though lexically derived from the French word for werewolf, the Haitian lougarou combines the themes of the werewolf and the vampire. Like the European werewolf, the lougarou is a person who poses as an ordinary human being during the day. But the nocturnal transformation into an animal is independent of the lunar phase. And the animal into which the lougarou is converted is not a lupine mammal, but rather a bird-like vampire who flies from rooftop to rooftop sucking the blood of young children within the houses. Though most victims are children from the neonate to the toddler stages, the lougarou will also attack children in the womb, bringing on perdition. The victimized family is not necessarily being punished by the lougarou for a transgression; the lougarou attacks all possible victims. Nor is the lougarou behaving at the behest of some other hostile agent, be it human or preternatural. (Caucasians are believed to be extremely prone to lougarou habits, a factor that made it difficult for me to find a village house for rent in the early days of my fieldwork.)

For dealing with the lougarou the sacrifices offered to family loua are useless. The lougarou is combated by other vehicles, including foul-smelling lotions (beng) to be rubbed on the woman's belly and bitter potions (toune-sang) which when drunk make the woman's blood bitter and drive away the lougarou. (In the case of children already born the protections may include special pouches and amulets (senp) hung around the necks of potential victims and round scars made on their cheeks.) All of these measures are prepared by the houngan.

The fourth non-natural cause of perdition, and a significant one, comes from sorcery on the part of a hostile relative, neighbor, or competitor. The most frequently cited example of sorcery-derived perdition concerns the tying up of one woman's womb by another woman competing for her husband. Such ritual aggression is reported to be particularly frequent in polygamous unions, as co-wives attempt to diminish each other's fertility and concomitant attractiveness via ritual measures. Because failure to produce offspring may lead to the dissolution of a union in rural Haiti, a woman in perdition may suspect that she is the victim of some other woman competing for her husband's attention. This situation also requires the intervention of a houngan.

ANALYZING PERDITION

Now that I have presented the illness of perdition as conceptualized and described by villagers themselves, I would like to present several possible explanations of the phenomenon.

MEDICAL AND PSYCHOLOGICAL EXPLANATIONS

Most Western observers would dismiss perdition as a figment of the imagination of Haitian villagers, a sign of the biological ignorance of the population holding such beliefs. Such criticism is unwarranted. Haitians are no different from other human populations in terms of their knowledge of reproductive biology. Though they view Bondye as the ultimate source of human life (a belief shared by large numbers of people in industrial societies as well), they are fully aware that the

generation of a child presupposes sexual contact between a male and a female, and that the ordinary gestation period is approximately nine months. Belief in extended pregnancies is emphatically not due to some extraordinary ignorance of reproductive biology among Haitians.

Some observers, particularly physicians, have proposed medical explanations of perdition. One suggestion is that perhaps perdition is the folk name for hysterical pregnancy. This explanation is weak. Hysterical pregnancy entails the generation of biological symptoms that physically resemble pregnancy: cessation of menses and swelling of the abdomen. Perdition is just the opposite: belief in pregnancy while there are monthly blood flows and no swelling of the abdomen. Other physicians have suggested that the "trapped child" may in fact be uterine cysts or tumors. Given the prevalence of perdition—one out of every three women interviewed in the research community reported having had perdition at some stage of her conjugal career—the tumor theory of perdition is quite unlikely. No medical statistics exist to support the epidemic of uterine cysts that would be required to validate a bio-medical solution to the mystery of perdition.

Equally problematic are several psychological explanations forwarded by more sympathetic observers of perdition. Some suggest that perdition may be a type of wish-fulfillment device, that a woman (or a couple) wishes to have a child so badly that the infertile woman imagines that she has a child trapped in her womb. The weakness of this argument is that infertile couples in all societies may wish for a child, but the belief in a child that is "trapped" in the womb is quite unusual, perhaps unique to Haiti. If wish fulfillment could produce a fantasy of a trapped child, why do not cultures all over the world develop this belief in trapped children? I have little doubt that many women in perdition do desperately want a child. But they are merely using a pre-existing cultural device (belief in perdition) as a vehicle for acting out this wish. But the wish itself cannot generate this widespread cultural belief; otherwise it would be found in every society. Since it is not, wish-fulfillment mechanisms can hardly be forwarded as an explanation.

There are other practical uses to which perdition is put that might seem to explain its presence in Haiti. Observers have proposed to me that perdition may be a device used to mask marital infidelity. In families where there is male labor emigration, for example, men have been known to come back to their homes after an absence of two or three years to find their wives nursing infant children. The woman joyfully informs her husband that she was in perdition when he left and that the child is his. But once again, if infidelity can produce belief in a trapped child, why does not such a belief emerge everywhere that there is conjugal infidelity linked to long male absences? The explanation is weak.

Perdition also serves to keep together some unions that might otherwise break up. Childlessness may lead to the dissolution of unions, particularly those that are consensual in character, that is, not validated by civil or ecclesiastical ceremony. Such consensual unions form a heavy majority in most of rural Haiti. The absence of offspring will often bring such unions to an end. But if the woman is in perdition, she is not really "childless." There is a child, albeit trapped in her womb. The woman is also thus spared the shame of being sterile, a matter of great embarrassment in Haiti as in many other cultures. She is fertile, as witnessed by the child in her womb. Some other agent, natural or supernatural, has simply arrested the development of her child. Thus perdition simultaneously keeps her family unit intact and heads off public embarrassment. (Women are secretive about normal pregnancies, to protect against sorcery, but purposefully open when in perdition, to ensure that others in their social milieu are aware that they are not sterile.) But following earlier arguments, these microfunctions which perdition carries out cannot explain the origin of the belief in the trapped child. The existence of this construct does, it is true, provide people with a useful handle to achieve many personal and domestic purposes. But how did the construct take root and spread in the first place?

PERDITION AS CAMOUFLAGED FOLK MEDICINE

The first question I would like to address is the following: is perdition truly only in "people's minds"? Can the entire belief in the prolonging of pregnancies over several years be dismissed as simply a colorful figment of people's imagination? The anthropological answer must be a qualified "yes and no." Yes, we must reject as implausible the belief that large numbers of unborn children spend several years in their mothers' wombs. I doubt that even the most fervent admirer of folk belief systems would argue for the literal truth of the rural Haitian belief in the trapped child.

By the same token I have firm statistical evidence that perdition is not all in people's minds. As part of my general study I gathered data on every family in the village, including data on the number of children born to each couple. I broke down these data between women in perdition and women not in perdition, and learned that on the average women claiming to be in perdition had only half as many children as those women who were not in perdition. Looking at the variable of childlessness, fifty-seven percent of the women who claimed to be in perdition were childless in their current union. Only fourteen percent of the women not in perdition were childless. Stated differently, there is incontestable statistical evidence that perdition is associated with real biological subfecundity. That is, the belief in perdition reflects something not only in people's minds but also in their bodies. We cannot accept as biologically sound the belief that children get trapped in the womb, nor can we accept the notion that the perdition complex is purely fiction. The women in perdition are truly less fertile than their neighbors not in perdition. Perdition at one level is very very real.

On the basis of these statistical data, I propose the following analysis. Perdition is part and parcel of a folk-healing complex. It is a belief that serves a role in the general context of Haitian folk medicine. All folk-medical systems attempt to provide solutions for the basic medical problems of a population. A folk medical system will have at least three elements:

- 1. Theories of illness.
- 2. Specialists who diagnose and heal.
- 3. Medicinal substances and therapeutic procedures.

Those who resort to a belief in perdition are dealing with the problem of subfecundity—the inability of a couple to have as many children as they would like. This is a very real medical problem—it is not only in people's minds. The underlying theoretical construct that is used in the Haitian system dealing with subfecundity is the notion that life already exists in the womb but that it is being blocked, prevented from growing. The specialists who deal with this problem are midwives and houngans, previously described. The procedures which they use to deal with subfecundity are procedures which are designed to unblock life which is already in the womb. The midwife massages out the cold so that the trapped child can continue to grow.

The houngan prescribes sacrifices so that the loua will cease "grabbing" the unborn child and let him or her continue to grow.

Looked at in this way, perdition loses its mysterious character: patients with a genuine medical problem—subfecundity—are going to healers who will help them solve that problem. Both patient and healer agree on the nature of the problem: a child is trapped in the womb. And their mutual task is to take the measures necessary to

get that child growing again.

The only unusual element in perdition, then, the only serious question remaining, is: Why do the patients and healers engage in a type of collectively sanctioned make-believe that the womb of the patient is not empty? Let me phrase the question differently. Most folk-medical systems incorporate mechanisms for dealing with subfecundity and sterility. They assume that the womb of the woman is empty. The task of healing is to take measures to ensure that a child is conceived. The only matter in which the Haitian system differs is that it assumes that the womb of the patient is not empty, that there is already life there. Whereas the fertility rituals of other systems assume that the womb of the patient has no life in it, the Haitian system "makes believe," as it were, that life is already there. The task of healing is not to create new life, but to unblock life that is there but trapped.

THE DYNAMICS OF THEOLOGICAL CAMOUFLAGE

Why does the Haitian system depend on the construct that life already exists in the womb? Other cultures have devised fertilityinducing practices without resorting to the imaginary device of a trapped child. What has induced Haitian folk culture to avoid the concept of barrenness?

I propose that the construct of the trapped child is a creative conceptual maneuver devised by Haitian culture to circumvent a healing barrier that had been erected as a result of the postcolonial

theology that emerged in Haiti.

As discussed earlier, there is an unusually strong division between the powers attributed to Bondye, the Supreme Being, and those attributed to the louz. And most importantly, there are barriers against reaching and influencing Bondye. In the postcolonial theology that emerged in Haiti, God is not a personal God of love and concern for his children. He is a distant, arbitrary, climinate God, who has reserved all lifegiving powers for himself.

God is unapproachable, and incapable of being influenced. If you 25k him to give you just two children, he will burden you with ten. If you ask him for ten, he may give you none. The loua can be influenced, with dances, with singing, with sacrifices. They will answer human petitions-not all of them, but many of them. And even if they don't answer a particular plea, at least they won't punish you for asking. The evolution of postcolonial folk theology in Haiti has led to a stratified concept of the spirit world in which the supreme powers are wielded by an unapproachable, arbitrary force.

This creates a serious dilemma for couples unable to conceive a child, Only God can create life in the womb. But in the folk theology of the villagers, there are no rituals for approaching this God, no specialists who can intervene before the throne of this power. The ritual energy of rural Haitians is centered on their family loua; but the loua can't create life in the womb. God is incorporated into folk theology, but he is far beyond the influence of African-derived folk rites.

There is a devastating medical corollary to this theological situation. The houngans and midwives, the protagonists of the rural Haitian folk medical system, can do nothing for the woman with a barren womb. Only the unapproachable Bondye can create life. But no houngan or midwife would dream of claiming to be able to influence Bondye-lightning would strike them. And since they cannot manipulate God, they cannot assist the sterile woman. This creates a fatal gap in the Haitian folk-healing system. The sterile woman, the subfecund couple, has no hope, no healing resources.

Here is where perdition steps in. I propose that the belief in the trapped child evolved in Haiti as a creative vehicle for permitting folk healers to assist their clients in matters of fertility. The concept of the child who is trapped, the phantom child, is a diagnostic redefinition. A postcolonial theology had evolved in which lifegiving powers had been assigned to the highest spirit of the pantheon. But there are no rituals that can provide access to this source of power; it is dangerous, in fact, even to try.

One response would have been simply to acknowledge that sterility cannot be dealt with. However, this would have left an unacceptable gap in local healing practices. Another response could have

been to develop ritual procedures for approaching the Supreme Being. This option was also not chosen. The Supreme Being remains remote in Haitian village theology. A houngan or mambo who began to issue orders to Bondye in the same way that orders are issued to the loua would be accused of exceeding his or her capacities and of exposing the client to possible divine retribution. In the final analysis, folk healers and Voodoo priests must adhere to the premises of their followers and cannot on their own initiate dangerous activities that would drive away clients.

The danger was avoided by creatively redefining sterility in a way that made it compatible with the theological premises of the folk-religious system as it is now constituted. In this system the loua cannot assist or prevent the conception of life, because they cannot control Bondye. Their activity can only begin once life exists. If sterility can be creatively redefined, not as sterility, but as arrested gestation, the theological dilemma is resolved. The loua cannot be blamed for an empty womb; they can, however, be blamed for a womb with a trapped child. And the folk healers, the houngans, mambos, and midwives, can now legitimately exercise their diagnostic and healing powers on a woman whose problem is not an empty womb, but a womb with trapped life.

This removes some of the mystery from the widespread Haitian belief in trapped children. The colonial history of Haiti led to the emergence of a folk theology in which fertility is in the hands of a Supreme Being feared as unapproachable and unmoved by the rituals available to villagers. The belief in the phantom child, by providing the construct of imprisoned uterine life, adaptively recaptures for folk healers at least some of the terrain that had been snatched from them by the postcolonial evolution of a stratified theological system.

DISCUSSION

This analysis of the phantom child in Haiti may raise as many questions as it answers. What I hope to have shown, however, is the hidden logic behind a fictitious pregnancy construct that astonishes non-Haitians as flying in the face of obvious biological realities. I have argued that the phantom child is a cultural fiction whose function is to circumvent a historically generated paralysis in one component of the folk-healing system. My concuding question here will

not focus on the strengths and weaknesses of this interpretation of the causal underpinnings of the phantom-child belief. I will discuss instead a quite different implication of a theological and ritual system which accepts a definition of spiritual power that in effect alienates believers from what they believe to be the source of supreme power.

Observers sympathetic to Haitian folk religion explain the fear of Bondye and resulting focus on lesser spirits as somehow the result of the retention of African approaches to the spirit world. We are forced to entertain an equally plausible but somewhat more unsettling alternative hypothesis. The alienation of Haitian villagers from the source of ultimate power may be the result, not of their preservation of ancestral African traditions, but of the incorporation into Voodoo of postcolonial theological premises that deny believers direct access to the Supreme Being. Voodoo, as practiced in the research village and as described by other observers in the literature, has not challenged this basic premise. It has rather accepted it and devised creative accommodations to it. An example of one such accommodation has been described in these pages.

Intellectual honesty demands that we entertain the possibility that the premise itself—the premise of a distant, dangerous God who may be approached only at great risk—may be a postcolonial distortion rather than an African retention. The premise does exist and is widespread in Haiti; it has been documented ethnographically not only in my research village but elsewhere in Haiti as well (Herskovits, 1937; Bastien, 1951; Metraux, 1959; Ira Lowenthal, 1978; Glen Smucker, 1983; Singer et al., 1988). What has not been well documented, and what may be a fiction, is the assertion that this alienation from the Supreme Power and focus on lesser powers is somehow of African derivation. At present I can only propose the question as one for research, both field research and library searches, and pose the hypothesis that an examination of various West African religious traditions will not show the radical alienation between devotees and the Supreme Being that is found in Haitian Voodoo.

A careful conceptual distinction must be made between a belief in a Supreme Being on the one hand, and the relation of believers to that Supreme Being on the other. It is known that many West African religious traditions have complex pantheons topped by a Supreme Being, who has more power than lesser spirits lower on the pantheon. The question here is whether West African traditions

incorporate the element of fear of this Supreme Being that has been found by anthropologists to characterize Haitian Voodoo. My hypothesis is that this theological blockage, far from being a feature of West African religious tradition, is rather the more recent product of postcolonial theological dynamics.

Nor is this separation an inherent feature of Judeo-Christian religion either. Though the God of the Hebrew Scriptures emerges as a clearly fearsome God when angered, his worshippers approach him with praise, practical petitions, and sharp complaints. The ultimate source of power is not avoided, as in Haitian Voodoo; it is confronted. And in the theology of traditional Catholicism, saints, angels, and other lesser spirits are ritually invoked, as are the loua in Haitian Voodoo. But there is a sharp distinction from Voodoo. In Catholic tradition God himself is also invoked. And when the saints are invoked, it is with a view to having them intercede directly with God, to supplement the petitions that the believers themselves bring directly. In sharp contrast, the louz of Haitian Voodoo are not asked by devotees to intervene at the throne of Bondye. They are as blocked as the believers themselves from access to this source of ultimate power.

In short, the phantom child construct described in these pages can be seen as an accommodation to the premise of a vindictive God who can be approached only at great danger. Though one can admire the ingenuity of the folk society that devised the accommodation, intellectual honesty forces us to question the validity of the postcolonial folk theology that made such a ruse necessary in the first place. As with Haitian Creole, Haitian Voodoo is neither European nor African in its central character. It is rather the special product of postcolonial evolutionary developments in the theology of the powerless. Because of its origins, Haitian Voodoo should be neither excoriated nor romanticized by analysts. Because it evolved in the context of postcolonial tensions, it has incorporated into its very internal structure ambivalent elements that reflect both the creative energies of the people and the oppressive economic and social systems with which the Haitian people have had to deal.

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