

Can Occult Practices Lead to Psychiatric Illness and Related Problems?

by John Ankerberg, John Weldon

Most mental illness stems from causes other than the occult. For example, of perhaps 20 different causes of depression, Kurt Koch lists only one relating to the occult. Thus:

Those who are not familiar with the medical aspect of emotional disorders are in great danger of making false diagnoses and therefore giving the wrong treatment.... I must again warn against ascribing all mental disorders to occult causes. Only a small percentage of emotional disorders have occult roots.... It is, however, often difficult to separate the two areas and to say whether a particular problem is spiritual or medical.¹

This underscores the importance of proper medical testing, counseling, and spiritual discernment before making a final diagnosis. If even committed Christian psychiatrists can have a hard time distinguishing mental illness from occult bondage, this is surely an area needing caution and wisdom. This is even more true in a phenomenon such as multiple personality disorder where distinguishing occult causes and/or possession by spirits from true multiple personalities can be difficult at best (cf. James G. Frieson, *Uncovering the Mystery of MPD [Here's Life, 1991]*). In addition, independent mental problems and emotional disorders arising from occult bondage may often exist simultaneously.

Nevertheless, with so many people turning to the occult today, resulting emotional problems are on the rise.

Mediums and other channelers, for example, are often known to have psychological disturbances; so are psychics, witches, and Satanists. For example. Dr. Jeffrey Russell of the University of California at Santa Barbara observes, "Satanism... has had a great effect on people of unsound mind. Some people have been psychologically damaged by it. There's no doubt about that."²

Occultists and their victims frequently end up in mental institutions when the experiences they have encountered push them over the edge. Dr. Koch refers to a New Zealand psychiatrist who "claims that 50% of the neurotics being treated in the clinics in Hamilton are the fruit of Maori sorcery."³ He also says he knows of Christian psychiatrists who believe that sometimes over half of the inmates at

their psychiatric clinics are suffering from occult oppression rather than mental illness, but that this occurs only in areas where occultism is extensively practiced.⁴

In “Mental Health Needs and the Psychic Community,” the late psychic researcher D. Scott Rogo warned, “The types of negative reactions people initially have to their psychic experiences may lead to permanent psychological damage if not immediately treated.”⁵ Rogo further observes that three of the most typical negative reactions to having a psychic encounter are 1) alienation from social relationships, 2) fear of impending insanity, and 3) a morbid preoccupation with psychic experiences.⁶

A four-day symposium of the American Academy of Religion, the Society of Biblical Literature, and the American School of Oriental Research also noted the dangers of the occult in relation to mental health. In a paper delivered before the symposium, Roger L. Moore, a psychologist of religion at Chicago Theological Seminary, observed that there are “haunting parallels” between the paranoid schizophrenic and the deeply involved occultist. He warned that “participation in the occult is dangerous for persons who are the most interested in it because they are the least able to turn it on and off.... And a lot of them have become paranoid psychotics.”⁷

Alice McDowell Pempel of Cornell University delivered another paper on the consequences of drug-induced altered state of consciousness (ASC), and noted the “possibility for madness is ever present” if those who meet up with monsters and demons in these states view them as real.⁸ Of course, psychic and occult practices characteristically induce altered states of consciousness and this in itself poses risks. Psychiatrist Arnold M. Ludwig points out, “As a person enters or is in an ASC, he often experiences fear of losing his grip on reality and losing his self-control.”⁹

Psychotherapist Elsa First warns that cultivating ASCs may result in a “permanent alienation from ordinary human attachments.”¹⁰ Medium Wanda Sue Parrott also notes the ease with which psychics may lose a grip on reality:

What is the greatest threat to human well-being in the world of psychic phenomena? I would say from experience, *fear*. Fear of losing one’s sanity and self-control are nearly as common as fear of losing one’s soul.¹¹

The fear of insanity seems to be a genuine concern, for as former witch Irvine alleges, “Be warned: those who walk down the dark road of witchcraft lose their reason, often going completely insane.... Minds are twisted and warped.”¹²

Psychic Harmon H. Bro refers to the occultly influenced mental conditions of some people—conditions which overcome their sanity as they seek to become more and more psychic: “I shall not soon forget the power-driven widow who frantically burned incense in her bedroom to rid it of ‘evil entities’ and aimlessly constructed ‘aura-charts’ of angels as she withdrew from her friends and family into a hate-supported schizophrenic world.”¹³

Psychical researcher Robert H. Ashby, author of *A Guidebook to the Study of Psychical Research*, relates one case of a Ouija-board-induced breakdown. The spirit (“Joe”) started out typically with a surprising knowledge of personal details of the participants’ lives. He was very witty and entertaining besides. But once the person was in emotional dependence on advice from the board, the message changed:

(The) next stage was frankly sexual propositions that soon had the girls disturbed; but when they asked that he (the spirit) stop this, the messages became threatening, the warnings including something “Joe” termed “psychic rape” if they did not comply with his wishes. At this point, Wendy was so frightened that she stopped sitting at the board. Linda, however, was so “hooked” that she felt it more dangerous to stop than to continue, for Joe ordered her fiercely to keep on with the ritual. Eventually, the climax arrived when Joe told Linda that she must drop out with him, for they were, he assured her, “soulmates” from former lives. The punishment if she did not do his bidding was serious physical disfigurement or even death at his hands....

Linda became a recluse, unwilling to seek psychiatric help (Joe had warned her against that), afraid to continue school, and sinking steadily into a desperate mental state.... Linda refused to see me because Joe had whispered to her that he would kill her if she did.

The pattern outlined above... is all too common in Ouija board experiences.¹⁴

Raymond Van Over, a former editor of the *International Journal of Parapsychology*, refers to one girl, who, through her occult involvement felt:

She was being attacked telepathically by a vampire who was after her blood. His voice kept cursing her and telling her disgusting things to do. One didn’t need to be a psychiatrist to see that she was deeply disturbed and on the verge of a breakdown.... She suffered a complete mental collapse.¹⁵

Anita Muhl, M.D., is an authority on automatic writing. She refers to one actress who became interested in spiritism by this method, and was finally admitted to a mental hospital. In the hospital she felt she had been taken over by the spirit of her dead father:

That same evening the patient suddenly threw herself to the floor and went through numerous gross symbolic movements.... She spoke of being thrown to the floor by occult powers.¹⁶

The actress subsequently went through several releases and re-admittances to the hospital and, after a year, was discharged with a diagnosis of “Paranoid Condition—Much Improved.” For the next year, she continued to develop mediumistic powers and believed she was healed of numerous physical ailments by her spirit controls. But while lecturing in another city, she spontaneously fell into a trance on a crowded street. She had to be taken to a hospital first and then

to a mental institution where she developed feelings of grandeur and experienced other traumas. Eventually released, “she continued to lead a miserable unadjusted life.”¹⁷

Although advocating automatic writing as a possible tool for psychotherapy(!), even Dr. Muhl confesses that when used for working off fantasies, when the material is destructive (which is often the case), the person is “apt to become more and more unstable and sometimes psychotic.”¹⁸

For example, Dr. Muhl herself gives numerous case histories of the problems associated with automatic writing, pointing out that the messages “often prove dangerous” and cause a tendency to schizophrenic reactions. “The subject begins to lose interest in everyday contacts and responsibilities and often becomes delusional and hallucinated. I have seen many a fine business and professional man lose his grip through too intense interest in automatic writing.” The person becomes “less and less able to face reality” and these automatisms “frequently precipitate a psychosis.”¹⁹ She says that any other use of automatic writing besides for therapy (!) is “very dangerous.”²⁰

It is both ironic and unfortunate that hundreds of psychotherapists today see benefits to automatisms and other forms of the occult in counseling. Use of these practices (including automatic drawing, speech, painting, musical composition; tarot card therapy, shamanism and sorcery, ASCs, pendulums, meditation, psychosynthesis, etc.)²¹ is dangerous and should be avoided.

In conclusion, we have shown that the possibility of insanity constitutes a potential hazard of occult practice.

Notes

¹ Kurt Koch, *Occult ABC* (West Germany: Literature Mission Aglasterhausen, Inc., 1980), pp. 272, 274.

² In Larry Kahaner, *Cults That Kill: Probing the Underworld of Occult Crime* (New York: Warner, 1988), p. 59; cf., Georgio Alberti, “Psychopathology and Parapsychology—Some Possible Contacts,” *Parapsychology Review*, May-Jun. 1972, p. 11; cf., Nandor Fodor, *Encyclopedia of Psychic Science* (Secaucus, NJ: Citadel, 1974), pp. 234-235.

³ Kurt Koch, *Occult Bondage and Deliverance* (Grand Rapids, MI: Kregel, 1970), p. 31.

⁴ Koch, *Demonology, Past and Present* (Grand Rapids, MI: Kregel, 1970), pp. 41-42.

⁵ D. Scott Rogo, “Mental Health Needs and the Psychic Community,” *Parapsychology Review*, Mar.-Apr. 1981, p. 20.

⁶ *Ibid.*

⁷ John Dart, “Peril in Occult Demonic Encounters Cited,” *Los Angeles Times*, Dec. 30, 1977.

⁸ *Ibid.*

⁹ A. M. Ludwig, “Altered States of Consciousness,” in Charles Tart, ed., *Altered States of Consciousness* (Garden City, NY: Anchor, 1972), p. 16.

¹⁰ Elsa First, “Visions, Voyages and New Interpretations of Madness,” in John White, ed., *Frontiers of Consciousness* (New York: Avon, 1975), p. 65.

¹¹ Wanda Parrott, “Inside the Psychic Jungle,” in Martin Ebon, *The Satan Trap: Dangers of the Occult* (Garden City, NY: Doubleday, 1976), p. 67.

¹² Doreen Irvine, *Freed From Witchcraft* (Nashville, TN: Nelson, 1973), p. 95.

¹³ Cited by Martin Ebon in *Fate Magazine*, Feb. 1971, p. 104; cf. Albert W. Potts, Jr., “ESP or Madness,” *Spiritual Frontiers*, Summer 1972, pp. 143-144.

- ¹⁴ R. Ashby, "The Guru Syndrome," in Ebon, *The Satan Trap*, pp. 39-40.
- ¹⁵ Raymond Van Over, "Vampire and Demon Lover," in Ebon, *The Satan Trap*, p. 67.
- ¹⁶ Anita Muhl, *Automatic Writing: An Approach to the Subconscious* (New York: Helix, 1963), p. 42.
- ¹⁷ *Ibid.*, p. 45.
- ¹⁸ *Ibid.*, p. 48.
- ¹⁹ *Ibid.*, pp. 51-52, 87, 163.
- ²⁰ *Ibid.*, p. 170.
- ²¹ Seymour Boorstein, ed., *Transpersonal Psychotherapy* (Palo Alto, CA: Science and Behavior Books, 1980); Charles Tart, ed., *Transpersonal Psychologies* (New York: Harper Colophon, 1977); cf. Robert Monroe, *Far Journeys* (Doubleday, 1985), pp. 22-25; Roger N. Walsh and Frances Vaughn, *Beyond Ego: Transpersonal Dimensions in Psychology* (Los Angeles: J. P. Tarcher, 1980).