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Mental Disorders in Anglo-Saxon England

Thesis booklet

Objective of the research

The present dissertation seeks to investigate the topic of madness and mental disorders in post-Conversion Anglo-Saxon culture. The investigation aims to outline what conditions were acknowledged as mental disorders, how they were perceived, how they were treated and what cultural background they had. My aim is to demonstrate that the way mental disorders precipitated in Anglo-Saxon written culture is a result of the amalgamation of antique Graeco-Roman medical, Christian, and Germanic folkloric notions stemming from pre-Conversion ideas native to Anglo-Saxon England. It has to be emphasized that my intention is not to search for signs that can be putatively identified as modern mental disorders thus forcing modern categories on medieval conditions, nor to offer retrospective diagnoses. Rather, my purpose is to find out what Anglo-Saxons considered madness and how they dealt with it.

One of the challenges one faces regarding Anglo-Saxon mental disorders is that the science of the abnormal mind is greatly dependent on social norms and thus it has undergone enormous changes in the course of time. Hence, as Anglo-Saxons did not leave any definitions behind, it is difficult to assess what was considered mental disorder by them. In addition, the written sources that came down to us tell the story of the beliefs of the literate layer of society; how others thought about it remains hidden from our eyes.

It also has to be taken into consideration that Anglo-Saxons' concept of the mind and soul is markedly different from the modern perceptions, and thus it has to be carefully examined in order to gain a better understanding of mental disorders: hence the Anglo-Saxon mind-soul *mod* phenomenon is also discussed.

To the best of my knowledge, the topic of Anglo-Saxon mental disorders represents relatively uncharted research territory: it has only been discussed marginally. The present dissertation therefore intends to invite further discussions as well as to fill a huge gap in the history of medicine, history of psychology and Anglo-Saxon research.

Research methodology

In order to overcome the difficulties mentioned above, I had to resort to a 'double-approach' since the subject of the dissertation is so elusive as mental disorders in an Anglo-Saxon context are so hard to define. I had to approach the question from its two ends: the vocabularic and the thematic. In order to understand a phenomenon, one must study how it works in various contexts. For this purpose, the expressions describing the phenomenon need to be identified and after that, the sources that contain narratives of these expressions need to be identified too: this is the first phase that I call 'vocabularic'. In this first phase, I collected words that express phenomena related to

mental disorders according to the Thesaurus of Old English. Once I had the expressions, I could collect the sources that had them and could start analysing the expressions in their contexts. Having analysed the relevant texts and thus obtaining an overall sense of how mental disorders appear in them, I started looking for sources that contained madness-like traits but did not include any items from the previously listed vocabulary. This was the second 'thematic' phase, where texts were picked and analysed based on suspected occurrences of madness. Defining the mind-soul *mod* was crucial for this phase because the assumption that madness is a malfunction of the *mod* was a helpful, albeit sometimes deluding method for discerning occurrences of putative madness. These texts had to be treated with precaution and suspicion, because they might not concern cases of madness at all – at least not in the eyes of Anglo-Saxons. Nonetheless, I did not omit those texts that proved not to be about medieval madness, as these findings are also useful because they show us how certain phenomena we regard insanity were interpreted by Anglo-Saxons.

The texts that have been identified by this method helped me draw a fairly comprehensive picture of Anglo-Saxon mental disorders: I could establish the main constituents of their concepts from a cultural historical perspective and I could further classify them based on a terminological and aetiological approach. According to the cultural historical view, the three main constituents are Graeco-Roman medicine, Christianity, and pre-Conversion native Anglo-Saxon folklore – these are the three building-blocks of the concepts

of Anglo-Saxon mental disorders; whereas according to the aetiological approach, the three classes of mental disorder are somatic, neutral and supernatural. The cultural historical approach is retrospective, while the aetiological classification highlights the nature of the disease as it was seen by the Anglo-Saxons, thus yielding a more nuanced and more precise view of the Anglo-Saxon concepts.

The somatic category can be traced back to natural philosophical texts, mainly Isidore, and ultimately to Greco-Roman medical works. Descriptions of the somatic category have a scholarly overtone and they view mental disorders as having their origin in somatic – mainly organic and humoral – issues.

The group of terms I labelled 'neutral' does not have a supernatural overtone, nor are its constituents products of imported scholarly texts. They originate in Anglo-Saxons' physiological observations and sensations in relation to the *mod* and its other aspects, e.g. *gewit* ('rational mind'). Thus, the terminology of this category is based on native Anglo-Saxon ideas. This category consists of a wide range of symptoms including both profane and supernatural maladies. They reveal a more native Anglo-Saxon pool of diseases than the group of somatic diseases and while most of them are terms that are applied both to supernatural and profane mental disorders, nonetheless, terms expressed with *mod*-compounds tend to denote profane conditions.

The supernatural category consists of mental disorders that were thought to be brought about by supernatural forces. Apart from demon possession, the perpetrators of this category are members of the native Anglo-Saxon folklore and thus they can shed the most light on the native Anglo-Saxon beliefs.

The organs or faculties that are mentioned in relation to mental disorders are *brægen* and *magan* in somatic remedies; *heorte*, *gemynde* and *mod* in neutral remedies; whereas there is no particularly characteristic body part that is involved in supernatural remedies.

Research results

In broad terms, it can be stated that texts leaning on antique Graeco-Roman medicine that survive in Anglo-Saxon England attribute mental disorders to natural causes, and in some cases to the morbidity of bodily humours; religiously themed texts tend to hold possession responsible for mental disorder-like symptoms; while medical texts embrace both theories along with native Germanic traditions. The fact that Old English medical texts used all these three systems implies that when in need, Anglo-Saxons accepted all three.

The main feature of the Graeco-Roman medical approach to mental disorders, which is also reflected in Old English medical texts, is that mental disorders were described as being primarily somatic diseases inflicting the brain, but because the brain was the seat of the soul, they also affected the soul, deteriorated its functions, thus producing mental symptoms manifested by e.g. strange behaviour. The explanations for these phenomena are reduced to somatic-materialistic processes. Madness is demystified as its symptoms are merely manifestations of down-to-earth humoral and organic events. The idea that mental disorders originate in the brain and in corrupt humours can be seen e.g. in Aldhelm's glossaries, where the Latin freneticus is glossed as brægenseoc (brain-sick) in MS Oxford, Bodleian Library, Digby 146, while the term bræcseoc (humour-sick) is used in glossaries, gospels, Bede's Historia Ecclesiastica and in the Leechbooks. In the second part of Bald's Leechbook, the author connects 'evil juices, humours venom-bearing' forming in the stomach that are 'in communication with the brain' with diseases demonstrating mental symptoms. Thus, somatic aetiology of madness was present in Old English texts; however, it was only represented in transmissions.

As for the Christian building-block, on the one hand, there was a significant materialistic-organic trend in scientific texts that was bequeathed by the classical authors; on the other hand, there was a strong Christian spiritual aspect of the soul and mind. This aspect allowed for the option that mental disorders were seen in the context of the supernatural. There are no examples of mental disorders inflicted by God as punishment in scientific texts; however, there are indeed instances of it in non-scientific context. In the patristic authors' texts, the general conceptions about mind, soul, and consciousness are both homogeneous and contradictory: the soul is incorporeal, the mind is its main part that bears the most likeness to

God and also bears rationality; but there was no consensus over the location of soul and the mind.

In the Old Testament, stories of madmen imply that insanity and possession can inflict a person as a punishment from God, or more like a consequence if God's will is violated, so a consequence if the right order of things is offended. In the Gospels, as opposed to the Old Testament, the reason for insanity and possession shifts from punishment to random accident and to various reasons that fit in God's plan. Victims of demon possession can be innocent, as Christ introduced the idea in the case of the man born blind. In the Old English versions of the Gospels, there is already a hint of the distinction between 'supernatural' madness and 'profane' madness with natural-somatic causes, at least vocabulary-wise. Gregory's writings demonstrate a further step of the evolution of the idea of insanity: the difference between profane and supernatural madness is acknowledged and highlighted, reflecting the time's medical advancements. It is also revealed that madness affects the *mens*. Thus, the metaphysical location of madness was pinned down in Gregory's writings and the Old English word *mod* was used as a translation.

Anglo-Saxon authors' texts reveal a kaleidoscopic approach to mental disorders: there are instances of insanity as figure of speech, as medical condition and as influence of the devil, with a very strong representation of raging fury. It is established that unusual mental and behavioural symptoms can be caused by malevolent supernatural beings without any specific reason, but natural causes can also come into play. In Ælfric's homilies, what echoes from all this is mainly the

connection between sin and madness and the rescuing nature of Christianity: madness was usually portrayed as a cause of demon possession, of which a saint granted relief. In Ælfric's teachings, the cure for madness and sin is following the Lord. The *deofol* and *feond* related conditions were both familiar and new to Anglo-Saxons. On the one hand, they were aware of supernatural beings who induced altered mental states, physical and mental dysfunctions. The concept was not novel to them, and they could easily associate the devildiseases with native Anglo-Saxon beliefs of supernatural afflictions. On the other hand, the novelty these conditions brought was the strong association of sin and contamination. Temptation interlaced the state of being in a *feond*-related condition; temptation and sinful behaviour was either the result of the disease or the origin.

As regards to the third building-block, the native Germanic elements, they are the most difficult to pinpoint. Since all our sources were written by Christians, we can never be sure to what extent they altered and synthesized the native elements into a Christian worldview. However, a strong tendency to connect madness, the supernatural, and frenzy is still visible. The words *gydig* and *ylfig* indicate that the concept of possession by a supernatural entity was present in Anglo-Saxon culture and that it was believed to cause an altered state of consciousness, probably with prophesying power. A number of supernatural entities were believed to cause both physical and mental disorders. *Ælfe* were associated with seductive and at the same time dangerous beauty, and were thought to be able to afflict physical and mental ailments: they were associated with internal

pains, cutaneous diseases, fevers and 'mind-altering ailments', e.g. delusions and hallucinations. *Ælfe* thus exhibit duality: on the one hand, they can bestow a nearly divine prophesizing mental state; on the other, an *ælf*-inflicted altered mental state can be a very inconvenient condition inflicted upon humans. *Dweorh* caused fevers and convulsions which were strongly associated with physical abuse of an invisible entity and hallucinations, while *nihtgenga* and *mære* were associated with nocturnal afflictions, both bodily and mental, with hints of delusions and hallucinations.

As a conclusion, in Anglo-Saxon England irrationally furious aggression and rage were considered forms of madness, be it supernatural or profane. Prophesying, probably alienated and unintelligible speech was also attributed to mental disorder, very often induced by supernatural beings such as ælfe. Hallucinations, visions, and various delusions were also part of the madness-palette, again induced by supernatural beings. While involuntary motoric manifestations like seizures could also be attributed to mental disorders. It can also be concluded that there was a strong tendency to regard mental disorders having supernatural origin: Germanic supernatural beings went hand in hand with devils inflicting mental disorder-like symptoms, and somatic theories and symptoms were also synthesised with supernatural elements. Somatic and profane theories were also acknowledged, but they existed cheek by jowl alongside the supernatural.

Publications

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