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Intersection of mental illness, the supernatural, and gender in Pakistan

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Man with the spirit of his deceased second wife. William Hope. c. 1920 Credit: [National Science and Media Museum](#). No known copyright restrictions.

Maria sits across from me in a pristine clinic room in a private hospital in Pakistan. At first reluctant to speak about her husband's illness, her words suddenly flow as if a dam has burst. She wants me to know everything: her suffering and her worry at taking care of her husband, who does not work, who has frequently hit her in the past and with whom she has to live, because *jhailna pareyga* (I have to endure it), *mera shauhar hai* (he is my husband, after all). She answers all my questions eagerly, speaking quickly, and I attempt to write it all down.

Maria talks about her initial reaction when she first found out about her husband's illness, stating matter-of-factly that she "always knew something was strange about him." When a psychiatrist formally diagnosed him with schizophrenia, she was not surprised. Her in-laws, however, had other ideas. Her father-in-law thought that she had performed *kaala jadoo* (black magic) on him, that when she had read some *wazeefa* (a string of holy words uttered together), something had gone wrong. Her husband became violent and out of control, and it was thought to be her fault. According to her in-laws, she had recited incantations to woo her husband and win his unflinching loyalty (as most wives desire), which had resulted in his illness.

Maria chose not to argue, encouraging them instead to seek spiritual treatment for her husband. It did not work, and her husband's behavior continued to worsen. He became more abusive and

violent and was unable to keep a job to support the family financially. Maria eventually sought psychiatric help.

Maria's inner world, along with that of other participants in this study, provided a unique glimpse of the intersectionality of gender relations, belief in the supernatural, and mental illness within the Muslim, largely patriarchal, collectivist Pakistani society.

Illness in general, and mental illness in particular, are often attributed to supernatural causes in many cultures. Spasms, infertility among men and women, and insanity are conditions that are often attributed to supernatural causes.¹ Anthropologists report that such perceptions abound in small-scale societies where illness and other unlucky life circumstances are believed to occur because of sorcery, witchcraft, and evil eye, and are rooted in envy. Such accusations are plentiful in relationships characterized by conflict, poverty, powerlessness, and feelings of inadequacy.² The drivers for seeking spiritual guidance to treat illness, in many cases, are family members who manage the therapeutic process by "decided[ing] the next course of action."³

Within the Muslim world, such beliefs rise to the surface to "explain the inexplicable."⁴ In the midst of the uncertainty and havoc created by illness in general, and the strange and erratic manifestations of mental illness in particular, such beliefs provide relief and a sense of stability for family members of the afflicted.

Within the Pakistani social world, however, the intersection of gender with supernatural beliefs is a striking phenomenon. My exploratory qualitative research focused on the effects of mental illness on the quality and outcome of marriage, and was conducted in a private sector hospital in a large urban area. I myself am a woman from Pakistan who looks at phenomena through a gender lens. These factors affect my perspective; however, the observations and themes here have been traced historically, and I have explored experiences and viewpoints from other cultures.

While never directly asked, many participants attributed illness to a supernatural cause, and claimed that as wives they were viewed with particular suspicion, as if they had single-handedly caused the husband's mental illness. This was especially true if the illness occurred after marriage.

An alternative explanation is, of course, the exposure of the individual to high levels of stress or simply the change in daily routine after marriage that may have triggered the onset of symptoms.⁴

In Bangladesh, a country with a similar socio-religious landscape to Pakistan, the wife is often considered the alleged perpetrator or cause of illness because of her marginalized position in the household.⁵ Pakistani society is generally characterized by norms of patrilocal existence where the daughter-in-law moves into the "husband's house" and tends to be placed in a subordinate position.

Consider the allegation by Maria's father-in-law that she had "done" something to his son in an attempt to secure his loyalty, which led to his disruptive behavior. Sana, another participant in this study whose husband was diagnosed with bipolar disorder soon after the couple got married, was also alleged to have been the cause. She reported, with tears welling in her eyes, "They [his family] say I have made him ill."

These two women did not ascribe their husband's illness to a supernatural cause, which perhaps reflects an intergenerational shift in belief system. Maria and Sana both repeatedly emphasized that "this is just an illness," but this fact also reflects the outsider status of wives in the new household; they imbibe a belief system that is distinct from that of their in-laws. It then makes sense when Maria does not argue with her father-in-law, but in fact encourages him to seek

spiritual guidance. Because of this outsider status that women occupy after marriage, it seems almost logical that when any misfortune strikes, the wife is automatically blamed.⁵ The illness attributed to a supernatural cause then becomes conflated with a wife's treachery; she has caused the illness through black magic or sorcery.

The ascription of sorcery to women is an ancient concept. Within the Babylonian Talmud, while the rabbis had supernatural power viewed as "pure," a woman with power was considered to be a sorceress. The patriarchal Talmud society considered women inferior and liminal, existing on the fringes of the society.⁶ Wives in a new household are also liminal, and hence easier to blame for familial mishaps. Operating within the paradigm of the supernatural also allows interpersonal conflicts to play out, particularly in relationships with in-laws, and to voice past grievances that have hung in the air but were never before spoken, thus creating a culture of blame.⁷

Blaming a wife for an illness can also be considered through a power lens. Placing blame allows individuals to reassert their power, but also ensures that they can preserve existing social institutions. From a structural-functionalist perspective, young women who are new in the husband's household are considered to be strangers. Therefore it becomes almost natural to blame them if illness strikes someone in the family. One finds such examples in literature when women were accused of witchcraft in the absence of proof of guilt.⁸ The witch hunts of the sixteenth and seventeenth centuries were largely motivated by the desire to preserve existing power structures. A large majority of the "hunted" were women who allegedly caused illness through black magic.⁹ The accusations that the women in this study face are not new; such events have occurred historically. However, these situations are playing out in urban settings in the contemporary world.

There is, however, a difference between historical witchcraft accusations and the kind described here. Witch trials in Europe and North America in the sixteenth and seventeenth centuries generally involved women who were regarded as lonely spinsters, unhappy women who were unmarried and childless.¹⁰ But in modern Pakistani society, wives are not exempt from such accusations despite fulfilling their supposed gender roles.

There is some evidence of similar occurrences from other societies. In the early 1990s in South Africa, "obstinate" daughters-in-law and "insubordinate" wives were also victims of such accusations;¹¹ these were women who defied gender norms and expectations. While my study did not specifically probe the dynamics between wives and in-laws, some grievances seeped into conversation, driving home the point that these relationships were marked with conflict that emerged or was magnified because of illness.

On the other hand, husbands were hardly, if ever, blamed for the mental illness of their wives. Sons-in-law enjoy great prestige in their wife's childhood home, and are generally revered by their parents-in-law. Therefore, suspicion was never leveled at the husband, but more often at the husband's family who had possibly caused the illness because of their envy of the new wife.

Ascription of blame for illness often follows a narrative of competition for a husband's or son's attention. The wife wanted the husband's affection and tried to achieve that through black magic or sorcery, causing the mental illness; or the wife fell ill because her in-laws were envious and did not want their son or brother to be enraptured by her. The entire story thus appears to revolve around the man's affection and attention, thus attempting to regain control and power within relationships prone to conflicts.

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