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**"Medieval phenomena in a modern age: a study of  
six contemporary cases of stigmata and reactions  
to them."**

**A thesis submitted by Edward Harrison for the degree of  
Doctor of Philosophy at the University of Kent at  
Canterbury.**

**October 1996 (revised May 1998)**



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## Table of Contents

<b>An Abstract</b>	1
<b>Introduction</b>	2
<b>Chapter One: collection and collation of material</b>	9
List of six cases studied - list of current cases worldwide - selection of cases - methodology - sources	
<b>Chapter Two: review of previous studies &amp; definition of stigmata</b>	18
Traditional catholic perspectives - 20th century viewpoints - definition	
<b>Chapter Three: historical review</b>	34
St Paul - St Francis - flagellants - medieval stigmatics - mystical phenomena - numbers of cases and gender bias - geographic clusters - English stigmatics	
<b>Chapter Four: Ethel Chapman</b>	62
Biography - congregation - medical history - first stigmatisation - progress of marks - mystical phenomena - iconography - response - ministry	
<b>Chapter Five: Jane Hunt</b>	77
Biography - congregation - medical history - first stigmatisation - progress of marks - mystical phenomena - iconography - response - ministry	
<b>Chapter Six: George Hamilton</b>	87
Biography - congregation - medical history - first stigmatisation - progress of marks - mystical phenomena - iconography - response - ministry	
<b>Chapter Seven: Revd James Bruse</b>	94
Biography - congregation - medical history - first stigmatisation - progress of marks - mystical phenomena - iconography - response - ministry	
<b>Chapter Eight: Heather Woods</b>	102
Biography - congregation - medical history - first stigmatisation - progress of marks - mystical phenomena - iconography - response - ministry	

<b>Chapter Nine: Christina Gallagher</b>	112
Biography - congregation - medical history - first stigmatisation - progress of marks - mystical phenomena - iconography - response - ministry	
<b>Chapter ten: three further contemporary cases</b>	
George Rutland - Maurice Roseley - Cloretta Robinson	120
<b>Chapter Eleven: the formation and validation of stigmata and consistency of associated experience</b>	129
Medical investigations - non-religious markings - Lechler case - Margnelli experiment - psychogenic purpura - self-abuse - death of Heather Woods - dermatographia - drug influence - claims of supernatural - parallel experiences	
<b>Chapter Twelve: iconography</b>	173
Familiar images - crucifixion in art - abductees - religious archetypes - Anthropus image	
<b>Chapter Thirteen: questions of authority</b>	187
Priesthood - women as laity - Corpus Christi - heretics - women's religious movements - marks as gifts of God - stigmatics empowered	
<b>Chapter Fourteen: mysticism and stigmata</b>	205
Conversion of Europe - synchronicity - Underhill - visions	
<b>Chapter Fifteen: stigmata and belief in the miraculous</b>	227
Definitions of miracle - paranormal - Ballinspittle - willingness to believe - embellishment - Padre Pio - house of prayer vigil - photograph of Holy Spirit - Lake Ridge - shamanism - Münchhausen	
<b>Chapter Sixteen: from cause to effect</b>	255
Hypnotism - bi-location - quantifying response - quality of response - individual's response	
<b>Appendix - St Paul</b>	
<b>Bibliography</b>	

**"Medieval phenomena in a modern age: a study of six contemporary cases of stigmata and reactions to them."**

**An Abstract**

The thesis, which is based on a first-hand examination of six contemporary cases of religious stigmatisation, offers a new approach to the study of stigmata in the christian tradition. Stigmata are the wounds of Christ's passion, which, in this context, are those displayed in physical form on the human body to which a spiritual, devotional or pietistic significance is attached and about which claims of preternatural origins are made. The thesis suggests that most previous studies of the subject have been intrinsically restricted in their approach by maintaining a false dichotomy: that religious stigmatisation must either be fraudulent or genuine, that is created (diabolically or by human means) in order to deceive, or, created by supernatural means for a divine purpose.

This study finds that while claims were made of the modern stigmata that they were of divine and supernatural origin, no witness evidence was found to corroborate the suggestion that the marks had been produced in any other than a natural way. Yet neither was a common human or natural explanation identified. The marks were produced in various ways which differed from case to case. Their significance however depended not on their cause, but on their validation through the interaction of the stigmatics with the communities which sustained them. It was from this process of interaction that reports of the supernatural and the miraculous emerged.

As the stigmatics came to be seen by witnesses and worshipping congregations as living allegories of Christ's passion, significant events, which incorporated elements of spiritual renewal, occurred. Stigmata of human origin appeared to be capable of deepening the faith of both the stigmatics and those who witnessed their marks; they led both groups into a greater awareness of the divine; and provided the opportunity for members of both groups to explore their own spirituality.

## Introduction

For over 750 years there have been individual christians who have exhibited on their bodies the physical marks of Christ's suffering - the stigmata. This study is based upon the most extensive<sup>1</sup> first-hand examination ever undertaken of this rare and extreme expression of christian piety. The recipients of the marks, the stigmatics<sup>2</sup>, have in various ways displayed wounds in their hands as if nails have been hammered through, or more superficial marks on the hands corresponding to the reputed position of the nails of crucifixion<sup>3</sup>; their feet similarly have appeared to be scarred and have bled; some have had marks on the forehead corresponding to those which might have been made by a crown of thorns; others have had a wound in the side as if they had been speared<sup>4</sup>. Cases have also been reported of stripes being visible across the back, resembling those from the scourging of Christ. Other forms of stigmata described have, it is reported, taken the shape of fleshy protruberancies with a visual resemblance to nail-heads which have appeared instead of wounds or scars; and, in a small number of instances, cruciforms and other religious images have appeared on the skin.

The etymology of the word stigmata is uncomplicated. It is the plural of the Greek *stigma* which in its relevant form means a mark or wound, particularly in the sense of a brand which might have been used to identify criminals or living property, slaves or cattle. *Stigmata* is the word selected by St Paul to describe how he carried the wounds

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<sup>1</sup> F M R Walshe MD, 'Stigmatization', *Catholic Medical Guardian*, October 1938, p. 172 refers to Padre Gemelli Rector of the University of Milan as having studied 30 cases. This is by far the greatest number claimed on any single person's behalf and the author could find no evidence that the priest had visited and personally examined more than four. His additional cases appear to have been studied from written contemporary and historical reports.

<sup>2</sup> Three terms have been normally used in the English language literature for those who are stigmatised in the religious sense, ie those who receive the wounds of stigmatisation. These terms are "stigmatist", "stigmatic" and "the stigmatized". A case can be made for any one of the three choices to be preferred. In this thesis the term "stigmatic" has been selected to be used throughout in order to maintain consistency. Stigmatisation is used as the noun to describe the moment or process of receiving the wounds.

<sup>3</sup> Both traditions concerning the position of the nails at crucifixion, the one suggesting they pierced the palms and the other that they pierced the wrists, are represented by recipients of the marks.

<sup>4</sup> Some stigmatics have displayed the wound on the right side, others on the left. The Gospel accounts do not specify.

of Christ on his own body<sup>5</sup>. Both in its singular form as *stigma* and in its plural *stigmata*, the Greek word has, in the English speaking world, become anglicised. The English meaning of *stigma* has been extended to embrace an abstract notion involving an imputation attaching to a reputation. Moreover the singular and the plural have diverged in meaning. In the English language today the imputation is not commonly attached to the plural and *stigmata* is now a term understood most usually to refer to the mimicked wounds of Christ's passion described above. In exceptional instances, a further development of its usage occurs when the word is adopted to describe comparable marks on the body to which a non-christian, but religious or quasi-religious significance, have been attached. The verb, to stigmatise, however has evolved to carry two distinct meanings. The one, used in the context of this thesis, refers to the action of receiving the wounds, while the other meaning refers to the imputation of stigma in a secular context.<sup>6</sup>

The pronunciation of the word *stigmata* has also evolved in its general christian English-language usage. In its Greek form the classical emphasis is on the first syllable. In its current popular English form the emphasis is on the second syllable, with the last four letters, *mata*, being emphasised to resemble the word 'martyr'. Heather Woods, one of the contemporary stigmatics at the centre of this study, frequently wrote the word as 'stigmartyr' in correspondence. Given the overtones of the popular usage of the word, this evolved pronunciation adds a new audible symbolism in the English-speaking world. As the phenomenon of stigmatisation has extended beyond Mediterranean and Roman Catholic Europe, especially in the 20th century, the anglicised pronunciation of the word *stigmata* has become increasingly used together with its associations with martyrdom. Thus one contemporary stigmatic<sup>7</sup> describes and identifies herself as a victim soul. It has also been noted that in Italy, the

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<sup>5</sup> Galatians 6. 17. Authorised Version "I bear in my body the marks of the Lord Jesus".

<sup>6</sup> This is discussed by Erving Goffman in *Stigma* (New Jersey: Prentice-Hall 1963)

<sup>7</sup> Christina Gallagher from Ireland.

land of the phenomena's origin, the word *stigmata*, when employed by English-speaking Italian guides at such places of pilgrimage as Assisi or San Giovanni Rotondo near Foggia<sup>8</sup>, is now pronounced in such a way as to stress the sound "martyr"<sup>9</sup>.

The stigmata have taken many forms and have appeared in a variety of ways, and while a sceptic can deny that the marks have anything to do with God and can maintain that they appear only on hysterical or unbalanced subjects and are self-inflicted, what cannot be denied is that they exist physically and tangibly and are interpreted by many as being of divine or supernatural origin. Few people who have ever seen the marks on a member of their own community or congregation have remained indifferent to them. They provoke confusion, fear and awe, as well as scepticism and cynicism. They stimulate both belief and disbelief. Furthermore, despite their rarity, because the marks are clearly visible and require no element of faith to be seen, they have provided a fierce testing ground of debate between believers and sceptics as to the nature of, or very existence of, the miraculous. As the Jesuit Herbert Thurston observed 50 years ago when setting the context of that debate, "catholic apologetic must always be based at least in part on the reality of miracles....to deny the possibility that true miracles may be wrought even in our own day, would be incompatible with an honest acceptance of the church's teaching....But in accepting such phenomena as a reinforcement of the *motiva credendi*, prudence enjoins that we must make sure of our ground....Even a very slender acquaintance with the literature of....nervous disorders suffices to show how extensive is the vista of possibilities which has been opened up, and also how great are the perplexities with which the subject is beset."<sup>10</sup>

In the main, researchers examining occurrences of stigmata have relied heavily on historical accounts and have had little opportunity to meet and examine more than a

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<sup>8</sup> The two places associated with stigmatics St Francis and Padre Pio respectively.

<sup>9</sup> As noted by the author in 1995 at San Giovanni Rotondo and reported to the author by a visitor to Assisi in the same year.

<sup>10</sup> Herbert Thurston, *The Physical Phenomena of Mysticism* (London: Burns Oates, 1952) p 120-121.

single instance of stigmata first-hand. Some writers have taken the deliberate decision not to make a direct and personal examination of the evidence. René Biot, a medical doctor, for instance, opened his study of the subject with the words, "I have never visited one who bears the stigmata, though such exist in our day, and not far from where I live".<sup>11</sup> He justified his approach by saying that an understanding of the phenomena was best arrived at through a process of reflection on the collected testimonies of others. Even that most prolific 19th century student of the phenomena, Imbert-Gourbeyre<sup>12</sup>, witnessed only four examples. Additionally, many previous writers have approached the subject in a preconceived frame of mind, either in a spirit of religious wonder or as avowed sceptics. Both approaches have shared one feature and that is that they have considered stigmata to be primarily the experience of an individual undergoing a deeply personal and traumatic event in isolation from, not as an integral part of a group. While in the past reactions to stigmatisation from church, congregation, community and family have frequently been described by writers who have explored the subject, their descriptions have overwhelmingly been placed within a restricted context: that context being that the group responses are a consequence of and not an integral part of the stigmatic's experience.

These past writers have often described whole communities being thrown into a state of extravagant religious enthusiasm by a stigmatic emerging in their midst. They have noted that sometimes personality cults have grown up around the stigmatic and frequently reported the claims of miracles and healings. Yet the implicit assumption underlying their reports has been that this group behaviour was in no way responsible for the initial, and extraordinary, events of stigmatisation.

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<sup>11</sup> René Biot, *The Riddle of the Stigmata* (New York: Burns Oates 1962) A translation by PJ Hepburne Scott of L'Enigme des Stigmatises, Vol 14 Ecclesia Series (Librairie Arthème Fayard, Paris) Introduction p 1.

<sup>12</sup> Dr A Imbert-Gourbeyre, Professor of the School of Medicine at Clermont examined Louise Lateau, Marie-Julie Jahenny, Palma Matarelli and Domenica Lazzari.



One view explored in this thesis, a view drawn from a statistical review of the largest number of cases of stigmatisation collected to date, which has then been reviewed alongside the specific examination of the contemporary evidence, is that stigmata, up until now treated by christians as an individual gift from, or response to, God, may also be understood within the context of a group experience of the divine. Restating the point from the non-believer's perspective, the view explored is that stigmata, up until now viewed as a product of an individual's psychological state may also be understood within the context of a stigmatic's interplay with a community questing for experiential religion. The thesis will suggest that:

- i. from direct observation of contemporary cases, their stigmata are physical markings, meaning that no evidence was found that they were produced by supernatural intervention; they were in all probability produced in a manner consistent with the observed laws of nature and within the medically acceptable boundaries of human behaviour and physiology;
- ii. there is no single mechanism to account for the production of the marks. The marks take various forms which suggest that they are imprinted or produced by means which vary from case to case.
- iii. the marks are of religious significance, whatever their origin, in that they are seen to be taking the form of Christ's wounds and are interpreted as a declamation by the stigmatic of her or his piety or empathy with Christ's passion;
- iv. the marks exhibited by stigmatics follow patterns predetermined by tradition, archetype and access to iconography;
- v. a stigmatic's experience acquires validation through the response of the community or congregation of which the individual stigmatic is a member, and that this process of

validation involves the community attributing a supernatural element to the appearance and behaviour of the stigmata;

vi. this validation, in turn, allows for legends of the miraculous to seed and grow<sup>13</sup> and that these legends, in turn, both feed the desire of witnesses for their own experiences of the supernatural and satisfy those needs, convincing the witnesses of the possibility of the numinous in their own lives;

vii. the whole process may frequently be seen within the context of a challenge by the witnesses and the stigmatic to the authority of official church structures which normally reserve to themselves the means of access to the supernatural and to the body of Christ. Yet this challenge, which may also be viewed as an undermining of that authority, normally involves the realisation by the official religious authorities that they cannot condemn it outright;

viii. no formula to explain the phenomena in theological terms can be arrived at to suit all perspectives and it will be suggested that stigmata require to be individually validated by every single person who comes into contact with the phenomena and is seeking an explanation. This applies both to direct or indirect contact. Nevertheless, even those who choose an approach which minimises the significance or possibility of supernatural intervention, can find through the vicarious experience of the stigmatic, a deepening of their own faith.

As well as adding considerably to the bank of research data on the subject, through the direct examination of the contemporary cases, the thesis also, from its examination of new material within the context of the old, provides a significant advance in the

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<sup>13</sup> Associated with stigmata are claims and reports of other phenomena, popularly viewed as mystical or paranormal. These include; telekinesis; mystical marriage with Christ; abnormal behaviour of the body after death (including absence of decomposition and rigor mortis); luminous transfiguration; production of unusual body heat; inedia; visions; religious ecstasies; the odour of sanctity; levitation; clairvoyance and prophecy.

understanding of the subject over and above the work which has previously been published. This advance is in two main respects - namely, that the appearance and maintenance of the wounds cannot be attributed to a single cause or process, and that stigmata should be seen to be as much a communal as an individual experience.

## Chapter One: collection and collation of material

The collection of the original material for this thesis has taken place over a period of seventeen years. Four years has been spent on collating the material and it is from the closer and contextual examination of this material that new insights into the phenomena have emerged.

The first example of an episode of stigmatisation<sup>1</sup> to be witnessed by the author was observed on Good Friday 1980 in Liverpool and the most recent face-to-face interview and videotape evidence was recorded in Glasgow on Good Friday 1996<sup>2</sup>.

In all, six cases<sup>3</sup> were examined first-hand with interviews being tape-recorded and/or videotaped in each case whenever possible. Three of the stigmatics<sup>4</sup> also corresponded with the author by letter. With three, contact was also maintained by telephone<sup>5</sup> and further information obtained.

The cases were as follows:

Mrs Ethel Chapman from Merseyside, England, an Anglican laywoman;

Mrs Jane Hunt from Derbyshire, England, an Anglican laywoman;

Mr George Hamilton from Glasgow, Scotland, a Roman Catholic layman;

Mrs Christina Gallagher from the County Mayo, Republic of Ireland, a Roman Catholic woman;

The Revd James Bruse from Virginia, USA, a Roman Catholic priest;

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<sup>1</sup>The predicted bleeding of the wounds exhibited by Ethel Chapman in the apparent course of a religious ecstasy in her room at the Leonard Cheshire Home where she was a resident.

<sup>2</sup>An interview with George Hamilton held at his home, a flat in a housing development on the outskirts of Glasgow.

<sup>3</sup>In two cases, those of Father Jim Bruse and Christina Gallagher, evidence had been taken by designated Roman Catholic investigators and press reporters in advance of the author.

<sup>4</sup>Jane Hunt, Heather Woods and George Hamilton.

<sup>5</sup>Jane Hunt, Heather Woods and Father Bruse.

Mrs Heather Woods from Lincolnshire, England, a female deacon and member of The Holy Celtic Church.

The taped evidence of witnesses was similarly taken, collected in writing or taken from third-party reports<sup>6</sup>. The witnesses included medical practitioners attending the stigmatics. Additionally, the observations, views and insights of spiritual advisers were sought and, with two exceptions, given<sup>7</sup>. Also a number of worshippers from the congregations of which the stigmatics were members gave their testimonies.

The gathering of material was extensive, but no claim can be made that the six cases examined were a representative sample of current stigmatics, since the small numbers involved would make such a claim meaningless.

A seventh person who believed he had undergone stigmatisation was also interviewed face-to-face. He was Mr George Rutland from Harrow, England, an evangelical and member of a Baptist Church. Although the experiences he reported bore many of the hallmarks of stigmatisation he carried no surviving evidence of his stigmatisation on his body.

Correspondence was exchanged with an eighth stigmatic, Maurice Roseley from California, USA and she was interviewed by telephone. Contact was first made with her in July 1996 when the main research for this study had been completed. However her case proved to be of particular value in that her reported experiences, relayed without the aid of leading questions or foreknowledge of the research, confirmed many

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<sup>6</sup> In the case of Heather Woods, in addition to the interviews she gave the author, she also spoke at length with John and Anne Spencer about her experience. They describe themselves as researchers in many fields of the paranormal and were undertaking their own investigations. Transcripts of their interviews were made available to the author and later published as *Spirit within her* (London: Boxtree 1994). Also Jane Hunt was interviewed by Ian Wilson in the course of his research for his book *The Bleeding Mind* (London: Weidenfeld and Nicolson 1988).

<sup>7</sup> The two exceptions being Father Bruse's diocesan bishop who refused to answer questions and, sadly, the spiritual adviser to George Hamilton who died shortly before an interview was due to be scheduled.

of the conclusions which had been reached, especially those concerning the interplay between stigmatics and the religious groups to which they belong.

When the two additional cases are included, the study represents 26.7% of the known instances of active stigmata over the 1979-1996 period worldwide<sup>8</sup>.

In addition to the eight cases outlined above the following have come to the attention of the author<sup>9</sup>:

Roberto Casarin (Italy), Male

Cloretta Robinson (USA), Female

Vera D'Agostino (Italy) F

Gigliola Giorgini (Italy) F

Angelica Rael (USA) F

Brother Gino Burrese (Italy) M

Salvatore Marchese, (Italy) M

Eva McIsaac (Canada) F

Signora 'R' (Italy) F

Giorgio Bongiovanni (Italy) M

Michele Improta (Italy) M

Julia Kim (Korea) F

Clemente Dominguez (Spain) M

Ampara Cuevas (Portugal) F

Da Motta (name not confirmed) (Argentina) F

Sister Agnes Sasagawa (Japan) F

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<sup>8</sup> In addition to the eight cases studied, two other stigmatics were approached for interviews. They were Cloretta Robinson from California, USA, a Baptist who became a recipient of the wounds aged 10 years. She is the youngest contemporary stigmatic and one of only two black recipients of the wounds (the other being Maurice Roseley) whose name is known. Whilst she did not wish to take part in the study, her mother and her paediatrician spoke to the author.

Vera D'Agostino from Italy was approached by the author but declined to meet him.

<sup>9</sup> The sources from which this information has been obtained have included both published sources (wide circulation and limited circulation magazines) and the author's own network of contacts.

Unnamed male (UK) M  
 Unnamed Priest (USA) M  
 Unnamed Priest (Italy) M  
 Marthe Robin (France) F  
 Domenica Lo Bianco (Italy) F  
 Patient of Dr Oscar Ratnoff (USA) F

The cases examined in detail were selected firstly through being the most-readily accessible in the context of a United Kingdom-based and English language study and secondly through self-selection. Two stigmatics approached were not willing to cooperate. In three cases, witnesses to the events associated with the stigmatics contacted the author<sup>10</sup> in each instance with the stigmatic's consent. In one case the stigmatic herself made direct contact with the author and initiated the ensuing dialogue<sup>11</sup>. Three stigmatics<sup>12</sup> were contacted following press reports of their experiences and the remaining case<sup>13</sup> was introduced by a mutual acquaintance.

However, while the cases have been selected largely on the basis of accessibility and willingness to talk freely about their stigmatisation experiences, there is no reason to suppose that they are untypical of modern stigmatics. The phenomenon is no longer restricted to Roman Catholics from southern Europe and is now known in the Americas, Australia and the Far East. Indeed, from stigmatics living away from the influences of Mediterranean Catholicism, when examined within the wider historical and religious context of stigmatisation, it may be easier to isolate the essential and influential types of historical and cultural factors involved, in that they are untouched by the specific factors associated with Mediterranean culture.

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<sup>10</sup> Jane Hunt was introduced by a member of her congregation, Heather Woods by her spiritual adviser and George Hamilton by his general practitioner. In each case the first contact was made by letter to the author.

<sup>11</sup> Maurice Roseley.

<sup>12</sup> Christina Gallagher, Father Jim Bruse and Ethel Chapman.

<sup>13</sup> George Rutland.

It can, of course, be argued that the cases are untypical of the phenomenon of stigmatisation taken as an historic whole. Members of religious communities are under-represented in the survey. Italians, by a long way the most numerous in the select band of historic stigmatics, are not represented at all. To address any possible imbalance, the life of the Italian Capuchin Padre Pio has been explored, with particular reference to his early letters and medical reports. Also access was granted to the research work of Dr Marco Margnelli concerning two twentieth century Italian cases.

That three of the eight cases are male is also untypical of the historic male to female ratio. However, the distribution of cases has altered significantly this century, which has also seen changes in the status of people who have received the marks. These will be demonstrated in subsequent chapters and certain conclusions about the nature of stigmata will be drawn from these changes.

Dictated by the nature of the subject, the singularity of each experience of stigmatisation and the issues of sensitivity and privacy involved, research into the experiences of the six core contemporary stigmatics did not lend itself to any form of systematic, pre-formulated interview procedure. The pace of the process by which the information was gathered was entirely determined by the personality and the medical condition of each stigmatic<sup>14</sup>.

Additionally, in two instances, evidence from post-mortem examinations was sought and given<sup>15</sup>.

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<sup>14</sup> In the case of Ethel Chapman, for example, her medical condition was such that she tired easily and it was advised that she only talk for a set time each afternoon.

<sup>15</sup> An inquest was held into the unexpected death by drowning of Heather Woods in a river near her home in Lincoln on the night of December 21-22, 1993. An Open Verdict was entered by the coroner. Ethel Chapman's wounds were examined by her spiritual adviser The Revd David Lockyer following her death on July 22, 1980 after a long illness.



Through this approach, the key information relating to each of six singular experiences was, with only minor omissions, successfully acquired. This information was subsequently examined, in each instance, under the following headings:

- a) Biography and background, including information on family history where relevant and available;
- b) Congregation and community to which the stigmatic belonged;
- c) Medical history, with special reference to any psychiatric problems;
- d) First stigmatisation, the timing and nature of the initial appearance of the wounds and an assessment of the extent of the individual's prior knowledge of the condition;
- e) Shape, form, progress and predictability of the marks;
- f) Claims that other mystical phenomena have been associated with the experience of stigmatisation;
- g) Familiar iconography and influential books or devotional films;
- h) Personal response to wounds and perceived purpose;
- i) The reactions of the church, of witnesses and of the wider community to the wounds;
- j) Wider ministry involving the stigmatic which evolved from publicity given to the stigmatisation outside his or her immediate circle.

These categories were compiled primarily for the use of the author to order the evidence and allow comparisons between cases. The arbitrary nature of the categories is recognised. At that stage the value of the accumulated research increased as it could then be more readily paralleled with historic cases and other relevant accounts of modern stigmatics. Data and observations taken from medical literature, where pertaining to comparable clinical conditions, was similarly compared with the original material. The beliefs and interpretations of events made by the stigmatics, their spiritual advisers, church spokesmen and witnesses were also examined in the light of selected theological writings.

It might be supposed at first sight that a subject such as stigmata is one most appropriately viewed as being of a theological nature with only the peripheral involvement of other disciplines. However, it was found necessary to draw upon the insights and perspectives of social anthropologists, medieval iconographers, historians, pathologists and others from a range of academic pursuits for the following reason. No single person can validly claim expertise and detailed knowledge over the entire range of subjects and vocations which impinge on stigmata. The most he or she can expect is to be able to demonstrate the required level of familiarity with current thinking in the subjects over this range. However, awareness of the requirements of a cross-disciplinary approach in this context is unavoidable. At each stage it was necessary to confirm that observations and conclusions arrived at within the scope of this study would not be invalidated by those investigating inter-related matters from a different perspective.

A further point needs to be made to set out the ground-rules of interpretation of material employed. No researcher can approach any subject of this emotional potency free of social conditioning, personal experience, predispositions of character and a religious faith<sup>16</sup>. However, the author to the best of his self-knowledge, is not aware of any predetermined dogmatic agenda which by undertaking the study of stigmata, he was determined to prove and uphold. Thus he approached the research with no predisposition either to dismiss prejudicially or accept unquestioningly the testimony of the six individuals studied. For the sake of consistency he chose to work on the assumption that all the evidence given was imparted in good faith<sup>17</sup> and that, while instances were later discovered of evidence being internally contradictory and in some cases confirmed as inaccurate, none of the six key subjects were regarded as being involved in a pre-planned, systematic and conscious campaign of dishonourable

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<sup>16</sup> Religious faith being used as a term to include any position on the spectrum from unquestioning acceptance of all dogma to militant opposition to all notions of the existence of the divine.

<sup>17</sup> On much the same principle that all Members of the House of Commons have to work from the assumption that all other members are acting honourably.

deception. Where deception is raised as a possibility, it is viewed as unpremeditated and as a spur-of-the-moment response to a situation. That stigmatics could be capable of self-delusion, honest mistake and elaboration became evident from the checking of the material and therein lay an important clue to the understanding of the whole of their condition.

When Biot advocated that the student of the subject should depend more on the processing of collected material than subjective first-hand assessments, he appears to have been mindful of the danger that a researcher could become overly swayed by the strength of personality of the individual at the centre of the research and, in the circumstances surrounding a stigmatic, be diverted by the atmosphere of devotion or reverence generated by the entourage. Biot was right to stress that observers, however practiced in the skills of detachment, could be impressionable and, if not swayed to view the stigmatic with disproportionate favour might still overlook or undervalue evidence presented. This might be especially true if that evidence was presented in a chaotic manner in the course of an unplanned and unstructured encounter. However to shun personal encounters with stigmatics involves relying solely on the evidence of others and their agenda. The author has felt it right to heed Biot's warning but not to take his advice in full. First-hand evidence has been gathered from the stigmatics which was then, in Biot's words subjected to "a process of reflection"<sup>18</sup>.

Biot's preferred approach is unavoidable when historical data is being sought and considered. In this regard the author had access to modern published works on stigmata and drew on historical sources contained in them. In addition pre-20th century texts were made available through the Jesuit Library<sup>19</sup>. Access to documents relating to Padre Pio and interviews with members of the Capuchin Order at San Giovanni Rotondo were also granted.

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<sup>18</sup> Biot Introduction p 1.

<sup>19</sup> The Library of the Roman Catholic missionary organisation The Society of Jesus at 114 Mount Street, London W1.

The gathered material was examined in such a way as to seek to identify the common or parallel experiences of the stigmatics and the way in which they reacted to them. Given the sample size and the subjective element of much of the material, statistical methodology was deemed inappropriate, although a simple arithmetic collation of certain historical evidence demonstrated patterns of behaviour which furthered the overall study.

The first stage in examining the new material was to make an examination of published approaches to the subject of stigmata in order to isolate the spectrum of bias of the various authors. The purpose of this exercise was to become aware of the substance and form of that bias so as to best interpret the historical material being presented.

## **Chapter Two: a review of previous studies and definition of stigmata**

In theory the spectrum of bias when considering stigmata contains as many perspectives as there are individuals considering the evidence. At one extreme will exist those who are unable to be moved from their position that the stigmata are a direct divine gift made to a saintly individual as an act of God's grace and recognition. At the other extreme are atheists who are unable to be swayed from their position that all religious miracles are frauds perpetrated by unscrupulous manipulators to delude the gullible faithful in order to exercise power or for financial gain.

As in any study of anthropocentric phenomena, once evidence has been taken and data collated, the interpretation of the information may be coloured by the predispositions of the interpreter. In the case of stigmata this becomes very apparent on reading the past literature, especially as the majority of written material relates to single instances and is recorded by observers who are themselves bound up in the events they are attempting to interpret.

Individual cases of stigmatisation have attracted close scrutiny from the early days of the phenomenon. For the first 500 years, from the 13th to the 18th centuries, examinations of claims were almost entirely the prerogative of the Roman Catholic Church, often motivated by a need to take control of a popular wave of religious enthusiasm. However, occasions can also be found in history when a stigmatic's case has been examined for more overt political reasons. The condemnation of the 16th century Portuguese Dominican religious Sister Maria de la Visitacion, as a fraudulent stigmatic, has been re-examined this century. Thurston suggests that her fate was determined by the Inquisition, not so much on the allegations that she had produced counterfeit wounds, but more on the grounds of her powerful advocacy of the independence of Portugal. It was for political reasons that the state required her to be

discredited. "It must not be forgotten that the Inquisition in the Spanish peninsula was in an exceptional degree a state institution."<sup>1</sup>

For the last two centuries stigmatisation has attracted not only the interest of the church but also of medical science. Frequently the theologians and medical researchers have worked in tandem in an attempt to understand an individual case. As the total number of cases has grown and evidence accumulated, interest has grown in studying stigmatics collectively and drawing general conclusions about the nature of the phenomena reported. A brief review of the key studies of stigmata this century illustrates the spectrum of reaction between the two theoretical poles.

In 1921 Father Benedict Williamson wrote with unconcealed enthusiasm about the wounds of the stigmatics, citing St Francis of Assisi and St Gemma Galgani in particular.<sup>2</sup>

"Both were penetrated with the most intense and abiding devotion to the passion of the Saviour, His wounds, His pangs, His sufferings, their daily food; the one desire of their life was to be united with Him in His sufferings, to be conformed to the express image of His likeness, not in His splendid glory, but in His agony and bitter pain. As the years of life sped on, the furnace of love burning within them only burnt the more strongly, till they seemed to have passed into the Crucified, and the Crucified to have passed into them. And a wonderful thing happens. The love and suffering of these souls 'oned' with Jesus Crucified, so overflows that the very wounds and marks of their Crucified Lord appear in their mortal bodies. Here we seem to find the clue to one of those marvels of God's power that has most strongly impressed the imagination of human kind; certainly no other supernatural manifestation of an external kind has

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<sup>1</sup> Thurston p 92.

<sup>2</sup> St Gemma Galgani (1878 - 1903) First stigmatised March 1901. She was born in Tuscany but lived most of her life in Lucca, Italy. Her stigmata appeared with regularity every Thursday evening in preparation for her observance of Friday as the holiest day of the week.

proved so arresting as this. What is true in the two cases we have mentioned, appears to be true of all other like cases so far as they have been examined; an altogether extraordinary love of the Crucified, joined to an equally extraordinary desire to be like Him, to feel what He felt, and endure in the body what He endured, as far as such is possible for a creature. Love explains all."<sup>3</sup>

It was in similar vein that Jeanne Danemarie wrote of Therese Neumann<sup>4</sup>, "I have seen a living crucifix, carven and marked with the wounds of Christ... To see such a living crucifix, to listen to the words that escape from her ecstasy, leaves upon one an impression of joy and of fear - the fear of letting Christ pass by."<sup>5</sup>

Monsignor Albert Farges, publishing his treatise on mystical phenomena in 1926, laid emphasis on comparing those phenomena he considered to fall within the category of the mystical, (which included the stigmata, defined as being of divine origin), with their human and diabolical counterfeits. Farges' work received the approbation of Pope Benedict XV as a work "into which priests in general and spiritual directors in particular will be able to delve abundantly in the accomplishment of one of the most delicate and difficult duties of their mission to souls".<sup>6</sup> The work was to become a handbook for the church as it allowed the church to acknowledge the validity of the mystical phenomena in theory while at the same time enabling it to request that enthusiasts, for any particular manifestation, bide their time while the authenticity of the phenomena, as defined by the church, underwent extensive and prolonged examination. In no sense did Farges deny the possible involvement of the supernatural, although human deception and disorder were also acknowledged as possible causes.

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<sup>3</sup> Benedict Williamson, *Supernatural Mysticism* (London: Kegan Paul, Trench, Trubner and Co, 1921) p154-155.

<sup>4</sup> Therese (or Theresa) Neumann (1898-1962) lived at Konnersreuth, Bavaria. As well as carrying the wounds of Christ it is said that from 1926 until the end of her life she had nothing to eat except the Communion Host.

<sup>5</sup> Jeanne Danemarie, translated by Warre B Wells, *The Mystery of Stigmata* (London: Burns, Oates and Washbourne 1934) Introduction (unnumbered).

<sup>6</sup> Albert Farges, *Mystical Phenomenon* (London: Burns, Oates and Washbourne, 1926) p v.

Indeed he laid great emphasis on the supernatural element, but called upon the faithful to have patience as the church attempted to discern whether the supernatural source was divine or diabolic.

Farges drew two conclusions from his study of the mystical phenomena which included, in addition to the stigmata, visions, second sight, levitation, the odour of sanctity, luminous effluvia and a number of claimed superhuman manifestations in which the laws of nature, as generally observed, were in some way believed to be overruled. His first conclusion was that "by infused contemplation man is truly raised to a quasi-angelic state".<sup>7</sup> He drew a parallel with the metamorphosis of the silk worm into the butterfly. "The first creeps laboriously on earth, the second flies with white and shining wings."<sup>8</sup> He talked of the way in which the christian mystic could experience both the human mode and the superhuman mode. "These are two different lives. The one is the earthly life, the other the life of Heaven in anticipation; moreover, infused contemplation has seemed to all the mystical saints like a privileged foretaste of Heaven."<sup>9</sup> He drew as his second conclusion that while mysticism is raised "to lose itself in the infinite splendours of the skies, its feet rest firmly on solid ground".<sup>10</sup>

Twenty four years later Montague Summers repeated and extended references to the stigmata as being capable of being both a divine or diabolic manifestation.<sup>11</sup> He dismissed medical attempts to establish a pathology of stigmata incorporating hypnosis, autosuggestion and hysteria with the scornful words that they "do not concern us here....stigmatisation has been wrested from its hagiological and mystic meaning, and so to speak, secularised. Writers, then, who try to explain divine Stigmata, the only true Stigmata, by autosuggestion, or by pithiatism, or by any other save a supernatural

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<sup>7</sup> Farges p 579.

<sup>8</sup> *ibid.*

<sup>9</sup> Farges p 580.

<sup>10</sup> *ibid.*

<sup>11</sup> Montague Summers, *The Mystical Phenomena of Mysticism* (London: Rider, 1950)



cause, are either employing the term in a distorted and debased sense, or else deliberately attempting to inspissate and materialize spiritual things".<sup>12</sup>

Summers insisted that only two kinds of stigmatisation exist, the Sacred and the Satanic. The latter he defined as being the marks imprinted and produced through the medium or by the aid of the demon "whether it is actually recognised and known that the agent is a dark power, or whether it be that he is masquerading and disguised as a celestial messenger".<sup>13</sup> To assist witnesses discern the difference he enumerated the characteristics of the true or sacred stigmatisation. These characteristics included spontaneous wounds restricted to those of the passion, caused by no external or physical injury, from which blood flowed which was entirely clean and uncontaminated and which, in many instances if collected, having coagulated and solidified, might from time to time "be observed to liquify and assume a ruby red colour as though full of life and vital".<sup>14</sup>

The work of the Jesuit, Father Herbert Thurston, published collectively in 1952, was contemporaneous with that of Summers and was rooted in the same theological tradition. However his examination of historical and 20th century cases led him to take a far more cautious view. He concluded that it was not possible for the stigmatised saints to be separated out from the other stigmatics in such a simple form. "So far as records are preserved concerning the early history of stigmatised persons I venture to say that there is hardly a single case in which there is not evidence of the previous existence of a complication of nervous disorders before the stigmata developed. That does not mean that the person thus bearing the marks of Christ's passion was otherwise than good and even saintly from the very beginning. It is simply a question of the pathological conditions."<sup>15</sup>

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<sup>12</sup> Summers p 126.

<sup>13</sup> Summers p 128.

<sup>14</sup> Summers p 129.

<sup>15</sup> Thurston p 124.

Thurston in particular drew attention to the health record, in her early years, of Gemma Galgani, of whom Williamson had expressed his uncritical admiration. When drawing on the work of her biographer and confessor, Padre Germano<sup>16</sup>, and his claim made in 1914 that none of the symptoms usually associated with hysteria were present in her case, Thurston commented tersely in a footnote, "I find it rather hard to reconcile these statements with the early medical history of the case".<sup>17</sup>

Thurston acknowledged that in taking this sceptical line he was performing the thankless task of the Devil's advocate and was aware that he might "possibly trouble the simple faith of many good people".<sup>18</sup> Nevertheless he continued with his task justifying himself that in the days of widespread education, universal questioning and free discussion, "a premature and ill-grounded credulity cannot in the long run be of advantage to the church".<sup>19</sup> Thus it was that Thurston drew attention to what he described as the striking fact that not a single case of stigmatisation was heard of before the beginning of the 13th century.

"No sooner, however, was the extraordinary phenomenon which marked the last days of the seraphic St Francis published throughout the world, than other unquestionable cases of stigmata began to occur among quite simple people and have continued to occur without intermission ever since."<sup>20</sup>

From this Thurston inferred that St Francis had introduced the notion of the crucifixion complex. "Once it had been brought home to contemplatives that it was possible to conform physically to the sufferings of Christ by bearing His wound-marks in hands, feet and side, then the idea of this form of union with their divine Master took shape in

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<sup>16</sup> Germano di S. Stanislao CP, translated by AM O'Sullivan OSB, *The Life of Gemma Galgani*, (London: Sands 1914) pp 383-388.

<sup>17</sup> Thurston p 101.

<sup>18</sup> Thurston p 120.

<sup>19</sup> *ibid.*

<sup>20</sup> Thurston p 122.

the minds of many. It became in fact a pious obsession; so much so that in a few exceptionally sensitive individuals the idea conceived in the mind was realised in the flesh."<sup>21</sup>

By 1988 the caution taken by Thurston when interpreting uncritical historical evidence, had been taken further by another Roman Catholic writer, the historian Ian Wilson. His approach to the subject may be described as diametrically opposed to that of Farges and Summers and yet, like Thurston, he saw no reason to dismiss the spiritual value and depth of the experience of stigmatisation, only to re-focus the catholic understanding of it.

"There can be no easy overall assessment of the phenomenon of stigmata. The facile view would be to stress the diversity of wounds, indicating the unlikelihood that they are replications of the wounds of Christ, and the high incidence of the phenomenon among women of neurotic disposition, and dismiss it all as an imperfectly understood psychosomatic disorder. But this would fail to come to grips with the profound questions the fact of stigmata raises.

"Without denying the genuineness and intensity of the religious faith of many stigmatics, their wounds are not to be interpreted either as miraculous or as signs of divine favour. Their very diversity defeats the claim that they replicate the original injuries suffered by Jesus. And many stigmatics have been notable more for their neuroses than their sanctity.

"Nor should such an assessment offend anyone's religious faith ... A comparatively small proportion of stigmatics have been beatified or canonised. A saint - such as St

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<sup>21</sup> *ibid.*

Francis was very justifiably acclaimed - may be a stigmatic, but a stigmatic is by no means necessarily a saint."<sup>22</sup>

It would be misleading to suppose that catholic thinking on the subject has developed chronologically in line with the expansion of universal education, scepticism and materialism. As will be described below there are many within the Roman catholic church today who would align themselves with the blissful enthusiasm of Benedict Williamson. This can in particular be seen when the cases of Padre Pio and Christina Gallagher are explored. It is perhaps more accurate to describe the christian appreciation and explanation of stigmata as representing a concurrent spectrum of interpretations. Extending from the spectrum is another representing the medical and humanistic approach which, in its most extreme form states almost as a matter of faith, that stigmata can only be explained in terms of human fraud. A single example of that school of evangelical scepticism will suffice to illustrate the passion of its adherents. Dr Joe Nickell, of the University of Kentucky, in 1993 even took a sceptical approach when considering that most revered stigmatic, St Francis of Assisi.

"I feel that hoaxing - the proven explanation in numerous cases - provides the most credible overall solution to the mystery of stigmata. Since Thurston has found 'no satisfactory case of stigmatization since St Francis of Assisi' it is well to consider whether St Francis's own stigmata could have been faked....that knowledge of their miraculous nature 'is gained not directly and exclusively from a study of the records of his stigmata' but rather 'from a consideration of his pre-eminent sanctity and character'. But what was that character? According to John Coulson's 'The Saints': '[Francis] had only one aim, to love Christ and to imitate him and his life perfectly, even literally, and he followed this aim ever more completely from his conversion to his death. He was by nature impulsive and sensitive, with an immense capacity for self-sacrifice ... Above

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<sup>22</sup> Ian Wilson, *The Bleeding Mind* (London: Weidenfeld and Nicolson 1988) p 124.

all, he was a son of the church to the marrow of his bones; her sacraments, her teaching and her priesthood were all manifestations of Christ, and his simple faith ultimately became a mystical contemplation of the incarnate word, the crucified Jesus.'

"While this personality profile would seem inconsistent with a willingness to perpetrate deception for crass motives, it would appear entirely compatible with a desire to foster a pious hoax - one that would, to Francis's mind, promote the example of Christ to others."<sup>23</sup>

It is interesting to note that in his zeal, Nickell has totally misconstrued the writing of Thurston, quoted in the passage above. Thurston had in fact been addressing a different issue, namely the rarity of the stigmatisation of subjects of the male sex. This was before a full examination of the case of Padre Pio had been made and other male instances had emerged. Thurston in fact was saying that there had been no satisfactory example of male stigmatisation since the days of St Francis of Assisi.<sup>24</sup>

This exploration of the spectrum of bias serves more than a single purpose, namely that of being aware of that bias and thus better equipping the author to interpret and utilise the evidence of previous writers. It also begins to demonstrate how the predispositions of observers not only colour their interpretation of events but also their reactions to them: that is that observers not only describe to others what they have seen, but their behaviour in response to the stigmatic is shaped by their bias. This is a pertinent point reinforced by the examination of the six contemporary cases. From them it can be seen that, shaped by their existing frameworks of faith and cultural predispositions, witnesses and students (in the manner of the writers examined above) interpret the evidence presented by stigmata in any manner of ways. This enables a spectrum of

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<sup>23</sup>Joe Nickell, *Looking for a Miracle* (Buffalo New York: Prometheus Books 1993) p225, also quoting John Coulson, *The Saints* (New York: Hawthorn Books, 1958) p. 188 and Thurston p 122.

<sup>24</sup> At the time of his research undertaken in the 1930s and 1940s Thurston had insufficient evidence on which to decide if the case of Padre Pio appeared to him to be a satisfactory example.

response can be observed. The following hypothetical comparison of very different reactions illustrates the point.

Let it be supposed that an in-patient at a British psychiatric hospital presents herself with the wounds of Christ to an agnostic medical practitioner. The patient is labelled as having a mental health problem and prescribed treatment. The incident remains unreported outside the confines of the hospital and no public interest is taken in the matter. By contrast, a devout Roman Catholic woman, living in a village in Italy, appears one day carrying the wounds of Christ. She is fêted and becomes the centre of attention in the locality. A healing cult grows up around her.

The reactions to the two sets of wounds, in two different countries and cultures, would be totally different even though the visible evidence and means by which the wounds had been arrived at were identical. Furthermore, in the first case, the stigmatic's self-esteem would be lowered as the medical culture of the hospital gave to the marks no credence further than their being a symptom of a disorder. In the second case the individual's sense of purpose and self-worth would be considerably enhanced. In the first instance the observers viewed the episode as an example of religious mania which would tend to undermine the plausibility of the christian message. In the second instance the potential existed for the faith of the observers to be strengthened by what they believed to be tangible evidence of God's miraculous purpose.

It should be noted that this hypothetical illustration holds good for its purpose whatever the initial, but unproven, physical cause of the stigmatisation might have been.

To examine every case of stigmatisation from the point of view that it must either be genuine or fraudulent, has its limitations. The process will undoubtedly produce data to further the understanding of stigmata. However to present every theory as a dichotomy, as has been the tendency illustrated above, is unhelpful. To say, as

traditional Roman Catholic writers do, that wounds are either produced by God for his good purposes, or by human or diabolical agencies with the purpose to deceive, is to set up a limited choice. Religious sceptics similarly limit themselves by concentrating their interest on explaining to their satisfaction the mechanism whereby the marks emerged. The study of the six contemporary cases suggests that to limit options and areas of interest at the outset of study, in the belief that a single over-arching explanation for the phenomena exists, is to take an erroneous approach. As a further examination of the historical cases will show, little in the study of stigmata can ever be simply explained. As the later examination of the contemporary cases will illustrate, the explanatory options which are presented are the product of the dynamics of the debate between witnesses and observers and not solely to be found in the initial events, which themselves result from several factors.

It is not the purpose of this thesis to suggest that a divine or supernatural stigmatisation has never occurred. Discerning divine intent in such matters with any certainty would be difficult. In defining stigmata for the purposes of study it is not assumed that divine or supernatural stigmatisation is sufficiently prevalent to incorporate this elusive notion into a working definition of the phenomena.

While this approach is open to criticism it is not out of step with the pragmatic approach adopted by the Roman Catholic church when examining contemporary claims. Father Agnellus Andrew observed when asked why the church dealt with such stigmatics as Padre Pio so harshly, "in order to protect the faithful from fraud the church is prepared even to persecute its own saints."<sup>25</sup>

Even Danemarie, in her foreword to her enthusiastic endorsement of stigmata as being a gift of God's favour, was obliged to include a disclaimer in order for her work to

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<sup>25</sup> Agnellus Andrew, interviewed for the cassette *The Stigmata* produced and distributed by Christus Vincit Cassettes of Gillingham, Kent.

receive the imprimatur of the Vatican. She declared that she submitted herself "entirely to the decrees of Urban VIII and accordingly does not claim to attribute to all the extraordinary events and incidents reported in this book anything more than a purely human credibility."<sup>26</sup>

When Walshe commenced his 1938 review of the literature on stigmata, he observed that if it were demonstrated that all stigmata were of natural origin, it "may leave us with nothing to discuss"<sup>27</sup>. He had taken as his starting point a previous review of historical evidence by Dom Alois Mager OSB who had excluded in his definition of divine, or genuine, stigmata all wounds produced by mechanical means. "These could produce stigmata only by the application of external violence, and this would imply fraud."<sup>28</sup> Walshe himself made no assumption from the outset that there had ever been any genuine cases and concluded that the study of stigmatisation was the metier of the medical profession and that until the genuine character of the stigmata had been medically verified there was nothing for the theologians to discuss. A view with which Nickell and other sceptics would no doubt concur. Walshe maintained that a scientific study of stigmata required the stigmatic being removed from his or her normal environment and that standards of evidence and observation had to be of the highest scientific order.

This author argues that it is unsatisfactory to conclude that just because a case of stigmata has no supernatural origin there is therefore little value in studying it as a religious phenomenon. On the contrary, what gives potency to any individual case is not the origin of the marks, for that may not be possible to determine, but the fact that there are people who are prepared to ascribe supernatural or divine origins to the stigmatisation. Therein exists its potential for impacting on religious belief, action and

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<sup>26</sup> Danemarie, preface (unnumbered)

<sup>27</sup> Walshe p165.

<sup>28</sup> Alois Mager OSB *Etudes Carmelitaines* 1936 p 143.



behaviour. The weakness inherent in the view highlighted by Walshe may be expressed by posing a hypothetical question. Suppose it could be proven, beyond doubt, that no stigmatic in history had ever experienced a supernatural event and that all stigmata were the product of human intervention: would that, at a stroke, invalidate the phenomena and negate the previously observed effects on recipients and witnesses? The response must be no, for no redefinition of the phenomena can remove from indisputable record that stigmatics, from whatever cause, have existed and have been observed to bleed. People have witnessed the events and reacted to them. These responses and interpretations in themselves constitute a valid study. It is the nature and context of the reactions which place the phenomena within the discipline of theology or religious studies, as the physical manifestations, being specific in their form and shape, inevitably prompt religious interpretations. These interpretations may be hostile to, or supportive of faith, but whichever line they take, they focus on issues pertaining to the nature of God and his incarnation in Christ.

There is another weakness in Walshe's approach. Suppose God did stigmatise a recipient by supernatural means, but for whatever reason, the resulting wounds were not noticed or displayed and provoked no response. The wounds would be genuine, by Walshe's definition, but exist for no discernable wider purpose. They would go unrecorded and, arguably, it would be to the world as if they had never occurred. They would thus be less of a power for good than a set wounds knowingly produced to deceive which nevertheless created, within the community in which they had occurred, a process of spiritual renewal.

A further weakness in Walshe's approach will be examined later. In rare cases, under stringent scientific conditions, stigmata have been observed to reopen, without any external aggravation. This of itself is not evidence that wounds have been of supernatural origin. However a remarkable event thus observed could lead observers to conclude that something of a supernatural type had occurred when the event was no

more than an indication that wounds, which had previously existed, had reopened. Healed lesions of no religious significance have been observed to reopen under certain circumstances which will be examined later. The observation that old wounds can reopen in a seemingly spontaneous manner is no evidence that the original wounds on the stigmatic have been the product of supernatural intervention.

In this study evidence was sought to confirm the stigmatics' subjective accounts of the initial opening of the wounds. Only a reliable witness account of the opening of wounds without external manipulation was deemed to constitute a *prima facie* case of supernatural stigmatisation.

In the Introduction a description of the phenomena commonly recognised as stigmata was given. In this chapter a definition is offered. It is not the only definition available, simply the one employed for the purpose of this thesis.

Stigmata come in many forms. The marks carried by the six contemporary stigmatics, who are at the core of this study, differed in location, shape and history. Even greater variations have been noted from the descriptions available from previous centuries of the stigmatic wounds. It is suggested, however, that the phenomena which must be included in order for the total experience to be correctly defined as a case of visible stigmatisation, are wounds on, or markings of, the body of the recipient which the recipient or observers identify as being related to the passion of Christ. The marks may be superficial or profound, they may occur once, or be repeated on a cyclical basis, but to be stigmata they must relate in some symbolic manner to Christ's suffering and be visible and apparent to believers and non-believers alike.

That however is not sufficient for the marks to be defined as stigmata within the context of this study of the phenomena. The second criteria is that the marks must be capable of interpretation by an observer as being of supernatural or divine origin. Thus, a pious

instance of self-mutilation, presented openly as such to the world, falls outwith the definition. Excluded, for instance, would be the scourge marks of religious penitents or the nail wounds of those who volunteer to re-enact the passion in a vivid and physical form by being crucified themselves. Pious self-mutilation was a common practice in the 13th century around the time that stigmata as phenomena are said to have been first reported. What made St Francis distinctive, writes Constable<sup>29</sup> was that Francis was the first stigmatic to be popularly acclaimed as having received the wounds of crucifixion by supernatural intervention. Thus the historicity of the phenomenon of stigmatisation also tends to substantiate the definition being employed.

The words, "capable of interpretation", used above, must be further tested. That something is merely "capable of interpretation as of supernatural or divine origin" might imply that, as yet, no such interpretation regarding an individual case has been made. Furthermore, it could be argued that marks, which could only be irrationally or unreasonably interpreted as supernatural, should be excluded from the definition. Yet who is to determine what is meant by irrational or unreasonable? What if the stigmatic is the only one who claims that the marks are supernatural in origin? Does that mean his, or her, marks would lie outwith the definition if that individual was clearly behaving irrationally in making such claims? Or could it be argued that because one human being is capable of acting that irrationally then there must, somewhere in the world, exist someone else who is equally deranged and would, if given the opportunity, echo the claims? Other questions may be raised to test the definition. Would a case of stigmata fall within the definition if the only person making the claim that the marks were supernatural was the stigmatic and the stigmatic knew that that claim was false?

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<sup>29</sup> Giles Constable, *Three Studies in Medieval Religious and Social Thought* (Cambridge: Cambridge University Press 1995) pb 1998 p 215

To overcome these difficulties a codicil to the main definition needs to be added: that, for a case of stigmatisation to fall within the definition above, someone other than the recipient of the marks must have expressed their belief that the marks were of a supernatural nature. Taking the definition therefore as a whole it can safely be said that the six contemporary cases and all the main historic cases of visible stigmata which have been examined<sup>30</sup> meet the criteria employed in this thesis.

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<sup>30</sup> This does not imply that all the historic cases included in the statistics have been examined. Sufficient details are not available. However the observations and conclusions are valid for all those cases which it has been possible to examine in whatever detail.

### Chapter Three: historical review

Almost two millennia after the passage was originally written, the dispute as to the exact meaning of the ambiguous reference to stigmatisation of his own person made by St Paul<sup>1</sup> cannot now be resolved. Whatever the facts may have been which prompted St Paul's words, including the possibility that he carried on his body the marks of crucifixion, for almost 1200 years after he composed his Epistle to the Galatians, stigmatisation as a physical phenomenon appears to have been unreported<sup>2</sup>.

As Constable notes, until at least the twelfth century the term *stigmata* was used "in a general sense, rather than with specific reference to Christ's wounds, and an allegorical interpretation was given to Christ's suffering."<sup>3</sup>

It is St Francis of Assisi who is popularly acknowledged as having been, in 1224, the first person to be stigmatised with the wounds of Christ's suffering in what was claimed to be a supernatural manner. He was not however the first person to display the wounds of crucifixion as Merkt<sup>4</sup> and Constable<sup>5</sup> suggested. Nor was he the first person to receive bodily marks to which a religious significance was attached and to which a supernatural cause was attributed. In 1097, for instance, the bodies of several crusaders who were shipwrecked were reported to be covered with crosses, *sacrum stigmata*, as proof of their faith.<sup>6</sup>

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<sup>1</sup> See Appendix.

<sup>2</sup> While no new case was reported, arguments have been put forward that an illustration in the Book of Kells, written during that period, shows one of the four Evangelists carrying the wounds of Jesus. Also claims have been made that the seventh century martyr St Theodard bore the marks of Christ as had the 4th century St Macarius of Egypt.

<sup>3</sup> Constable p199.

<sup>4</sup> Dr J Merkt of Tübingen University who published a monograph, *Die Wundmale des Franziskus von Assisi*, suggesting other possible 13th century claims of stigmatisation. (Leipzig 1910)

<sup>5</sup> Constable p. 200.

<sup>6</sup> *ibid.*

Constable's view is that St Francis was not an isolated example of an otherwise unknown and unprecedented phenomenon, but the best authenticated and most influential case of a physical condition which had a long background in the religious history of the eleventh and twelfth centuries. "The stigmata of Francis were exceptional because from the moment of their discovery they were believed to be of supernatural origin and to show the perfection of his imitation of Christ and his apocalyptic role as a second Christ."<sup>7</sup>

Since the thirteenth century, following the wide dissemination of accounts of St Francis' stigmatisation, the phenomenon has been repeated regularly, although not frequently. For all practical purposes therefore a review of the history of stigmatisation begins in the first half of the 13th century.

While the first claims of miraculous stigmatisation are generally associated with St Francis, it is of interest to mention examples of the several concurrent and earlier reports of stigmatisation to which preternatural involvement was not attributed. Two years before St Francis was said to have been Divinely rewarded with the wounds of Christ, and quite distinct from the upheavals of the Italian Franciscan renewal, in England in 1222 Matthew Paris<sup>8</sup> recorded that a man and his accomplice were punished by a church court in Oxford after claiming that the man carried on his body the five wounds of crucifixion. A corroborative account strongly suggests that the marks were self-inflicted. "There was presented ... a layman, whose madness was such that he passed himself to be crucified, to the dishonour of the crucified one, declaring that he was the son of God and the redeemer of the world. He was incarcerated ... for the rest of his life and fed only on hard bread and water. He ended his days in confinement."<sup>9</sup>

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<sup>7</sup> Constable p 217.

<sup>8</sup> Matthew Paris, *Chronica Majora*, edited Luard (Rolls Series) p 71, quoted by Thurston p34.

<sup>9</sup> T Wykes, *Annales de Oseneia*, edited by Luard (Rolls Series) p 63, quoted by Thurston p 63.

In the same account Matthew Paris records that the accomplice was a "person of double sex, an Hermaphrodite", an observation of some possible relevance to the broader understanding of the subject in that one of the current Italian cases involves a male transexual<sup>10</sup>.

A second contemporary example involves Stephen of Obazine who carried the wounds of Christ after being privately and publicly scourged.<sup>11</sup>

The existence of such episodes of pious suffering to the point of visual injury is illustrative of the emphasis on the sufferings of the incarnate Christ which was emerging in popular devotion at that time. It was a new pious awareness and concentration on the passion of Christ which was not simply confined to the radical Franciscans, but was evident as a general movement growing in strength through that period. What lay behind this new direction is open to speculation, but its origins can be traced back, in part, to the break with the Eastern Tradition two centuries earlier, and also to the contemporary reactions by devout lay people against excesses and corruption in the church<sup>12</sup> which also resulted in the emergence of several heretical movements against which the church retaliated with force. The retaliation against the Albigensians in 1208 is described by Hollister as a "ruthless, savage affair".<sup>13</sup> Mendicants and wandering preachers of many kinds travelled throughout Europe and found an eager audience amongst ordinary people who felt alienated from the church which, as will be explored later, appeared to form a barrier between them and God.

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<sup>10</sup> Michele Improta. An Italian male examined by Dr Marco Margnelli of Milan who made claims of stigmatisation and prophecy in the early 1990s.

<sup>11</sup> Constable p215.

<sup>12</sup> Marshall W Baldwin, *Christianity through the Thirteenth Century* (London: MacMillan 1970) wrote of mounting discontent and criticism of ecclesiastical institutions pp280-81.

<sup>13</sup> C Warren Hollister, *Medieval Europe* (New York: John Wiley and Sons 1964) pb p 221.

The contemplation of the sufferings of Christ took various forms ranging from a renewed interest in devotion to the body of Christ in the eucharistic east<sup>14</sup> to extreme cases of chastisement, the infliction of pain and mortification of the flesh in imitation of Christ's suffering<sup>15</sup>.

The practice of self-flagellation appears to have been unknown in European christendom until the second millennium. It was initially a mode of physical self-punishment adopted sparingly by hermits in isolation, but by the 13th century had become a public and regular spectacle. It was largely confined to Latin christendom and its purpose was to remind the flagellants of the pain of the suffering Christ which, according to christian theology, He had suffered willingly to redeem the sins of all humankind. Flagellants, at the height of this religious fashion, especially in Italy around 1260, would gather in city centres to process and to be watched as they furiously beat themselves. As Cohn<sup>16</sup> pointed out, self-flagellation appears to have been first adopted in Europe by the hermits in the monastic communities of Canadoli and Fonte Avellana early in the 11th century. Once invented, the new form of penance spread rapidly until it had become not only a normal feature of monastic life throughout Latin Christendom but the commonest of all penitential techniques, and one also adopted by the laity. In its extreme form, the practice involved scourging with sharp spikes until the flesh was torn and bled so that the flagellant could be reminded, subjectively, of the pain of Christ's passion and objectively, by his own bleeding body, of the image of the suffering body of Christ. Organised public processions of itinerant flagellants began to appear on the streets of Italian towns and cities from 1260. The practice of public exhibition spread from Perugia southwards to Rome and northwards

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<sup>14</sup> As evidenced by the confirmation as a feast day (Corpus Christi) of the devotion to the incarnate Christ in the Eucharist by Popes Urban IV and Clement V in 1264 and 1311 following the vision of St Juliana in 1246.

<sup>15</sup> An example being that of the French nobleman Robert Carr Marquis of Montferrard, who, for many years before his death in 1234, amongst other self-imposed penances, pierced his flesh every Friday with nails.

<sup>16</sup> Norman Cohn, *The Pursuit of the Millenium (Revolutionary millenarians and mystical anarchists of the middle ages)* (London: Temple Smith 1970) p127.



to the Lombard cities. Crowds of men including priests carrying candles and banners, stood in front of churches and flayed themselves and each other, for hours on end. As Cohn emphasised, the circumstances under which the first outbreak of mass flagellation occurred were significant. 1260 was said to be the apocalyptic year when the third age was due to reach its fulfilment. Amidst famine, plague and war, multitudes of Italians were impatiently waiting the dawn of the age of the Holy Spirit, the age when all men would live in peace. When the age did not dawn, and Christ did not return to Earth, the mass flagellation movements in Italy soon faded in a mood of disillusionment.

However, two years later a revitalised movement appeared in the towns of south Germany and the Rhineland. Cohn pointed out that some of the flagellation rituals were very specific, and if by chance a woman or a priest entered the circle, the entire ceremony of flagellation became invalid and had to be repeated from the beginning. The flagellants were well received by the mass of the population who willingly contributed, from what little they had, towards the flagellants' basic needs. This mass-appeal may be understood not only in terms of the prevalent anti-clericalism of the age attributable to the worldliness of the church, but also in terms of the exclusivity of the hierarchical nature of the church. Those who supported the flagellants through envy of, or disgust with, the church's worldliness, were the same people who were also demanding from the priests of the church a greater access to the incarnate Christ of the eucharist. In that there were flagellants who claimed to eat and drink with Christ and converse with the Virgin, it is not surprising that many of the wandering self-mutilators were greatly revered and that people dipped clothes in their flowing blood and treasured them as sacred relics.

The message conveyed to and understood by the people from the preachings of the flagellants was both pious and political in content. It contained elements of anti-semitism and extolled the redistribution of wealth, by force if necessary. Rome, in response, accused the movement of robbing and killing laymen as well as clerics and Jews. The warnings and exhortations of the church however, when the movement was

at its height, made little impression on the popular mind. At that time the church had lost the trust of many laymen and women who could "not easily find amongst the clergy what they so desperately needed, religious virtuosos whose asceticism seemed to guarantee their miracle working power. The flagellants on the other hand seemed... not only absolved from all sin... but were empowered to drive out devils, to heal the sick, even to raise the dead." <sup>17</sup>

A flagellant injuring his own body in imitation of the suffering Christ was thus a familiar practice in the thirteenth century. When St Francis introduced a new dimension to the phenomena, in the claim that his marks were not self-inflicted but Divinely and supernaturally placed, it was only two years before his death when his reputation was well-established. His stigmata were the ultimate confirmation to many Christians of his special mission to reform the church and of the personal sanctity which made him worthy of that mission.

This claim of divine intervention can be traced to the religious leader's hagiographers. Francis' stigmatisation was described, shortly after the death of the saint, by the Franciscan Brother Elias, "I announce to you a new miracle. From the beginning of ages there has not been heard so great a wonder, save only in the son of God, who is Christ our God. For, a long while before his death, our Father and Brother appeared crucified, bearing in his body the five wounds which are verily the stigmata of the Christ; for his hands and feet had as it were piercings made by nails fixed in from above and below, which laid open the scars and had the black appearance of nails; while his side appeared to have been lanced, and blood often trickled there from."<sup>18</sup>

Another contemporary account was written by Francis' companion Brother Leo. "The blessed Francis, two years before his death, kept a Lent in the hermitage of the Alverna

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<sup>17</sup> Cohn p 135.

<sup>18</sup> Thurston p 44 quoting a letter sent to the Provincial of the order in France immediately after the death of St Francis as translated by Reginald Balfour *Seraphic Keepsake* (monograph) p 38.

in honour of the Blessed Virgin Mary, mother of God, and Blessed Michael the Archangel, from the Feast of the Assumption of St Mary the Virgin to the Feast of St Michael in September. And the hand of the Lord was laid upon him. After the vision and speech he had of a seraph, and the impression in his body of the Stigmata of Christ, he made these praises ... giving thanks to God for the favour that had been conferred on him."<sup>19</sup>

Significantly, neither writer claimed to have been an eye-witness of the moment of stigmatisation and subsequent paintings of the event have inevitably been idealised recreations, based on the legends and not on direct third-party evidence. Indeed, since his death it has been disputed whether St Francis received his marks in the way it has been popularly supposed. It has been suggested by Merkt that the marks did not date back to the vision of the seraph but appeared only a few weeks before his death. "The wounds were little more than discolourations or abrasions of the skin which could easily have been produced and probably were produced, by purely pathological conditions, given a subject whose thoughts were almost uninterruptedly concentrated upon the marks of our Saviour's passion."<sup>20</sup>

Merkt did not dispute that at his death St Francis did display the marks: it was the timing, nature and circumstances of their arrival which he questioned. The supporters of St Francis would have been well aware of the practice of the pious self-infliction of pain in empathy with the passion.<sup>21</sup> It can be argued that they stressed that Francis was miraculously marked in order to strengthen their case that the embryo Franciscan movement was authorised by God since, at the time, the church was still uneasy about the new religious movement's radicalism and zeal. It is unclear whether St Francis made the claim himself of divine stigmatisation, although if the account of the vision of

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<sup>19</sup> Thurston p 45, quoting Balfour p 67.

<sup>20</sup> Thurston p 32-33 quoting Merkt.

<sup>21</sup> A practice which continues to this day. On display in the preserved cell of Padre Pio the 20th century Italian Capuchin stigmatic, is the scourge which he was obliged to use as a penance of his order.

the seraph originated from him, it can be inferred that, at the least, he did not discourage his followers from making the claim on his behalf.

Initially some of the Franciscans were sceptical about the claims of supernatural intervention. John of Parma, around 25 years after the events, challenged a companion of the saint, Bonizo of Bolgna, to tell the truth about the stigmatisation, "because many people throughout the world were in doubt about this".<sup>22</sup>

Once the legend of St Francis had become firmly established it proved unwise to challenge its historical roots. In 1361 a Sylvestrine monk was condemned by a Fransiscan inquisitor for claiming that St Francis' stigmatisation had been fraudulent.<sup>23</sup>

Whatever the origins of the claim, it would not, in the climate of the age, have occurred to St Francis' immediate followers to suggest that others similarly marked, who made no claims to supernatural intervention, were frauds in comparison. They would have been well-acquainted with the practice of the deliberate self-infliction of pious empathetic pain, and some would have practiced it themselves. In similar circumstances, to make a modern comparison, the wounds carried by the Philippino penitents following their crucifixions are not condemned as fraudulent. In the last week in Lent in Santa Lucia in The Philippines, young men volunteer to re-enact Christ's passion by being nailed to crosses. These acts are regarded by the local community to be both evidence of courage and piety.<sup>24</sup>

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<sup>22</sup> Constable p219 quoting Thomas of Eccleston from *De adventura fratrum minorum in Angliam*, 13, ed Andrew G Little (Paris: Collection of studies and documents on religious history and literature in the Middle Ages 1909) p93.

<sup>23</sup> Constable p 219.

<sup>24</sup> In 1996 a Japanese actor, who, it transpired later, had no Christian beliefs, tricked his way into being allowed a part in the ritual crucifixion and his suffering was video-taped for inclusion in a film on sado-masochism. In that context, exceptionally, his marks might be adjudged fraudulent.

Shortly after the death of St Francis, a second, less famous case of stigmata occurred at Hascha in Friesland. The basic facts of the case were reported without any attempt being made to make a distinction in spiritual value between self-inflicted or divinely-gifted wounds. In 1231 a Praemonstratensian monk, Brother Dodo, was killed when the wall of an old ruin fell upon him. For the five years before he had led a solitary life and when his body was removed from the rubble it was discovered that there were open wounds in his hands and feet and in his right side corresponding to the five wounds of crucifixion. That he had been carrying such marks in his lifetime had been unknown, and thus it is not possible, argues Thurston<sup>25</sup>, to say if Brother Dodo's marks were stigmata, similar to those of St Francis or the result of wounds which were self-inflicted by the hermit as part of his devotions to the passion.

It can be argued that in the climate of the 13th century, such was the fine line between life and death, the natural and the supernatural, it was acceptable for God and the stigmatic to be seen as the joint authors of the wounds. The example of Lukardis of Oberweimar illustrates the medieval approach. She was born around 1276 and died at the age of 33. An anonymous biographer recorded her mystical life which was made up of ecstatic experiences and stigmatisation from an early age. Yet she was also known to have involved herself in practices of self-mutilation and her biographer described how, as she recalled in her mind the hammering of nails into Christ's hands, she repeated the action physically. "For again and again with her middle finger she would strike violently the place of the wounds in each palm; and then at once drawing back her hand a couple of feet she delivered another fierce blow in the same spot, the tip of her finger seeming somehow to be pointed like a nail.... Furthermore, it should be noted that the Servant of God, before the stigmata appeared, endeavoured out of her great longing, to open the places of the wounds in her feet by boring them, as it were, with her big toe."<sup>26</sup> Lukardis' biographer was not in any way intending to suggest that she was not

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<sup>25</sup> Thurston p 39.

<sup>26</sup> Thurston p 42, quoting *Analecta Bollandia* Vol XVIII p 315-316.

the recipient of genuine wounds. Having described her strange practices, which had been going on for two years before the stigmata showed, he then describes the mystic's nocturnal vision during which the stigmata were impressed upon her. "A beautiful and delicate youth appeared to her and pressed his right hand against her right hand saying, 'I wish thee to suffer along with me'. To this she gave consent and immediately a wound was formed on her right hand."<sup>27</sup> Her biographer then relates how the wounds bled on a regular and predictable basis, in her case every Friday. This pattern of bleeding has been observed since with many other stigmatics.

Several early stigmatics, contemporaneous with St Francis, were renowned for their piety and good works, and yet at the same time the possibility of self-immolation was addressed by their contemporaries. Constable says of Dauphin Robert of Auvergne who died in 1234 that he bore on his body "the stigmata of the Lord Jesus... he transfixes his flesh every Friday with certain nails up to the point where blood flowed".<sup>28</sup>

McDonnell paraphrased the reports of Mary of Oignies, who marginally predated St Francis, saying that after intensive contemplation of the passion, "according to her biographers she had made wounds on her body representing those of Christ".<sup>29</sup> This occurred during a vision in which she reported seeing a seraph by her side.

At the time of St Francis the need to categorise and authenticate stigmata as fraudulent or divine was not the significant point at issue. The notion of imitating Christ in his passion, a christian form of the wider religious practice of *Imitatio Dei*, was acceptable and required no separate supernatural permission or initiation. However, the associations of the supernatural with stigmata, which began with St Francis, became

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<sup>27</sup> *ibid.*

<sup>28</sup> Constable pp 216-217.

<sup>29</sup> Ernest McDonnell, *The Beguines and Beghards* (London: Octagon Books 1969) p 318.

increasingly more established as other physical manifestations of the mystical became associated with stigmatisation.

From an examination of the historical accounts, it is possible to discern patterns of behaviour becoming established, especially relating to reports of associated mystical phenomena and reputations of great sanctity. Indeed over 60 stigmatics have been canonised or beatified, although it should be emphasised that for this recognition of unusual holiness to be authorised, the Roman Catholic church does not regard stigmatisation as evidence of sanctity. Other criteria, especially those relating to attributed miracles after death, are employed by the Vatican investigators.

For comparisons to be made between past stigmatics and those of the present day, in particular the six contemporary cases selected for examination here, and to illustrate the types of legends which have become linked with stigmatics, the recurring patterns of behaviour associated with stigmatisation need to be identified, in particular those associated with claims of mystical phenomena.

One commonly recurring feature is illustrated by the life of St Christina of Stommeln who, in 1268, received wounds in her hands, feet, on her forehead and in her side. Stories circulated that St Christina was harassed by terrifying demonic experiences. She was seen to be hurled against a wall by an unseen power and, according to one report to be "spattered and polluted with deluges of indescribable filth"<sup>30</sup>. Several twentieth century stigmatics have described diabolic encounters, including George Hamilton, Jane Hunt and Christina Gallagher.

St Christina of Stommeln also experienced religious raptures and divine ecstasies and on Whit Sunday 1268, after making her communion, she is said to have remained

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<sup>30</sup> Summers p 69, quoting *Acta Sanctorum* June Vol IV ( Antwerp 1707).

motionless for many hours, apparently in a religious trance. The author witnessed Christina Gallagher, one of the contemporary stigmatics, in a similar motionless religious trance lasting approximately half an hour in the course of a recitation of the rosary at the chapel at the House of Prayer on Achill Island.

One feature of the experience of the contemporary stigmatic, George Hamilton, is foreshadowed by the reported inedia of several stigmatics. The Blessed Angela of Foligno<sup>31</sup> near Assisi, was the first of many stigmatics, who was able, it was claimed, to live for long periods of time without food. Her abstinence lasted twelve years. George Hamilton, as will be described later, has lived for many years without taking any solid food.

St Catherine of Siena<sup>32</sup> was one of a number of stigmatics who, like Lukardis, died at the significant age of 33 years, the age at which it is believed Christ died on the cross. She first reported feeling the pain of Christ's suffering in her own body at the age of 26 and two years later received five visible wounds. She also exhibited the symptom of being unable, or unwilling, to eat. She went, it is said, for eight years without taking any food or liquid other than the Blessed Sacrament<sup>33</sup>.

There were also reports of St Catherine levitating. She is also said to have experienced another phenomenon closely allied in historical accounts to stigmatisation in which it is said her soul entered a form of mystic espousal with Christ. She is said, in 1367, to have had a vision in which she saw Jesus and Mary, St John the Evangelist, St Paul and St Dominic, the founder of her order. During the vision Mary took Catherine's right hand and held it out to her son who placed a ring of gold and diamonds on Catherine's finger with the words, "receive this ring as a pledge and testimony that you

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<sup>31</sup> 1250-1309.

<sup>32</sup> 1347-1380.

<sup>33</sup> Rudolph Bell, *Holy Anorexics* (Chicago: University of Chicago 1985).



are mine and will be mine for ever".<sup>34</sup> Six hundred years later Ethel Chapman described a close physical passion for Christ which had many of the characteristics of mystical espousal. She also described a sensation of levitation.

The Blessed Angela of Foligno was a widow who divested herself of all her worldly possessions and took a vow of poverty to join the Third Order of St Francis. A particular vision associated with her is one in which she felt herself being given the Christ child to hold. A similar visionary experience was reported by the contemporary stigmatic Jane Hunt.

The life of St Veronica Giuliani<sup>35</sup> is particularly well-documented in the words of her own journal supplemented by evidence taken in her cause of canonisation. At the age of 37, on April 5th 1697, she received the stigmata in hands, side and feet in the course of a long period of religious ecstasy. It was said of her that during her ecstasies she emitted a perfume, a phenomenon known in christian tradition as the odour of sanctity. Claims too were made that she levitated. While cases of levitation are very rare, reports of a sweet perfumed smell associated with mystics and stigmatics are common. Indeed the odour of sanctity pre-dates the stigmata by one thousand years. In AD 155 the Christians of Smyrna described the attempted execution by burning of Saint Polycarp. Initially, the fires failed to harm him and witnesses later described how they watched Polycarp surrounded by flames and how they perceived "such a fragrant smell, as if it were the wafted odour of frankincense or some other precious spice"<sup>36</sup>. Eventually the martyr was despatched by an executioner with a dagger.

As early as the second century the idea that high virtue was in some cases miraculously associated with fragrance of body was a familiar one throughout the christian world.

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<sup>34</sup> Thurston p130.

<sup>35</sup> c1640 -1727 Saint Veronica wrote an account of her life as an act of obedience to her Bishop.

<sup>36</sup> Thurston p 222. Thurston's footnote however suggests that it had been a practice at the time for sweet smelling perfumes and spices to be placed on a martyr's pyre.

Indeed several other mystical phenomena, that is other than the stigmata, but now associated with stigmatisation, were known to Christians from the early days to medieval times. Transfiguration is one example of this. Nevertheless the stigmatized mystics have most commonly become associated with detection of the odour of sanctity and the association has persisted to this century, most notably in the case of Padre Pio. All the popular biographies mention the claim that that his spiritual presence could be detected by a smell resembling that of scented roses. "He sent perfumes of consolation and encouragement on many occasions."<sup>37</sup>

The odour takes many forms and one modern account suggests that while it can be associated both with people and places, and detected simultaneously by more than one individual, detecting the odour is nonetheless a subjective experience. "People who have lost their sense of smell can smell it. Sometimes two people can smell it and a third cannot. Sometimes many people share it; and often... only one person smells it and the others notice nothing".<sup>38</sup>

Whilst, in the past, knowledge of many instances of stigmatisation has been confined to villages, regions and religious communities, in modern times, the reputations of certain stigmatics have travelled internationally. Padre Pio was an example of this, as were Anne (or Anna) Catherine Emmerich, an Augustinian nun from near Coesfeld in Westphalia who received the wounds in 1812, Maria-Domenica Lazzari who was stigmatised in 1834, and Therese Neumann who was born in 1898 in Konnersreuth, Bavaria. She is said to have had a vision of Christ at the Mount of Olives and to have carried the wounds for over 35 years until her death in 1962.<sup>39</sup> Of the numerous visitors to Lazzari Summers wrote: "there were serious and reverent pilgrims;

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<sup>37</sup> Cecil Humphery-Smith, who knew Padre Pio personally wrote a monograph *A Saint on My Back* (published privately in UK 1983).

<sup>38</sup> E Case, *Odour of Sanctity*, monograph (privately published in UK 1984).

<sup>39</sup> Anni Speigl, *The Life and Death of Therese Neumann of Konnersreuth* (Eichstatt, 1973) Johannes Steiner, *Therese Neumann, a portrait* (New York: Alba House 1967).

dignitaries of the church, patricians and the optimacy of many lands, all palmers devout."<sup>40</sup>

Inevitably there must be some cases of stigmata which have occurred which have not been reported widely, or indeed not reported at all, although it seems hard to imagine how a conspicuous set of marks can be kept secret by a recipient, especially if they survive on the body for any length of time and are present at death. Nevertheless it is possible. At least two cases which have come to the attention of the author have received no publicity and were not available for further examination, although it is possible that the wounds may become public knowledge at some future date.<sup>41</sup>

Three sources have been drawn upon to determine how many cases of stigmata there have been since the phenomena first appeared in the 13th century: firstly, the list published one hundred years ago by Imbert-Gourbeyre; secondly, the list made available to the author by Margnelli<sup>42</sup> which contains 20th century cases and certain earlier ones omitted by Imbert-Gourbeyre; thirdly, the researches of the author which have revealed an additional 13 cases including those which have been the subject of his detailed examination. Neither Imbert-Gourbeyre nor Margnelli attempted to reduce their lists of *prima facie* cases of stigmata by adopting criteria of authenticity and testing cases against the criteria, except insofar as there was evidence that the wounds had been openly self-inflicted as an act of piety.<sup>43</sup>

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<sup>40</sup> Summers p 165.

<sup>41</sup>The two cases are: i) a young unnamed Roman Catholic layman in England whose claimed stigmatisation was reported to the author by a relative, but who, when approached through a third party, declined to cooperate in any study; ii) an unnamed Roman Catholic priest from the United States who reported an invisible stigmatisation when taking Mass at a time when he was calling his vocation into question. Information which could be vouchsafed by his confessor, without breaking the confidentiality of the confessional, was shared on a non-attributable basis with the author.

<sup>42</sup> Dr Marco Margnelli, physician and psychotherapist in private practice, Milan.

<sup>43</sup> Margnelli did not include in his list the wounds of any of the people who had sought to have themselves crucified as an act of Good Friday devotion.

Imbert-Gourbeyre's list has its imperfections. He published his work in two volumes with the later volume updating and extending information and frequently correcting errors of the first. His enthusiastic support of one stigmatic was substantially curtailed in the second volume following church investigations into her activities.<sup>44</sup> He also included instances of invisible stigmatisation, where the subject claimed to feel the pain, but bore no marks and following first-hand examination of the original volumes the author concurs with Thurston's caution when Thurston concluded that the evidence of the French Professor of Medicine was often "unsatisfactory, even where all five wounds are said to have been visible"<sup>45</sup>.

However, in this area of study it is not always possible to provide irrefutable evidence. Margnelli's cases include some where unsubstantiated references have been taken on trust. This author too was only able to take first-hand evidence in eight of the thirteen instances he has added to the list, taking the remaining five on trust either from credible, although not verified, verbal accounts or from normally reliable publications. Included in the final enumeration of cases are some where many observers have implied dubious motives on the part of the stigmatic. Nevertheless if the wounds have been claimed, either in the visible or invisible form, and attached to these claims have been further claims of supernatural or divine involvement, then the cases have been included in the final list.

There must always be reservations in compiling such a list, but it would be misleading to suppose that the reservations invalidate the entire exercise, for the majority of cases cited can be validated as occurrences and, in most cases, sufficient details exist about the identity of the stigmatic and the nature of the basic experience for useful trends to be

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<sup>44</sup> A Imbert-Gourbeyre, *La Stigmatisation* vol 1 (Clermont: Belet 1873) *La Stigmatisation* vol 11 (Clermont: Belet 1894). Palma Matarelli's claims were described as "extraordinary manifestations" by Imbert-Gourbeyre in his 1873 edition. However by the second volume of the work in 1894, following investigations instigated by Pope Pius IX Palma Matarelli was reported upon very guardedly.

<sup>45</sup> Thurston p 49.

observed. The best estimate, therefore, as to the total number of stigmatics who have lived in the 800 years until 1996, is 406. Of these 352 were women and 54 were men, a ratio of 6.5:1. However, it should be noted that of the 44 stigmatics who have been alive over the last 50 years, women number 31 and men number 13, a change in ratio to 2.4:1. Furthermore, examining the ratio of women to men over the 1979-1996 period covered by this study of contemporary stigmatics, the figures converge further: of the 30 stigmatics who were identified as being active during that period, the ratio is 18 women to 12 men, or 1.5:1.

Historically, the overwhelming majority of stigmatics have been Roman Catholics. Of the total number, 276 have been members of religious orders as defined by Biot, "if we take as the deciding factor residence in a convent or the wearing of the habit."<sup>46</sup> That represents 68% of the total. Examining the 44 cases of the last 50 years however, that figure has fallen to a just over 25%. By comparison, in the 18th century, the figure was 93%. In this context it must be remembered that the number of people called to a religious life, as a percentage of the population of the Christian world, has fallen considerably this century. The religious orders which have in the past been particularly well represented are the Dominicans and the Franciscans.

Geographically, one country, Italy, dominates the roll-call of stigmatics: 261 instances have been reported from within the country's current boundaries, although many of these stigmatics in their time would not have identified themselves as Italians, but would have identified themselves by their regional appellation. Seventy-seven cases have been reported from France, 48 from Spain, 45 from Germany, 17 from Belgium, 14 from Portugal, 12 from the United Kingdom. Brazil, Australia, USA, Canada, Holland, Peru and Japan, Korea, Ireland, Switzerland and Argentina are amongst the other countries from where stigmata have been reported.

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<sup>46</sup> Biot p 20.

In recent years, since cases have been reported from a wider geographical base, members of churches other than the Roman Catholic church, have reported stigmatisation. The Anglican communion has had 3 cases<sup>47</sup> as have three different Protestant Evangelical congregations. The only instance of stigmatisation within the Orthodox tradition appears to be that of Heather Woods who worshipped as a member of the Holy Celtic church which can be described as being partly within that tradition.<sup>48</sup>

Historically the phenomenon of stigmatisation has averaged around 50 new cases every century since its first appearance. This century, the figure is higher with 67 new cases, but undoubtedly the 16th and 17th centuries produced the most examples per head of population. In excess of 115 new stigmatics emerged in the hundred years from 1600 to 1700. One characteristic of this historic peak relates to the geography of the reports. From the 13th century to the end of the 15th only one stigmatic is reported from Spain and one from Portugal. Similarly from 1700 to the present day, Spain has produced four stigmatics and Portugal two. However, in the 200 years from 1500 to 1700, there were 54 reports of stigmatisation on the Iberian peninsula, 43 in Spain and 11 in Portugal. Characteristic clusters of reports can be further observed by examining the Italian distribution of stigmatics. There were no reports of stigmata occurring in Sicily in the 13th, 14th, 15th, 18th or 19th centuries. Yet there were 10 instances in a 100 year period from the mid-16th century. Similarly around Naples, there were no case of stigmatisation for four centuries, but nine emerged in the 17th century. The clusters are so clearly evident that any suggestion that they might simply be random groupings of isolated individuals is statistically improbable. Social factors, or some form of group

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<sup>47</sup> Four, if the claims of the 19th cult leader John Tom, also known as Sir William Courtenay, are included. He was baptised a member of the Church of England as an infant in Cornwall in 1799.

<sup>48</sup> It is said of the 4th century St Macarius of Egypt that he was, in a vision, crucified by a Cherub. He is a rare, and possibly unique case of a saint from an eastern Christian tradition being a stigmatic. The evidence is not conclusive and even if the Coptic source quoted by Timothy Ware (Bishop Kallistos of Diokleia), *The Orthodox Church* (London: Penguin 1991) pb p234 is inconclusive, to identify St Macarius as Orthodox, as opposed to Catholic, prior to the schism, is misleading.

dynamic, would appear to be involved. From the 13th century, the Franciscan friars travelled extensively around Europe and, while preaching the Gospel, also recounted the legends associated with the founder of their order. The stigmatisation of St Francis became widely known within a century of his death, therefore the clusters of stigmatics observed over the subsequent centuries are unlikely to be the result simply of news of the phenomenon of stigmatisation reaching the communities where the clusters subsequently occurred.

While stigmata have been experienced by individuals in isolation, some of whom were pursuing a solitary vocation, generally they have appeared to occur where and when whole communities seem to have been caught up in a collective piety. Between 1812 and 1816 in the Tyrol, three children, who were each later to display the stigmata, were born only a short distance from each other. They lived through a time when the Tyrolean people were undergoing a period of religious revival. Of the three, the best known was Maria de Moerl, a Franciscan tertiary who in the late autumn of 1833, received the five bleeding wounds. She was counselled to keep her experience a secret and she did so until the day of the Corpus Christi procession through the streets of Kaldern in 1834. Montague Summers described events in this way.

"It so happened that from the windows of the Moerl house, and from Maria's bedroom, an excellent view could be obtained of the procession with its groups of winged angels and tableaux of saints and seraphim. It was high holiday throughout the district. Friends and neighbours crowded the house of the Moerl family. Maria's room, as she lay in bed, was full of young girls, laughing, talking, jostling for a place. As the Blessed Sacrament beneath its canopy, in fumes of frankincense, surrounded by myriad tapers, passed the window, one of the company in the room glanced round saying 'Poor Maria! She can't see the ....'. The sentence was broken by a cry. Maria had fallen into ecstasy. She was levitated from the bed, and transfigured with an angelic beauty, radiant as a celestial spirit, her arms extended, her feet not touching the bed,

and the stigmata shining with a clear crystal light. All witnessed the phenomenon, which could no longer be kept concealed. The countryside rang with the story. Groups of pilgrims began to pour into Kaldern. From near and far they came in orderly procession, often led by the parish priest, It was estimated that between the end of July and the 15th September more than forty thousand persons, rich and poor, peer and peasant, had palmered it to Kaldern."<sup>49</sup>

The second case of stigmata in the district emerged almost simultaneously at Capriana. It involved a miller's daughter, Domenica Lazzari. Her mystical experiences started shortly before Maria de Moerl's experiences became public knowledge. Domenica Lazzari's wounds were said to have bled every Friday from the time of the first appearance in 1834 through to her death in 1848, at the age of 33. Several witnesses described the wounds as going right through the palms of her hands. In addition to the five wounds she received the marks of the crown of thorns. Like many of the stigmatics before, she was said to have lived without food, only taking Holy Communion. She also appeared to be hyper-sensitive to light, touch and heat.

In the case of Domenica Lazzari a further occasional characteristic of the wounds was reported, the flow of the blood from her wounds was said to run counter to gravity. "Instead of taking its natural course, the blood flowed upwards over the toes, as it would do were she suspended on the cross."<sup>50</sup> Domenica was also reported to have spent long periods raining blows upon herself with such vigour that her gums were badly cut and her mouth was filled with blood.

The third stigmatic of that period and living in the same region, was born shortly after Domenica. Less has been written about her case, but Crescentia Nierklutsch<sup>51</sup> came

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<sup>49</sup> Summers p 167.

<sup>50</sup> W T Allies, *Journal in France 1845 and 1846 with letters from Italy in 1847*, (Brussels: J B De Mortier 1850) pp 134-135.

<sup>51</sup> 1816-55.



from the background as the other two Tyrolean stigmatics and would have been equally caught up in the religious atmosphere of the time. Her stigmata emerged towards the end of her life in 1855.

It is possible to construct explanations to account for clusters of cases. These explanations might relate to a folk-faith, reaction to famine or plague, to a popular devotional revolt against church laxity, to pious imitation, to the movement of the Holy Spirit, or to the relaxation of political or religious suppression. It is sufficient to observe at this stage the fact that clustering occurs, and to draw a single conclusion from that observation: that stigmatisation may need to be examined within a context wider than simply the spiritual quest, or excesses of an individual. Therefore when the circumstances of the six contemporary cases are outlined in the following chapters, their church, community and family backgrounds are specifically highlighted.

Given that the six contemporary stigmatics examined are from an English speaking culture and five are from the British Isles, this chapter of historical review will conclude with an outline of the cases of four major historical British stigmatics, Annie Girling, Teresa Higginson, Dorothy Kerin and John Tom<sup>52</sup>.

Annie Girling and John Tom were both cult founders and leaders. Tom was born in Cornwall around 1799 and at the age of 32 travelled to Kent. There he changed his name to Count Moses Rothschild and later to Sir William Percy Honeywood Courtenay, Knight of Malta, and made claims to be the rightful heir to the Earldom of Devon and to the Kentish estates of Sir Edward Hales. He also described himself as King of the Gypsies and King of Jerusalem.

In 1832 he stood as Tory candidate for parliament, but by the next year he was unmasked, tried for perjury and sentenced to be imprisoned for three months and then

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<sup>52</sup> Also written as Thom and also known as Sir William Courtenay.

transported for seven years. His wife and father travelled to Kent and had him transferred to the Kent County Lunatic Asylum at Barming Heath from which he was released in 1837. At that point his brief career as a prophet commenced.

"He now began openly to proclaim that he was no mere earthly righter of wrongs. He was divine, the reincarnation of Jesus Christ, and his body was the temple of the Holy Ghost ... Sir William utilized to the full, in propagating his new pretensions, his wide knowledge of the Bible, his superb preaching powers, and his close resemblance to the traditional likeness of the Saviour. Soon he was gaining converts among the credulous, emotionally starved labourers and their wives; and he despised no means, however crude, of gaining adherents to the cause.

"In his blasphemous masquerade he was particularly fond of invoking the Book of Revelation, and he used its apocalyptic statements to terrify the timid, and to impress the more stolid. When he rode into a village, for example, and had gathered a little crowd of wondering rustics and their wives around him, he would point to his light-grey mare, and then proudly declaim in his resonant voice Verse 2 of Chapter VI of the Book of Revelation: 'And I saw, and beheld a white horse; and he that sat on him had a bow; and a crown was given unto him; and he went forth conquering, and to conquer....So much did Sir William impress one woman, a Mrs Hadlow, both physically and mentally, that she readily believed him when he told her, one day, that the Saviour had selected his body for His second coming on earth; that Jesus Christ dwelt in his, Sir William Courtenay's, heart; and that his body was the Temple of the Holy Ghost. Flattered by the Knight's attentions, overwhelmed by his pretensions, dazzled by his assurances that he was soon to usher in the Millenium and the Rule of the Saints, Mrs Hadlow became as ardent a disciple as her brother William Wills was.... He assured his listeners that he was not a mortal man. He had descended from the clouds; and should ten thousand men attack him, he could vanish in a trice, and they would not know where to find him....He was the Christ who had been nailed to the Cross; he was, indeed, the resurrected body of Jesus. He was their blessed Lord and

Saviour, come to lead them to their salvation. Because he was divine, neither bullets nor any kind of mortal weapon could injure him, or his followers either, provided they kept true to him."<sup>53</sup>

To demonstrate his authority further he showed his stigmata to the band of Kentish villagers which made up his following. He "pointed to certain punctures in his hands as those inflicted by the nails of the cross, and to a cicatrice in his side as the wound out of which issued blood and water."<sup>54</sup> The cult was however short-lived. The authorities became concerned that he might inspire a violent social rebellion and sent militia to capture him. In the ensuing fracas on May 31st 1838, known as The Battle of Bossenden Wood, at Boughton six miles from Canterbury, Tom died. He was buried nearby at Hernhill churchyard, without mark or memorial.

Annie Girling was born in 1827, a farmer's daughter from Little Glemham in Suffolk. She married a merchant based in Ipswich. After her marriage, Annie Girling reported an ecstatic experience "as a result of which she began to believe that she was a new and special incarnation of God, stigmata having appeared in her hands, feet and side."<sup>55</sup> She founded a working-class religious movement known as The People of God based on the belief that the second coming was imminent. For a while the movement lived in a camp set up in the New Forest in Hampshire and the cult spread to followers in America. However the movement gradually broke up and before her death in 1886, Annie Girling was reduced to earning a meagre living by displaying her wounds for the benefit of those curious passers-by prepared to pay a small sum.

Tom and Girling were dismissed by mainstream society as mad or eccentric, and, in Tom's case, dangerous. The cult followings they encouraged were viewed as short-

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<sup>53</sup> Charles Dickens, *All the Year Round* No 419 May 1867 pp441-446.

<sup>54</sup> Thurston p 37, quoting *Annual Register* (London:1838) .

<sup>55</sup> Wilson p 142.

lived social incidents and their activities, including their stigmatisation, have been largely forgotten today.

By contrast, Teresa Helena Higginson, who was born in 1844 in Gainsborough, Lincolnshire, continues today to have an active following who regard her as having been "an exemplary Roman Catholic"<sup>56</sup>. She was named by her devout Roman Catholic father after St Teresa of Avila and St Helena.<sup>57</sup> She revived and encouraged the practice of devotion to the Sacred Head of Jesus during that period in the 19th century when there was a general revival of English catholicism. Her reputation however was not universally acknowledged as being exemplary. She had a childhood history of self-abuse and her fasting may now be interpreted as symptomatic of *anorexia nervosa*. While working as a teacher near Wigan in Lancashire she displayed the wounds of stigmata which coincided with reported periods of ecstasy. These events occurred shortly after reports of the stigmatisation of Louise Lateau of Belgium became known in Britain. Teresa Higginson had much in common with, and lived at the same time as her Belgian counterpart. Both had experienced traumatic injuries as children. Teresa had thrown herself into a saw pit after the death of a younger brother. They both became objects of curiosity at about the same time in the 1870s. Both women were seen to experience religious ecstasies, were reluctant to eat and both were considered at various times to be either impostors or mentally unstable. There was never any conclusive proof of fraud produced in either case, but the behaviour of the two women was considered by mainstream opinion to be so bizarre as to be outside that which was properly acceptable.

However a loyal corps of supporters remained loyal and accepted a range of claims including one that she had the gift of bilocation. It was also said of Teresa Higginson that following her stigmatisation she did not sleep. She was subject to trances, it was

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<sup>56</sup> G McGinnity, *A Devotion for Today*, (undated private publication printed by Allan Boyle of Bootle, Merseyside UK) p3.

<sup>57</sup> Mother of Emperor Constantine and reputedly responsible for the rediscovery of the cross of Christ in Jerusalem in the 4th century.

explained, which appeared to serve her in place of sleep. The accounts of Teresa Higginson's visions, dating from Holy Week 1874, show her to have had a dual perspective on the passion. Wilson described how she constantly altered role from being "a sympathetic bystander to being inside Jesus and feeling all his suffering".<sup>58</sup>

Her main spiritual legacy has been the practice of devotion, in certain catholic circles, to the sacred head of Christ as the seat of divine wisdom. Today her cause for canonisation has been raised and visitors to The House of Prayer at Achill, County Mayo, Ireland<sup>59</sup> are encouraged to believe that Teresa Higginson was "chosen to make known to the world the great desire of Jesus that his Sacred Head be worshipped as the seat of divine wisdom as an act of reparation for intellectual pride and infidelity.... As is clear from the prayers given by Jesus to Teresa Higginson, Almighty God desires reparation to be made for the rejection of His Holy Will, for the rebellion against His Sacred Wisdom and for the despair resulting from a rejection of trust in His divine Plan."<sup>60</sup>

The final historic British stigmatic to be mentioned is Dorothy Kerin, the founder of the Burrswood Fellowship and Healing Ministry based at Groombridge in Kent. An anglican, she was born in London in 1889 and died in 1963. Her mystical experiences began, like those of Therese Neumann, with a period in which she was deaf, blind and semi-conscious. Her family and friends expected her to die and gathered at her bedside at their home in Herne Hill, London, but she confounded medical predictions and raised herself, stood up and declared that she was healed. "The doctor had said she could not live until the morning. He had kept her alive for six weeks by means of brandy and opium and starch. During the last fortnight she had lain like a log of wood, and never moved her position in the bed, and was now blind and deaf, and for the most

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<sup>58</sup> Wilson p 74-75.

<sup>59</sup> The community set up to support Christina Gallagher.

<sup>60</sup> McGinnity p 3.

part unconscious.... She had been five years confined to her bed, and had been turned out of five hospitals - incurable.

"Such was her condition, and now the end had come. About half past nine on Sunday evening, as mother and friends stood watching, she seemed to breathe her last. Anyhow, for eight minutes her lungs ceased to breathe, and her heart ceased to beat, and they deemed her dead. But just at this juncture, Dorothy tells us SOMEONE called her by name, three times distinctly, and she replied, 'Yes I am listening, who is it?'. And He said, 'Listen!', and she felt two warm hands take hold of hers. A beautiful Light then flashed over the screen and came right over the bed. In the midst of the Light stood the Angel of the Lord, who, still holding her hands in His and lifting them up to her eyes and touching her ears, said 'Dorothy, YOUR SUFFERINGS ARE OVER, GET UP AND WALK'. She then opened her eyes and sat up, greatly wondering to see so many friends around her bed."<sup>61</sup>

In 1915, three years after her recovery, Dorothy Kerin reported a series of experiences which appeared to involve her in considerable pain and distress. During one episode she believed she had had a confrontation with the devil "in the form of a beautiful angel but with baleful eyes that held in them all the powers of evil".<sup>62</sup> Dorothy also experienced pains in the heart, which her spiritual adviser interpreted as supernatural pains.

"He noticed she appeared to have great pain in her left hand which she opened and shut constantly, while plucking the bed clothes with it. He saw a red spot gradually appear on the back of it. Later that same evening, he found her in a great state of distress. She said to him, showing him the palm of her left hand in which a wound was clearly

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<sup>61</sup> Dorothy Musgrave Arnold, *Dorothy Kerin - Called by Christ to Heal*, (London: Hodder and Stoughton 1965) p9-10 quoted Revd J L Thompson, *London's Modern Miracle*, an account written by her spiritual adviser and privately published c1912.

<sup>62</sup> D M Arnold, *Dorothy Kerin, called by Christ to heal*, p30.

visible, 'Do you think the Devil could have done this?' He replied, 'No, certainly not.' 'But,' she said, 'I am so wicked, God could not have done it. And if He had, surely He would have done it in both my hands. Do pray that it may go; not the pain, but the mark. I could not bear anyone to see it.' He replied he was sure it was the doing of our Lord, and that she must be thankful, and that we had no right to say to our Lord what He must or must not do. This comforted her, and she eventually went into a deep sleep. He questioned her as to whether she had any idea of what it might be, and found that she had not and thought the Stigmata were always invisible. Before she fell asleep, she asked him to pray that the Stigmata might be removed in the night, not because she wanted to be rid of the pain, for she said she never wanted to lose that, but because she could not bear it to be seen. He prayed as she had asked him to do, but he also prayed that if it were God's will, the stigmata might be given also in the right hand, so as to reassure her.

"The next afternoon, December 9th, Dorothy received the Wound in her side. She was kneeling in front of the Crucifix kissing its Feet, when, preceded by a pain worse than on the previous occasion, she felt two stabs, as if a knife were being driven into her side. She collapsed in an agony of suffering, and when she came to herself she found the Wound in her right hand had also appeared.

"On the following day, Saturday, December 10th, she was given the Wounds in her feet. In both her feet there appeared a round red mark on the instep. ... Her hand when she woke on the first occasion was full of blood, which vanished though she did not wash it. There remained a mark on the back of the hand like the head of a flat triangular nail; and on the palm a round wound that was bloodless."<sup>63</sup>

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<sup>63</sup> Arnold p 31-32.

Dorothy Kerin is best remembered for her healing ministry and was not a focus of attention solely because of her stigmata. Indeed she was famed initially for her miraculous recovery before any suggestion was made that she might have mystical gifts. Her experiences however as a stigmatic were consistent with those of many others. She was able, it is reported, consciously to leave her physical body when at prayer at night to minister to the suffering of those for whom she was praying. As well as the accounts of bilocation there are also accounts of religious ecstasies and of two visions in which she experienced the feeling of holding the Christ child in her arms.

The cases of Annie Girling and John Tom represent an unusual, but not unprecedented history, in that both were stigmatics who were also leaders of religious cults or movements. Of recent cases there have been two which follow a similar course; there was that of the schismatic Archbishop Clemente Dominguez in Spain and that of Michele Improta in Italy.

In form and detail the stigmatisations of Teresa Higginson and Dorothy Kerin took a more usual form which is entirely consistent with instances of stigmatisation outside Britain.

There is thus no evidence to be found from previous British cases of stigmatisation to suggest that there exists a peculiarly English form of stigmata. The six contemporary cases chosen for study, three of which are English and all of which come from the English-speaking world, are not untypical on that account. However other aspects of their case histories need now to be explored to ensure that the conclusions drawn from an examination of the six are valid for the phenomenon as a whole being made.



## **Chapter Four: Ethel Chapman**

At this stage it is appropriate to introduce the six contemporary stigmatics at the centre of the research project and to give details of their life experiences employing the methodology and categories outlined in Chapter One. The order of presentation is chronological, in the order in which they came to the attention of the author. Quotes without footnote references are taken from interviews conducted by the author with the individual stigmatic.

Contact with Ethel Chapman was first made by the author in 1980 in the final months of her life. Her case had entered the public domain at Easter 1979 when a photograph of her had appeared in the tabloid newspaper "The Sunday People". The source material for an examination of her case was gathered in the course of two interviews with her; written and oral evidence from her spiritual adviser was submitted to the author; access was given to her papers following her death; first-hand observations included physical examination by the author of her stigmata; interviews with the author were granted by others who knew Ethel Chapman or had been involved in her case. In addition, on Good Friday 1980, the author was present for a short time during a longer, major episode of stigmatisation.

### **Biography and background**

Ethel Chapman was born at Whitsun 1921. When she was a child, her father died from wounds sustained during the First World War. The memories of him which she retained were of a man who was disabled and in ill-health. She opted to follow a family tradition and enter the world of Variety and Music Hall entertainment. She was billed as "Ethel Chiverton, the comedy girl".<sup>1</sup> In a foreshortened career she appeared in a double act with her brother. She worked with the American band leader Glen Miller. She did

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<sup>1</sup> Playbill in Ethel Chapman's papers.

not say so directly but hinted strongly that she had a brief intimate relationship with him. In her youth Ethel Chapman was an accomplished impressionist and she said that she had the ability, when on the stage, to absorb into herself the feelings and emotions of others in order to assume their characters.

Although she found sufficient employment as a professional entertainer and during the Second World War she was a member of the official group of troop entertainers known as ENSA, she was not especially successful and her career came to an end with the onset of facial paralysis and loss of balance, which first became evident when she stumbled on stage. It was the commencement of multiple sclerosis and Ethel Chapman recalled emotions of bitterness and anger. From that moment she described her life as "difficult". Subsequently she married, but it was revealed to her after two years that her husband was a bigamist with four children. They parted and Ethel Chapman, by then mother of his child, became a single parent. She ran a small shop until the work became unacceptably difficult with the progression of the illness. As she became increasingly immobile even her daughter's help, and their joint decision to turn her general store into a self-service shop, did not enable them to remain in business indefinitely. Eventually the pain and the disability forced her into premature retirement from business as well as the stage.

It was as a patient at the Birkenhead General Hospital in 1974, that Ethel Chapman, in considerable pain and believing her life to be at an end, had the profound religious experience which gave a purpose to her final years. In an observation which she believed to be significant, she told how at the time of her birth, her grandmother declared to the family that her grandchild had been born "a child of God". For many years she had been mystified by this. However, at the end of her life, she interpreted this family legend as a reference to the stigmata.

Following prolonged periods of hospitalisation, Ethel Chapman was admitted as a resident to the Springwood Leonard Cheshire nursing home on Merseyside, a christian foundation set up for people with terminal or incurable medical conditions. It was there, following publication in the Sunday People on Easter day 1979, of a photograph displaying her wounds and an accompanying article, that Ethel Chapman became a recluse. She spent increasing amounts of time in her own room, praying but having diminishing contact with other people. Staff observed that at times when her health allowed her to receive visitors in her room she made them welcome, but her appearances in the communal rooms of Springwood became increasingly rare.

### **Congregation and community**

Ethel Chapman was a baptised and confirmed member of the Church of England, although at the time of her stigmatisation she was not a member of a worshipping congregation. Contact with the faith of her childhood was rekindled through the christian out-reach activities of Fay Roberts, the presenter of the religious programmes narrowcasted on "Radio Royal", the hospital radio at Birkenhead hospital.

Her spiritual adviser, Revd David Lockyer was later to describe how, because she was unable to attend church unaided, and "partly because she felt that God was not being fair to her"<sup>2</sup> she had fallen away from regular christian worship.

Her social contacts were restricted to members and staff at the residential home and a small number of visitors. In her final years, despite an absence of socialising and an isolation from other residents, she retained a position of social importance within the group because of her public renown as a stigmatic and her ministry of prayer.

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<sup>2</sup> David Lockyer was appointed her spiritual adviser by the Bishop of Liverpool following Ethel's stigmatisation.

### **Medical history**

Ethel Chapman was diagnosed as having multiple sclerosis in 1959. It is a progressively disabling disease of the central nervous system. Taking its usual form, her illness alternated between relapse and remission, but the net effect of this was increasing immobility as her limbs became numb, progressively weak and paralysed.

For a four week period prior to her stigmatisation Ethel Chapman was, according to her daughter, barely aware of what was happening to her. She was taking prescribed drugs and painkillers.

In 1978, coinciding with her admission as a resident to Springwood, her physical condition worsened and her multiple sclerosis, combined with diabetes, substantially limited her strength. By 1980 she was unable to spend little more than four hours a day out of bed in a bedside chair. Her physical appearance was that of a woman in her seventies and not her fifties. Her steel grey hair was cropped short. Facial paralysis had almost closed her right eye and gave her mouth a slight slant, up on her right sloping down to the left. She talked slowly in a soft Liverpudlian voice. On the few occasions she ventured from her room, she used a wheelchair.

She died of natural causes related to her chronic condition at the age of 59, on July 22 1980.

### **First Stigmatisation**

Ethel Chapman first received the stigmata at Eastertide 1974. At the time she was an in-patient at the Birkenhead General Hospital. She had been diagnosed as suffering from septicaemia caused by a bedsore which had developed during the long periods of immobility forced upon her by her underlying degenerative condition. Through the winter of 1974 she had been in considerable pain, and as a consequence of uncontrollable muscle spasms, her legs had had to be weighted down by traction to

prevent them causing additional injuries due to their violent, uncontrollable and unpredictable movements.

When asked to explain the nature of her faith at the time of her stigmatisation she chose to describe herself as not a "specially pious person". She was nominally an anglican and through the influence and encouragement of Fay Roberts, had recently begun to compose reflective poetry on spiritual themes.

On the Saturday before Easter 1974, Ethel Chapman, in the company of Fay Roberts, had been reflecting on the nature of human suffering within the context of Christ's passion. She had been encouraged by Fay Roberts to meditate on the crucifixion of Christ through the medium of an illustrated Bible. She recalled praying that evening to God for evidence of his existence. For many years, particularly as her physical condition declined, she had become cynical about the church. Yet on that night before Easter, as she described later, she was not in a cynical frame of mind. Indeed quite the opposite: she was in despair, she recalled and grasping for faith. Before going to sleep, she renewed her study of the Bible passage recommended by Fay Roberts and had seen in her illustrated copy of the scriptures a picture of the crucifixion. Wanting to find a faith and to make sense of her illness, she recalled praying, "Oh Lord, if you are there, show me in some way". Ethel Chapman was, at that time, convinced that she would soon die.

During the night she described having a vivid dream, or vision, of herself being crucified. The details of events she observed, she later recalled, corresponded with the details shown in her illustrated Bible and included images of crowds at the foot of the cross. She says she felt the pain of nails in her hands and feet. She reported a sensation of being lifted off the bed and "being very close to God".

A morning examination by nursing staff found her hands were bleeding in the centre of the palms. The precise moment of her first stigmatisation was not witnessed, although the times of the reopening of the wounds in her hands in later years were predictable and were witnessed. On first seeing the marks in her hands Ethel Chapman supposed that she had made them by involuntarily digging a finger nail into the palms of her hands when her hands were clenched in a fist.

Her accounts of her vision and wounds were taken seriously by the hospital staff and she recalled that the doctor who first examined them was a practising Roman Catholic who recognised a *prima facie* case of stigmata and alerted the hospital chaplaincy.

No evidence was found by the author of Ethel Chapman having other than a superficial knowledge of the phenomena prior to the event.

### **Shape, form and progress of marks**

In the six years which followed, before her death in 1980, Ethel Chapman had a similar vision and experience on a number of occasions, during which, as the pattern of the experience became familiar, she described herself as being able to remain awake and conscious of her environment at the same time. In the final four years of her life the vision of crucifixion was repeated on the afternoon of each Good Friday, culminating at 3pm. During the vision Ethel Chapman's wounds reopened and bled. Afterwards she went into a deep sleep. She came to believe that it was her duty to go through with the pain.

The marks on her hands were just off-centre. Her feet were similarly marked. She also had other forms of bruising and what appeared to be a rope mark on her wrist. Around her forehead she had a few dotted pin pricks which David Lockyer suggested to her might be seen as corresponding to the marks of a crown of thorns. She described a

feeling in her visions which could have tallied with wearing such a crown, "I felt a heaviness and soreness".

There is no evidence that despite her propensity to septicaemia that her stigmata ever went septic.

She did not seek to display her wounds in public, although her stigmata did not remain secret. In the last year of her life she spent much of her time alone, spending that time in prayer, receiving letters from people who had heard of her and wished her to pray for them or people they knew. Ethel Chapman did not become the centre of a christian sub-cult in the way that some other stigmatics have done, but her experience could not be kept to a small circle of people and both local and national newspapers ran articles telling her story. She once allowed a press photographer to record the wounds in her hands. In the only known photograph of her stigmata her hands are raised on either side of her head with wounds in the palms being clearly visible. She is seen looking straight at the camera.

Ethel Chapman was examined by, amongst others, a geriatrician, Dr Colin Powell, who commented that she was a "totally integrated personality, exhibiting no signs of emotion. She was one of the most complete and peaceful people I have ever met."<sup>3</sup> He also confirmed impressions made by other medical people that there was no suggestion that her marks were produced by "the obsessive scratching of the skin which can be a symptom of certain types of psychological disorder".<sup>4</sup>

Ethel Chapman did not suffer constant pain from the wounds. The initial vision was full of pain, but as the years went by the pain associated with her mental re-enactment of the crucifixion at 3pm every Good Friday, while persisting, decreased in intensity. When she was asked if she dreaded the visions of the crucifixion, since the anticipation

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<sup>3</sup> Quotation from written evidence provided by Dr Powell for the author.

<sup>4</sup> Ibid.

of pain is often as unpleasant as the pain itself, she admitted to being only slightly apprehensive. "You see, I am so used to pain." What the formation of the stigmata appeared to do was give a meaning in Ethel's mind, to all her pain, past and present. The marks of the cross, to Ethel Chapman, were the sign that God was involved in all her suffering.

When Ethel Chapman died, the marks continued to be visible on her body. David Lockyer made a special point of examining her hands and feet with the undertaker. He was aware of reports that following Padre Pio's death the wounds on his body were no longer visible.

#### **Claims for associated mystical phenomena**

In addition to her stigmata, Ethel Chapman reported other of the accepted, but subjective, mystical phenomena. She talked of two occasions when she had had a vision of walking in Heaven and meeting Jesus. She also said that when her hands bled she sometimes had the sensation of a sweet smelling perfume in the room. She described it as being like that of roses, although the sensation was limited to herself. She talked of a sensation of levitation. While domestic staff reported unusual disturbances to her bedclothes, no-one ever witnessed Ethel Chapman defy gravity.

Although she never entered a mystical marriage with Christ, Ethel Chapman reported intense feelings of love towards the figure of Christ which took the form of a physical longing: "I want to hug him tight, he is my Jesus".

In her later years she believed she had powers of clairvoyance and reported premonitions of the deaths of others.



### **Familiar iconography**

Ethel Chapman was familiar with the popular images of the Catholic tradition, including those of the crucifixion. Her own visions of Christ's death, she said, bore a close resemblance to the illustrations in the copy of the Bible from which she was reading during the evening before her first stigmatisation.

### **Personal response to wounds**

Shortly before her death, Ethel Chapman made a passing remark which appears to challenge the view that she was a reluctant stigmatic shunning the limelight. Referring to her stigmata, and looking back on the disappointments of her stage-career, she said, "I am getting what I wanted in a sense. I have become a star in my own right. I have become somebody, but I never ever thought it would be this way".

From a single remark it would be unwise to dismiss every aspect of her experience as invalid or accuse her of charlatanism. Private devotions to the passion of Christ, well attested to by David Lockyer, were an integral part of her experience and yet in no way attention-seeking.

She attempted in her poetry to describe her feelings of empathy with the suffering of Christ. She expressed to David Lockyer, in the course of numerous and lengthy conversations, the view that her suffering was a sign of the proof of the power of Jesus and his relationship to God and herself, and her relationship to God. "I want to cry for the sick. I want to comfort them."

At no time did she appear to regret her stigmatisation, even though she harboured many regrets that her stage-career and former life had been cut short. David Lockyer found during his years of ministry to Ethel Chapman that she did not phrase her experience in theological terms. She did not ask if hers was a suffering for others, a reparation, a sign for others that Jesus suffers too. "Ethel simply considers that the stigmata is a sign

that the Lord suffered and that she is not alone. He suffers too and she is united through her suffering with Christ."<sup>5</sup>

### **Church witness and society's response to wounds**

It was important to Ethel Chapman that she received the approval of others and this she actively sought. She wrote to church leaders and other prominent figures to tell them of her experience. She instigated the private publication of a book of poems<sup>6</sup> and distributed copies having previously sent out individual poems or small collections of verse. In her papers there are replies addressed to her from a Lady-in-Waiting to the Queen and a Senior Chaplain to the Archbishop of Canterbury.

Most recipients of her poems and letters, which often referred to her medical history, reacted courteously but non-committally. Her marks were however taken seriously by the anglican Bishop of Liverpool, Rt Revd David Sheppard, in whose diocese she resided. He met Ethel Chapman and found her to be a person of simple but profound faith. He delegated David Lockyer, then a local parish priest to act as her mentor and spiritual advisor.

David Lockyer wrote of his reaction to Ethel Chapman following a celebration of Holy Communion at her nursing home on Easter Sunday 1979. He observed that as she received Communion her hands began to bleed. He reviewed in his private account Ethel's history of pain and the moment of her first stigmatisation. "From that day onwards Ethel has viewed life from a different perspective. She has looked outside herself and grown in love and understanding of the nature of God and in genuine sympathy towards her fellow sufferers. Ethel is at peace with herself and the world and

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<sup>5</sup> From written account of his ministry to Ethel Chapman submitted to the author.

<sup>6</sup> Ethel Chapman, *The Gift and other poems* (Published at Ethel Chapman's expense by New Horizon 1977).

feels very close to God at all times. This peace and serenity she shares with all who ask, and many do."<sup>7</sup>

The Bishop of Liverpool, David Sheppard wrote to Ethel Chapman to express his thanks for her willingness to tell him of her "experience of Christ's love, and healing powers. Thank you for that, it encourages my faith. I realize that you have been given a very special insight into His suffering. He is able - and you are able - to bring new hope to other people ... I can well understand how people who are suffering are helped by someone like yourself, who has had to face up to frustration, weakness and pain, and yet has gone on, experiencing Christ's Power and new hope".<sup>8</sup>

As the diocesan bishop responsible, Bishop Sheppard had two concerns. On the one hand he wished to offer Ethel Chapman pastoral guidance, to enable her to understand her experience, and on the other hand he wished to prevent her from becoming a public spectacle. Bishop Sheppard was not dismissive of Ethel's experience. Many years before meeting Ethel Chapman, when he was a curate, David Sheppard had met a man who described a similar visionary experience. The man was bedridden and told of a clear vision of a visitor in his room who had displayed on his hands the wounds of the crucifixion. Bishop Sheppard interpreted the story thus: while able-bodied people were able to find God through going to church, meeting and helping others, "this was not possible for disabled people. Perhaps God therefore gave them different insights and different ways of finding him".<sup>9</sup>

When Ethel's stigmata became widely known one clergyman let it be known publicly that he believed her stigmata were produced by the devil. The overwhelming view of the diocesan clergy, in the view of David Lockyer, was against the concept of diabolical

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<sup>7</sup> Revd David Lockyer, Incumbent, Speke, Church of England Diocese of Liverpool 1977-84, private written account shared with author 1980.

<sup>8</sup> Letter from Ethel Chapman's private correspondence.

<sup>9</sup> Lockyer, private account.

involvement and Bishop Sheppard was in no doubt when he met Ethel Chapman that he was meeting a good person of simple but profound faith.

As far as can be ascertained, Ethel Chapman was at that time the only anglican about whom claims of stigmatisation were being made and other than Dorothy Kerin, only the second anglican of the 20th century. With little experience of the subject, the anglican Church's official view on the subject is unformed. David Lockyer, in 1979, described how, as a result of their realisation of this inexperience, he and Bishop Sheppard had decided as far as possible to prevent public curiosity in Ethel's case from developing. It would have created an unwelcome theological debate and there was general concern for Ethel Chapman, then a sick woman in a public residential home. David Lockyer wrote at the time: "Although she has felt compelled to publish her poems, it has not created a great stir either locally or nationally, which is probably for the good. Many people expect a person with the stigmata to be very saintly, and if not then they are not genuine. This has come from the Roman tradition and the recent publication of Padre Pio's life and work. As Ethel Chapman falls outside the generally recognized category of a religious both in discipline and traditional expectations, people have not come flocking to her. And because of the general degree of secularization which has taken place during the past decade or so, stigmata is both not understood nor given much significance."<sup>10</sup>

As to his personal reactions to Ethel Chapman, David Lockyer admitted to initial scepticism. "When I first met her I was openly sceptical. I looked at her hands and could see the marks in the palms of her hands and also the marks on the backs of her hands. They coincided. I did not conclude that she had deliberately inflicted these wounds on herself. I asked her questions concerning this possibility later on, but at that

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<sup>10</sup> *ibid.*

early stage I just accepted what she said in the same way that I listen and remember what other people have to say. I take in the information.

"She was glad to have someone to talk to and to take her seriously. She was glad to have someone who could help shed some light on her experience of mysticism. She was not a trained deep thinker, but she had a profundity about her thought. It was her whole attitude towards life which intrigued me, because from listening to her talk about her life before her stigmata, it seemed to have been a fairly shallow existence. Also, listening to her descriptions of her stage career, some doubts were raised in my mind as to whether the marks could have been self-induced. It was interesting to follow this through. To the best of my knowledge the marks were not fraudulently induced. They seemed to be very genuine. I say that because of her physical condition. She was partially paralysed, from the waist down. She had multiple sclerosis. She had a lack of coordination. She could not hold things properly in her hands. She did not have a lot of strength left in her fingers. I found this out simply by holding her hands and seeing how much grip she had. I did not just hold her hand on the one occasion to gauge her strength. I have taken her on outings and watched her performance on a number of occasions, it wasn't just a one-off thing.

"Those of us who have been deeply involved over the past years have experienced a profound inner peace when in Ethel's presence. Whether this is purely subjective is debatable, I can only speak for myself. Those who do not show her respect are people who expect Christians to be perfect. So to have the signs of the suffering God, one would have to be out of this world to please them. There is a tendency within all of us to expect this. By their fruits you shall know them. When one thinks of Ethel's chequered background and her present environment, she has made great progress in the

spiritual life without anything like the advantages of the noted religious people of the past."<sup>11</sup>

### **Wider ministry and perceived purpose**

Following her stigmatisation, Ethel Chapman believed she had a ministry of prayer and healing. The marks she believed were a sign from God that her life of suffering had been for a purpose. She had no doubt that her healing and intercessory ministry was authorised by God and that the stigmata were the sign of that authority. Ethel Chapman found comfort in the thought that the stigmata were a sign that she was not alone in her suffering and that she was united with Christ through her pain.

People wrote to her asking for her prayers and sometimes those who wrote sent a handkerchief or piece of cloth asking that Ethel Chapman place them on her wounds when they bled. This she did. Her intercessions were sought, mostly in the form of letters which David Lockyer vetted. She developed the practice of setting time aside every day to pray for matters arising directly from her correspondence. She did not believe she was encouraging superstitious practices as she believed that she could tell from the letters that came whether they were from people who were "crying out for help and comfort".

Shortly after her stigmatisation Fay Roberts told her, as Ethel Chapman recalled, that she believed Ethel had been singled out for "the honour of stigmatisation and the Lord has work for you to do in the world".<sup>12</sup> Ethel Chapman accepted this and added in a subsequent interview, "I think it is my duty to go through with it. I have found out that since it has happened I can comfort people in so many ways". She saw her stigmatisation, in a sense, as an ordination and she believed that she was under a holy

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<sup>11</sup> Ibid.

<sup>12</sup> Letter to Ethel Chapman written by Fay Roberts and made available to author 1979.

order, or obligation, to suffer the pain and redirect it to a purpose in her ministry. Prior to that, as a failed entertainer, disabled dependant and wronged wife, she had had little belief in herself and had been grasping for a faith to give her life some meaning.

## Chapter Five: Jane Hunt

The author was contacted by a member of the anglican congregation of St James Codnor, Derbyshire in the summer of 1985. Her letter described the recent experiences of a fellow member of that congregation, Jane Hunt. After an initial meeting with the author, Jane Hunt agreed to describe and display her stigmata on film and be interviewed. This took place over a period of three days in September 1985.<sup>1</sup> Subsequently the author remained in contact with Jane Hunt, visiting her from time to time and corresponding by letter, most recently in 1994. In addition to the direct evidence gathered from observation of her wounds and taken from interviews with her, her husband, Gordon Hunt, also provided oral evidence as did her parish priests, The Rev Norman Hill and The Rev Peter Wyatt<sup>2</sup> and individual members of the Codnor congregation. Further evidence and opinion was given by a medical practitioner Dr Una Kroll who examined the stigmata.

### Biography and background

Jane Hunt described herself with a characteristic and apparently genuine modesty as "nothing special, just an ordinary woman". She was born in 1957, the daughter of a coal-miner. Her father was a Roman Catholic and her mother a member of the Church of England. As a child she was a frequent, although not regular attender at both her local Anglican and Roman Catholic churches. While still of junior school age she would attend the Anglican church alone, although she was accompanied by her sister to the Roman Catholic evening service. Other childhood religious influences included regular Saturday evening Bible story sessions with her grandfather. She recalled finding it hard to comprehend why at school, during religious education classes, her peers expressed general disinterest in a subject with which she herself was fascinated.

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<sup>1</sup> An edited version of the film was shown on the ITV religious documentary series *The Human Factor* on October 5th 1985.

<sup>2</sup> Father Hill resigned the living shortly after Jane's stigmatisation for reasons entirely unconnected with the event and was succeeded by Mr Wyatt.



Religious imagery made a lasting impression on her as a child. She has said that there has not been any time in her life, back to the time of her earliest memories, when she has not been "aware of Christ". Jane Hunt received however only the very minimum of education, changing schools on a number of occasions as her father moved the family around from mining-district to mining-district in order to obtain work. She has also made reference to her father having abused her as a child but not been more explicit and it was deemed inappropriate to press her for details, although the nature of the abuse was hinted at off the record. Jane Hunt left school at the age of 14 and married three years later, having for a while worked in a factory. Her husband, Gordon Hunt, is a bus-driver although he has experienced a number of spells of unemployment. They have one daughter and live in a modest semi-detached house. In the front room are displayed several religious statuettes and religious images of significance to her.<sup>3</sup>

### **Congregation and Community**

Jane Hunt is a baptised anglican and a member of the congregation at her local parish church in Codnor. She was confirmed an anglican as an adult at the same service her husband, father, mother and sister were also confirmed. She described a special affection for her parish church at Codnor and a particular devotion to the Anglo-Catholic shrine at Walsingham, especially the inner sanctum, a modern reconstruction of the replica house of the Holy Family, the original design of which had its origins in a medieval vision. She is not a regular church attender and it was only during her most active period of stigmatisation, when Revd Norman Hill was incumbent, that she played a full part in congregational life. The village of Codnor developed to serve the local collieries of the Derbyshire coalfield, but since the decline of the coal industry has become economically unfocussed, having no single employer central to the economy of the community. There are few signs of affluence yet, simultaneously, there is little observable poverty.

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<sup>3</sup> Mostly popular mass-produced pictures of Christ and the Virgin Mary.

### Medical history

Jane Hunt described to the author her history of bad health. She said that she was deaf up until the age of six and she became a withdrawn child, spending "long spells day-dreaming in her room, or in an under-the-table refuge she felt to be her 'church'". As a young, married woman she experienced a miscarriage and the especially disturbing experience of giving birth to a seven month-term boy who strangled on the umbilical cord when she unexpectedly gave birth alone in a lavatory. Later, at the time of the birth of her daughter, she herself came near to death and afterwards reported an out-of-body experience at the moment of cardiac arrest. She described it as her first "mystical" experience when she felt very close to God who, according to her description, chose to send her back to the world. No record of the drugs prescribed her at the time has been made available yet it may be assumed the medication included heavy duty pain-killers.<sup>4</sup> Her recollection of the event corresponds with standard descriptions of Near Death Experiences. "I could see the nurses and the doctors and me laying down on the bed and they rushed in and revived me... At that particular time I could see this door that I was going towards but I was tossed between shall I go or... I've got to come back? And I came back. God was kind enough to send me back here." In addition to the above mentioned medical history, as an adult Jane Hunt has suffered chronic back pain and undergone surgery<sup>5</sup> following the diagnosis of cancer. Jane Hunt did not show her stigmata to her general practitioner although she had need to consult him during her period of active stigmatisation. The marks were noticed, but only in a passing manner, by a nurse when Jane Hunt needed to attend a hospital casualty department. Her stigmata were however examined by the physician and anglican deaconess, Dr Una Kroll, who reported seeing no evidence of deliberate mutilation and accepted Jane's accounts of her stigmatisation and associated mystical phenomena as having taken place

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<sup>4</sup> Possibly morphine derivatives.

<sup>5</sup> A hysterectomy.

within the context of a genuine spiritual experience.<sup>6</sup> Jane Hunt was appreciative of Dr Kroll's description of the skin being a "mirror of the soul".<sup>7</sup>

### **First stigmatisation**

Following her experience of physical dissociation at the time of the birth of her daughter, Jane Hunt described other mystical events prior to her stigmatisation, after which she recalled noticing very faint marks on her hands which would burn and itch. Her first account of her stigmatisation, given to the author, began with a description of the events of the evening of the 24 July 1985, when she reported seeing the face of Jesus on her pillow as she went to bed. That night she said, she had had a vision of a brilliant white figure standing by her bed. The next morning, as she prepared breakfast, her hands seemed to itch and burn. At 10am, as she left the house to go shopping, she described experiencing a sudden and tremendous pain in her hands as if needles were being driven through them. Blood, she claimed, began to flow from the centre of the palms. She remembered being very frightened. She informed her parish priest of what had happened. He identified the marks as stigmata and took her experience seriously. Given this reaction, that she first informed her priest rather than a medical practitioner about her wounds, it would appear that she recognised her bleeding to have religious, rather than medical, significance, even though she claimed it was Father Hill who first told her about the phenomena of stigmata. The appearance of the marks also coincided with a time in her life when Jane Hunt first felt able to forgive her father for, what she described, as "things which had happened in the past".<sup>8</sup>

The sequence of events connected with the stigmatisation, as told by Jane Hunt, has not however been consistent. Initially, she described the events concerning her father, and those involved in consulting her parish priest, as having occurred on the same day, the

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<sup>6</sup> *The Human Factor* .

<sup>7</sup> *The Human Factor* .

<sup>8</sup> A reference to childhood abuse which, although she did not give details, she implied to the author to have been sexual. That the abuse was of a sexual nature was also the understanding gained by Ian Wilson.

Feast of St James. Pressed to account for the day, hour by hour, it emerged that the reconciliation with her father had taken place some weeks before and her meeting with Father Hill had been on the Sunday morning following the feast day.<sup>9</sup> Jane Hunt kept no record of events at the time and the precise chronology was of no particular interest to her. Crucial to the story, from her perspective, were not exact times, but the individual episodes and their associated emotions and their impact on her, her family and priest. Nevertheless the basic substance of her accounts is consistent and certain details can, and have been corroborated by her husband and by Revd Norman Hill. Jane Hunt's marks could have been self-inflicted, in that she was physically capable of causing them and had the opportunity. Her self-confessed scratching of the marks before full stigmata manifested themselves might have been a factor in the development of the marks, although there is no direct evidence of an intent to hasten or manipulate their occurrence.

### **Shape form and progress of marks**

The wounds first occurred when Jane Hunt was 28 years old and remained for two years, fading following hospitalisation and a hysterectomy. Around Easter, and on a number of Sundays, they were particularly sensitive and over several 24 hour periods, Jane Hunt estimated she had lost up to a pint of blood on each occasion. When active, the centres of her hands appeared to blister and then burst. Deep fissuring was observed but her hands were not pierced through. In addition to the marks in her hands, Jane Hunt twice reported seeing small marks in her feet and feeling a severe pain in her right side. On only one occasion since the disappearance of the wounds, has Jane Hunt reported receiving anything experience which could be interpreted as a return of the stigmata. She reported feeling pain in her hands during a visit to The Walsingham shrine in 1991 and she noticed faint marks on her hands at the time. By 1994, Jane Hunt was reluctant to discuss her marks in public and was saying that her

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<sup>9</sup> The inconsistency was noted by Wilson p 122-123, with the observation that a stigmatic's order of reality may not necessarily concur with that of the layperson.

memory of events was becoming increasingly difficult to recall. She appeared not to want to discuss her stigmatisation further, or to be recognised by the public as a stigmatic. This reaction could be interpreted as grounds for suspecting that she recalled having physically contributed towards the production of the marks herself and regretted allowing claims of the supernatural to be made on her behalf. No firm evidence however exists to substantiate this interpretation of her reluctance in 1994 to talk about her stigmatisation. Another interpretation could be that, without recalling any specific episode of deliberate self-marking, her memory of events was sufficiently confused to raise doubts in her own mind as to her past motives and actions. She might have been in the same frame of mind as the patient of Dr Oscar Ratnoff, who, after a long period during which she had been free of stigmata, had said to him that she could no longer distinguish in her own mind between real events associated with her stigmatisation and those which were fantasy.<sup>10</sup>

### **Claims for associated mystical phenomena**

Jane Hunt described receiving a sequence of vivid visions or apparitions shortly before and over the period she was carrying the marks. She told of one vision in which she felt she was transported to Bethlehem and was there allowed to hold the Christ child. In another vision she saw Mary in her own house. Her husband, who was in the room at the time, has said that he did not see the vision, but corroborates Jane Hunt's description of the family pet dog behaving in a manner which suggested that it was conscious of the presence of a third party. Jane Hunt talked too of visiting Christ and feeling his arms around her and "sinking into his body". When asked to explain her state of consciousness on these occasions she said that sometimes her eyes were open and she was aware of the immediate physical environment. "I can be doing things around the house.. then I stop and I see her (Mary). She stands there. But a lot of what I do see is when I am very deep in prayer and ... I leave my body behind probably

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<sup>10</sup> The Ratnoff case from Cleveland Ohio is explored in further detail later p150.

kneeling down... wherever I am I go off where Jesus call me." Jane Hunt was also disturbed, she said, by her experience of a vision of the devil who tried to undermine her faith. "There's thousands of things that's happened to me, not everything is very easy to explain and I find a lot of things very intimate between me and Christ. But I also receive, not my will to receive, the devil, but he came to me jeering and telling me that the things that are happening cannot be so. Why should I have so much honour done to me. And I don't know why... there's people that deserve more than what I deserve. The devil can't shake my faith he can only make it stronger. It is very distressing... and I try not to talk about him too much because I know he loves to be talked about." Jane Hunt talks of fighting the devil and has described her ultimate battle which took place when she was in her parish church with Father Hill. "God was within me and the devil was fighting against me. The fight within my body was too much for one to bear. The devil had his back to the crucifix so I turned and sat on the altar steps. I knew he would turn around to face me and that he would have to face the crucifix, at that point the shaking stopped." Additionally Jane Hunt has detected and been associated with an unexplained sweet smell of roses in her house. It is a a scent which her mother and husband have also noticed. She also claimed a gift of clairvoyance and on one occasion, during what she believed were visits by, or experiences of Jesus, she described seeing a man who was unknown to her. She later recognised the man from a photograph shown to her by a friend. He was her friend's father who had died on the night of her vision.

### **Familiar iconography**

Jane Hunt was familiar with a wide range of religious images associated with anglo-catholicism especially those found at the Walsingham Shrine<sup>11</sup> where, apart from the representation of the Holy Family's house, a particularly graphic three-dimensional representation of Christ's bloody wounds is a popular focus of devotion. There is also

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<sup>11</sup> The Anglican shrine which has become a pilgrimage centre in Walsingham, Norfolk, following the revival of a medieval pilgrimage tradition.

a nail preserved at Walsingham which, according to legend, was used at Christ's crucifixion. Additionally Jane Hunt retained a vivid memory from childhood, when she was five years old and lived with her family at Ripley in Derbyshire. "In my bedroom there was (a view towards) a stained glass window....(in) the chapel facing... I could see he was in a cradle with Mary rocking him....all the cows and the sheep was in this stained glass window....Jesus was in there, and I could see him every night before I went to sleep."

### **Personal response to wounds**

Jane Hunt, when interviewed, was unequivocal in her understanding that her stigmata were a spiritual gift. Initially, she admitted to being very reluctant to show her marks to anyone other than her family and priest. She wore gloves when in public and coats with long sleeves to cover her hands. Later she came to believe that she had a healing ministry. While willing to put her experience on public record she insisted that she did not wish to become a public spectacle.

### **Church, witness and society's response to wounds**

The Church of England congregation at Codnor in 1985 was typical and traditional. A stigmatic in its midst was greeted by some members with enthusiasm and by others with a caution amounting to hostility. Over the two years of her active stigmatisation, Jane Hunt pursued a healing ministry and services were held in Codnor church during which Jane Hunt, dressed in white with a veil, administered the laying-on of hands. Father Hill stressed that the healing should take place within the context of established and authorised anglican practice. Cures were reported,<sup>12</sup> but no independent verification of these reports is available. "People do not come to me, they come to God. I pray that the Lord will use me as his instrument....I am not worthy to do this so he

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<sup>12</sup> A first hand account from one member of the congregation that his hearing had been restored did not lend itself to medical verification. Father Hill's claim that he had a leg ulcer healed was reinforced by Jane Hunt, but there is no independent verification that the healing was anything other than a natural one which coincided with Jane's administrations.



empties me of myself, then we swap roles. Christ I feel him filling me. I feel his spirit come through me and then I turn to the people and heal them but I am not really totally aware of what I am doing because Christ moves me....I feel like a light, electricity, a force, a power coming though and these people say that they....get warm....It is very emotional."

That Jane Hunt became the focus of a healing ministry was viewed with suspicion by some members of the Codnor congregation who refused to attend her services despite the fact that they were kept closely within the bounds of the accepted anglican healing ministry.<sup>13</sup> The support given to Jane Hunt by Father Hill was important to her because it implied a validation of her gifts and thereby her whole experience. She felt enabled to explore her ministry with church approval. Father Hill valued his relationship with Jane Hunt in that he was undergoing a test of faith at the time which was eventually to lead him away from the anglican tradition to that of the Orthodox. Her stigmatisation was of mutual encouragement. However no explicit encouragement was given to Jane Hunt by Mr Wyatt following Father Hill's departure<sup>14</sup> from the parish: as a new incumbent he was mindful of not provoking division within his congregation by appearing to take sides in a controversial matter. Matters were resolved for him and the parish by Jane Hunt herself. Her reported mystical experiences peaked and declined and, sensing potential conflict, she stepped back from all but occasional involvement in church affairs. Following the transmission of the television programme about her stigmata in October 1986 she received a substantial volume of correspondence from members of the public wanting to be healed, to be included in her prayers and to have souvenirs of her stigmata. These were counterbalanced by overtly negative responses from a number of members of her congregation and community. In particular her daughter endured considerable school bullying which distressed the family considerably. Also, members of her own extended family expressed scepticism

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<sup>13</sup> The services took the form of 'the laying on of hands' with Jane Hunt being veiled and dressed in white.

<sup>14</sup> The use of Mr and Father reflects the preferences of the two priests.



and, in one case, direct hostility. Jane Hunt's husband remained loyal and supportive throughout, although he admitted to being confused by the experiences his wife reported and their physical manifestations.

### **Wider Ministry and perceived purpose**

Jane Hunt's impact on the outside world was, in the long term, limited. She dealt conscientiously with the letters she attracted. After 1986 this correspondence declined in volume. Today she receives only occasional requests for prayer. Codnor is no longer the centre of curiosity as the home of a stigmatic and Jane Hunt now requests that no photographs or videos of her be taken for publication. Her wish, expressed to the author at the time of her stigmatisation, has largely been fulfilled. "I must always remember that God has given me something in order that I may give it all back to Him in others, so I beg that I will be left alone to give Him my offering in the way God has appointed me."

## Chapter Six: George Hamilton

George Hamilton came to the attention of the author in 1988 when his general practitioner wrote to say that he had a patient who would be willing to help with investigations being made into stigmata. George Hamilton's stigmatisation was described by his doctor as "this problem".<sup>1</sup> Arrangements were made for George Hamilton and the author to meet at a neutral venue, namely the general practitioner's surgery. An interview was recorded but not published in any form at George Hamilton's request. Over a period of five years the author and George Hamilton remained in contact with a further three meetings being held, the third of which was at George Hamilton's home. At each meeting, in addition to further verbal evidence being taken, George Hamilton's wounds were examined. In 1993 he agreed to his case being made public and he was interviewed for a television documentary<sup>2</sup>. A second, as yet unbroadcast, television interview with George Hamilton was recorded on Good Friday 1996. In addition to evidence drawn from the interviews, the author has had access, with permission, to George Hamilton's medical records. Oral evidence has been taken both from his general practitioner and his diocesan bishop<sup>3</sup>.

### Biography and Background

George Hamilton was born in 1947, one of the younger of seven children raised by his mother and stepfather in a low-income family in Glasgow. He attended, what he describes, as a special school. It appears this was not following behavioural problems, but due to educational difficulties. George Hamilton was unable to elaborate. He is literate and numerate and appears to be a man of average intelligence, although he has received no more than a basic education. He has read widely, especially popular devotional books, yet of late his ability to concentrate on reading has diminished.

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<sup>1</sup> Letter from Dr John Spence to author 1988

<sup>2</sup> Broadcast at Easter 1994 in the ITV documentary series *Network First* (produced by Granada Television).

<sup>3</sup> Bishop John Mone, Roman Catholic Bishop of Paisley appointed 1988.

Health problems may have been a factor in the decision to withdraw him from mainstream education. As outlined below, at that time he was following a medically-prescribed diet. He left school at 15 and took various unskilled jobs in the local steel industry. His subsequent employment included a period as gardener at a Roman Catholic convent. At the time of his meeting with the author he was unemployed and has not been in employment since. His only income derives from social security benefits. His home is a ground-floor flat in a public housing development to the north of the city of Glasgow. His common-law wife died in 1995. They had no children and for nine years, from the time of his stigmatisation, George Hamilton said, he had lived the life of a celibate. Since his partner's death, he has lived a reclusive life, tending twelve cats and frequently neglecting himself. His consumption of alcohol has risen to a level which has caused his general practitioner concern. He admits that time spent in prayer and meditation has reduced.

### **Congregation and Community**

George Hamilton was raised a Roman Catholic and has retained his faith. His parish church is a short walk from his home but he does not attend mass there, or at any other church, on a regular basis. He now spends most of his time alone, venturing out only when necessity demands, shunning social contact, believing that he is viewed by his neighbourhood as a curiosity. He is a lay-member of a Franciscan Order. His family roots are Glasgow working-class, and although from his mother he takes a loyalty to the Catholic traditions of the sub-culture,<sup>4</sup> his forbears include Protestants. The estate on which he lives is one of the most deprived in the city with a high level of unemployment and social problems. The scale of deprivation is evidenced by the state of the doctors' surgery which was boarded-up following repeated break-ins by drug-users. Within the Catholic community of Glasgow the church as an institution remains an influential body and is much involved in education, but over the course of George

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<sup>4</sup> Conflict within the sub-culture is defined along quasi-tribal lines as in Northern Ireland, but violence is normally restricted to conflict between supporters of the Glasgow Rangers and Celtic football teams.

Hamilton's life there has been a steady decline in church attendance. However around the time of his stigmatisation there had been a general renewal of interest in Britain in certain aspects of catholicism which conflicted with the liberalisation and reforming tendencies of the post-Vatican II church. These aspects included an increased interest in the Turin Shroud and, since Pope John Paul II's visit to Glasgow in 1982, increased concentration on certain aspects of Marian devotion. When asked if he had ever in his youth contemplated training for the priesthood, George Hamilton's reply indicated that whatever vocation he might have felt, ordination was never an option as he ruled himself out on grounds of social class and lack of academic ability. His reply was one of several indications of low self-esteem.

### **Medical history**

George Hamilton's medical records have revealed a history of eating and digestive disorders dating from a childhood diagnosis of coeliac disease at the age of eight.<sup>5</sup> Notes from 1966 make first mention of *anorexia nervosa* as a possible explanation for persistent weight loss. His records indicate that George Hamilton required no medical attention from the age of 19 to 33, but since 1983 he appears to have reported a variety of problems including epigastric pain and vomiting. While his symptoms of coeliac disease did not persist from 1983, his weight-loss did. In 1984 he was referred for psychiatric assessment as a range of non-specific complaints persisted including poor sleep-patterns, poor concentration, depression and tremors. The assessment was inconclusive. There followed another fallow period in his medical history until 1989 when his notes report suspected laxative abuse. His weight loss caused sufficient concern in 1990 for George Hamilton to be admitted to hospital for observations and it was noted that weight was gained when he was fed intravenously. Since that time his weight has continued its gradual decline. He has reported that he is unable to eat and finds he exhibits symptoms of nausea, vomiting, raised temperature and loss of

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<sup>5</sup> A diet restricting his intake of gluten products was advised.

consciousness should he attempt to swallow food. Drinking fluids do not however present him with the same difficulties. By 1996 he weighed under 7 stone, which, although he is a slightly built man of approximately 5ft 8ins in height, is well below his ideal weight. He is maintained, in his basic nutritional requirements, by a liquid feed. This is pumped directly to his stomach via a nasal-gastro tube. He administers this treatment himself at home, but admits to doing so inconsistently and less frequently than prescribed. The tube however remains in position on a permanent basis, only being removed when changed for reasons of hygiene. It is a conspicuous feature of his facial appearance and George Hamilton believes it attracts unwelcome attention and curiosity to him when he is in a public place.

### **First stigmatisation**

George Hamilton's marks first appeared shortly before Lent in 1986 and his accounts of his stigmatisation have been inconsistent. In one version of the story he recounts how he initially became aware of the marks when he awoke one morning to find blood on his hands. He thought at first that the blood had come from a nose bleed but quickly noted that the source of the bleeding were marks on his hands. Another account includes the elaboration that pain and marks had been felt and observed first at a time when he was undertaking some repair work in his house. There were no witnesses. When pressed to reconcile his accounts George Hamilton breaks down in tears. His knowledge of stigmatisation may be traced to his interest in St Francis. He was aware of the story of Padre Pio at the time of his own experience.

### **Shape form and progress of marks**

From 1986 to 1995 George Hamilton's upper hands bled regularly from surface lesions (around one inch in diameter) with small marks occasionally emerging on the palms of his hands. Shortly after the initial stigmatisation, marks also appeared on the upper parts of both feet and he has reported pain on the soles when walking. At various times he has also received marks, as of scourging, on his back; a wound in his right side; and

bruising on one shoulder, as if he has been carrying a heavy object. He has reported pin-prick wounds on his forehead corresponding to the wounds of a crown of thorns. On one occasion when his face appeared to be smeared with lines of blood he allowed himself to be photographed by a press photographer. He reports persistent pain in his hands and feet. However when last examined by the author the marks were inactive. It should be noted that on the occasion of the last examination George Hamilton was unprepared for a visit. His upper hands were however covered with a dressing which appeared from its soiled and worn state to have been there some time.

### **Claims for associated mystical phenomena**

George Hamilton has reported having visions, both blissful and diabolic. He also describes undergoing an experience of ecstatic disorientation when receiving the host at mass, so much so that he is embarrassed to attend when the church is full since, he believes, to onlookers, it may appear as if he is drunk or drugged. In his visions he reports experiences as if he has entered another world where he has seen Jesus and his mother Mary. His diabolic visions have alarmed him greatly. On one occasion he described how he had heard mocking voices from a cassette tape which he believed only contained music. The tape was not however available for examination having been handed to a priest for examination and not returned. George Hamilton also believes that he has witnessed poltergeist activity of diabolic origin when an object in his house was propelled across a room. He was especially distraught when relating one particular vision, one which he has said he frequently experiences, during which he sees himself as a figure suffering on a cross.

### **Familiar iconography**

Around the time of his stigmatisation George Hamilton says that he was reading a book on the Turin Shroud. The shroud image, in addition to displaying the wounds of crucifixion, is also said to show, on the back of the supposed image of Christ, evidence

of his scourging. George Hamilton has been aware since his childhood of all the popular Catholic images of the passion.

### **Personal response to wounds**

“Sometimes I think of them as a curse.” George Hamilton is frequently tearful and distressed when asked to talk about his wounds. At home, he keeps his hands covered with bandages and when he ventures out, which he does increasingly rarely, he wears mittens. He is concerned that he attracts hostile responses and wishes to be left alone by the world. In his words, “I don’t want to become a circus piece”. Yet, at the time of his television and press appearances in 1994, he felt he had increased in standing in the world. There is an inherent contradiction in his response to the wounds, since he is both fearful of the rejection which might result from being too conspicuous and yet is lifted in self-esteem by the attention. For the first seven years as a stigmatic George Hamilton spent much of his day in prayer asking, he says, of God an explanation for his unwelcome condition. Since the death of his partner, that prayer-life has been largely eclipsed by his grief and long periods of depression which he spends in bed or watching television.

### **Church, witness and society's response to wounds**

At the time of his initial stigmatisation George Hamilton received, by his account, a hostile reaction from the church. His parish priest being absent, George Hamilton showed the marks to a curate. In George Hamilton’s words, “I did not have a name for it <sup>6</sup> at the time but had a rough idea what it was. I went rushing off to the church. I just took off the mitts that I was wearing and asked the curate what it was. He went into a state of shock”. The curate told him, as George Hamilton recalls, that he was not obliged to “believe in that sort of thing” and instructed him to take medical advice. On a later date George Hamilton took the opportunity of a parish visit by Bishop John Mone

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<sup>6</sup> his stigmatisation.

of Paisley Diocese, to approach him after a service and show him his wounded hands. Bishop Mone reacted cautiously but sympathetically. He said nothing to suggest the church could approve or validate George Hamilton's experience. Nevertheless he advised him to explore the means whereby through prayer and deeds he could turn the experience to good and he put him in touch with a spiritual adviser.<sup>7</sup> The adviser remained in irregular contact with George Hamilton for a number of years offering him counselling and support on an *ad hoc* basis. Reactions to his wounds from people outside the church have in some instances been openly hostile and following the showing of his wounds on television, at one family gathering he was physically assaulted. Neighbours and acquaintances, he said, were more tolerant than his family and some had asked that he would demonstrate healing powers. Interest, he related, turned to resentment, if he refused requests to exhibit the supernatural healing gifts he was believed to possess. George Hamilton feels that since his stigmatisation became publicly acknowledged he has received greater respect from the community, although most local people, especially those at his local church, also treat him with a degree of wariness.

### **Wider ministry and perceived purpose**

No form of organised ministry has been undertaken by or on behalf of George Hamilton. He is left as a recluse. Indirectly, his experience, when it is reported in the media, as it is from time to time, helps sustain an acknowledgement of the possible existence of the supernatural. He has also attracted international media interest. Until his bereavement and depression George Hamilton occasionally had visits from people who were seriously seeking his help as a healer. He always advised they seek medical advice first, but was happy to pray with them and allow them to touch his wounds. He once felt that this might eventually be his calling although, in an apparent contradiction, he has frequently talked of only expecting to live for a short time to come.

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<sup>7</sup> The man selected was a religious, a member of a local Franciscan community, who regrettably died before a meeting could be arranged with him by the author. No replacement adviser was subsequently suggested by the church.



## Chapter Seven: Revd James Bruse

Events at the Roman Catholic church of Saint Elizabeth Ann Seton at Lake Ridge, Virginia, USA, were widely reported in the regional, national and international press in March 1992 and came to the attention of the author. The priest, Revd James Bruse,<sup>1</sup> who was at the centre of claims of stigmatisation and other paranormal events, was contacted by the author by telephone in May that year and subsequently visited on three occasions. A sound-taped interview was made with Father Bruse. Members of the congregation gave additional information and the objects at the centre of the paranormal claims were examined but were not available for further independent testing. Statements were taken from the senior priest at the church, Father Daniel Hamilton and local media reporters. Research was undertaken at the Library of Congress in Washington and copies of contemporary press accounts taken. Access to local television news-footage was granted.<sup>2</sup> The diocese of Arlington was approached for comment but declined the invitation, simply reissuing statements prepared for the press. By the time of the third visit to Father Bruse, in 1993, the diocese had instructed him to make no further statement on any matter pertaining to the events surrounding his stigmatisation.

### Biography and Background

James Bruse was born in 1955. He was the son of a tea salesman and raised as a Roman Catholic by his mother at the family home in Marlow Heights, Maryland. His father was a Presbyterian by birth and tolerated his wife's devout catholicism without encouraging it. Jim Bruse was described as "a solid but unexceptional pupil of the parochial school, an altar boy and trumpet player in the High School Band... He completed College in 1976 and soon thereafter, in his only diversion from and otherwise unremarkable youth, entered a series of roller-coaster riding

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<sup>1</sup> Known to his congregation as Father Jim Bruse.

<sup>2</sup> Washington DC Channel Five and WUSA -TV Channel Nine.

competitions<sup>3</sup>".<sup>4</sup> He read psychology and sociology at Mary Washington College and was ordained in 1984 following a five-year preparation at seminary, where he graduated with a Master's Degree in Theology. He has been in his position as an assistant priest at St Elizabeth Ann Seton's church since 1990. In outward appearance Father Bruse presents an unconventional image, a point noted by the press which noted his Cuban-heeled boots, his conspicuous, jewelled ring, "upswept hair, moustache and taste for cola and pizza with green peppers".<sup>5</sup>

### **Congregation and Community**

Lake Ridge is an affluent dormitory suburb of Washington DC. The average age of the population is 30 and young families predominate. The main source of employment is the US government, particularly the Pentagon. The Catholic parish church has experienced a history of problems in providing consistent pastoral care to its congregation. Two assistant priests in the four years preceding Father Bruse's appointment left the church unexpectedly<sup>6</sup>. At the time of Father Bruse's appointment, morale was low in the parish and this was reflected in declining congregations and income. The situation of the Lake Ridge parish should be viewed however within the wider context as perceived by Father Bruce. He believed that for the Roman Catholic church in the USA, the early 1990s was a period of renewal. He said that there was amongst members a renewed fascination in the supernatural elements of faith. This, he claimed, was a reaction against the lax morality of the clergy, in a manner reminiscent of popular reaction against the carnal excesses of medieval clergy.<sup>7</sup> The renewed interest in the supernatural took a number of forms and in the examples he gave the author, Father Bruse included claims of apparitions of Mary in Arizona and Colorado; a

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<sup>3</sup> Earning a mention in The Guinness Book of Records for a five day ride.

<sup>4</sup> *US News and World Report*, March 29 1993.

<sup>5</sup> *US News and World Report* March 29 1993.

<sup>6</sup> The first leaving the priesthood to live with a married member of the congregation.

<sup>7</sup> This is a summary of Bruse's perception of events which he acknowledged were his own impressions.

weeping icon in Texas; a statue changing colour in New Jersey; and another religious statue weeping in Florida.

### **Medical history**

Father Bruse has had a relatively untroubled medical history, reporting few problems other than a pollen allergy which affected his ears and which has been successfully treated. On the instructions of the diocese, Father Bruse's wounds were examined by two medical practitioners who reported that they could find no medical problem to report.

### **First stigmatisation**

The stigmatisation of Father Bruse is linked with a series of events in which statues in his presence were seen to weep and change colour. On December 26th 1991 he noticed, as he later described, bleeding from marks in his wrist followed by pains in his feet as he walked. The commencement of the bleeding was not independently witnessed. He also described sharp pains similar to electric shocks when he touched one of the statues. That evening, according to his account, he noticed his feet were bleeding and that blood was emerging from his right side. Prior to his stigmatisation Father Bruse knew of the phenomena, although, he claimed, his knowledge was only superficial. After his stigmatisation he asked the senior parish priest, Father Daniel Hamilton, for further information.

### **Shape form and progress of marks**

The marks continued to seep blood after the first stigmatisation and, Father Bruse maintains, cause him pain through into 1992, ceasing on June 24th of that year. Bleeding was especially heavy on Maundy Thursday. Describing an episode of bleeding, Father Bruse talked of it being preceded by sharp pains. These he said might occur at any time and wherever he might be. The first pains would be in the wrists. These would subside and be followed by similar pains in the feet and then the side. The

blood from the wounds he noted was light red in colour. The stigmata, as seen by the author, appeared on Father Bruse as small livid raised protuberances on the upper-side of his wrists with corresponding red marks on the under-side.

### **Claims for associated mystical phenomena**

The principal mystical phenomena associated with the stigmatisation of Father Bruse were those involving the statues in his presence. The first incident occurred on Thanksgiving Day 1991, prior to his stigmatisation, when a statue which Father Bruse had brought home as a gift for his parents, appeared to weep. Four other statues in the house apparently exhibited the same manifestations during the visit. "It always seemed to happen when Father Jim came into the room".<sup>8</sup> Subsequently statues began to weep at the church and Father Daniel Hamilton could find no explanation. During an interview with his Bishop,<sup>9</sup> one newspaper reported that a twelve-inch tall statuette of Our Lady of Fatima belonging to Father Bruse, and a statuette of Mary belonging to the Bishop, both appeared to produce tears.<sup>10</sup> "The wildest thing that happened," Father Bruse claimed, "concerned a small statue of our Lady of Fatima. I blessed it one day during confession and the colour started moving on it. There was colour, a tint already on the statue but the colour started to move and we brought the statue up to the front of the church and 200 who were downstairs, playing bingo, came up and they could see it for themselves. That was 200 people who witnessed it and it was dramatic. For about 50 minutes it was adding colours and subtracting colours. The colours were moving and rotating on the statue. There was, I'm quite sure, no light shining on the statue. We had the regular church lights on but these colours in the statue were blue, green, pink, orange, yellow and kept rotating around. The light in the church didn't have that effect." Interviews with members of the congregation produced no confirmation of this account although many reported witnessing the weeping. Local

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<sup>8</sup> *US News and World Report* March 29 1993.

<sup>9</sup> Bishop John Keating, Roman Catholic Bishop of Arlington Diocese.

<sup>10</sup> *US News and World Report* March 29 1993.

media reports described one incident when Father Bruse held an impromptu press conference in his office at the church.

"Uh, see that one's crying now,' he says. 'The one on the bookcase.'

"Okay, yeah, Father Jimbo, let's just get on with the interview.

"That one over there,' he says quietly, pointing to a foot high statue of the Blessed Mother.

"It's an optical trick. They've rigged the lighting in here.'

"No, go ahead, go over and look at it,' he says with a kind of small weariness.

'You can pick it up. Go ahead, taste it with your finger. Turn it around, look under it,' he says.

"There are four people in this room. The door is closed. There are at least half a dozen statues of Mary in here and also color enlargements on the walls of zoo animals, the kind weekend photo buffs make. The four people present are a priest and three journalists. The print reporter is the first to put his pencil down and approach the bookcase. It's about seven feet away.

"Then a reporter from Channel 5. And then her T-shirted cameraman. There's something entirely new in his demeanour.

"The statue, which has a halo and seems to be made of plaster, is on a fake wood bookcase. There are no visible wires. No battery-operated tear ducts like a religious Chatty Cathy with a hole in her back where you put in the size C's. This statue seems actually to be producing water. The water, from what the naked eye can tell, is forming at the corner of the right eye. But the eye is very small and so it is hard to know for sure.

"The Washington Post reporter is standing maybe four inches from the Blessed Mother's nose. There's gotta be a trick here. It's as if the water is just appearing right out of the plaster and then rolling downward.

"A bead forms under the alabaster pink chin. It swells. BLOP, it falls. There are four tiny puddles of water at the statue's base now. Proof positive you can be seeing something and still not believe you're seeing it."<sup>11</sup>

When the author inspected the statues in the same room on a later date there was no evidence of weeping. It should be noted that the visit on that occasion was unannounced. Father Bruse also reported states of heightened religious awareness during periods of stigmatic bleeding and an incident when he claimed that he watched the flow of the blood from his wrist wounds appeared to defy gravity. "The blood was draining to the side. I held my hand down, but the blood would not go down. It continued to flow to the side. It appeared to sparkle and I could smell roses from it." He described the sensations of heightened religious awareness as a union with Christ. "I could see Calvary with my soul and feel the intense pain being suffered by Christ. But along with the pain was a beautiful sensation and a sound, a serene sound. It was the sound of nature. And I was feeling and touching colours. I felt very serene."

### **Familiar iconography**

The marks in the wrists of Father Bruse coincided in position with those on a wooden crucifix prominently displayed in the parish church. He was familiar with the standard images and iconography of the Roman Catholic church.

### **Personal response to wounds**

Prior to his stigmatisation Father Bruse described his ministry as "stale". He had, like many priests, "fallen into a routine. Even saying mass had become stale". He had doubts as to the wisdom or validity of his vocation. The events of 1991-92 "smashed through all this like a dramatic supernatural breakthrough into reality. I do not know why this happened to me but I look around and wonder whether there is some link with

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<sup>11</sup> *Washington Post*, 9 March 1992.

the other things happening. Definitely Christ is saying that he wants his people to return to him. He is saying 'I am real and Mary is there to intercede'. That is why it is her statues and images which have been activated."

### **Church, witness and society's response to wounds**

The impact on the church of St Elizabeth Ann Seton of the news of its assistant priest's stigmatisation and other phenomena was immediate. The first Sunday 3000 people converged on the church and police were called to control the crowds. Many people had come from surrounding Catholic congregations carrying their own statues to be blessed. In the religious enthusiasm of the event many sick people came looking for miraculous healing and Father Bruse blessed each one. Rumours of other allegedly supernatural events emerged over the following weeks.<sup>12</sup> Father Hamilton did not contradict his junior priest in the claims he was making, but he declared himself to be normally sceptical in such matters. He is a man with twenty years' experience as a priest behind him, who until his colleague's experience had maintained a faith which had never depended on "signs and wonders. But I have now seen Jim Bruse. I know what I see and I'm not given to visions. I have seen his wrists bleed. Once the blood was all over the carpet in the rectory. I doubted it all at the beginning. Are you crazy? Holy smoke! Guy who works for me....walks into my office, goes on about the whole thing. That he's got statues that are crying and so forth, that he has this funny bleeding. And I am sitting here, right at this same desk, looking at him, listening to him, and I'm saying to myself is he talking and I'm listening to all this crap, 'hey, buddy, if you think what you're telling me is true, I'm not going to have you as my assistant much longer. You're whacko.' And then, like I say I saw some of this stuff he'd been talking about. It's true. That's all I can tell you. It's true."<sup>13</sup>

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<sup>12</sup> These included reports of a "spinning sun" similar to the reputed phenomenon at Fatima and a claim that an 8 year-old girl had been cured of juvenile scoliosis.

<sup>13</sup> *Washington Post*, March 9 1992

A statement was issued by the Diocese of Arlington media office pointing out that the church did not pass judgement on purely physical phenomena, "but only on purported meaning, message or significance that may be associated with the events. In this particular case there is no determined message attached...As always...the church recommends great caution in forming judgements". Since the events of 1992, congregations at St Elizabeth Ann Seton have returned to normal levels. However the financial position of the church has improved and morale has been raised and the enthusiasm and funds became available for work to start on a new enlarged church building on the site.

#### **Wider ministry and perceived purpose**

The events surrounding Father Bruse at Lake Ridge were seen by him as fitting in with the wider series of reports of the preternatural in the nation at the time. "I feel sorry for the priests in the places where these sorts of things happen. They'll get hit by a deluge of interest. We're having that just now. Waves of people and on some days, ordinary week days, there are 400 people for mass, where normally eight might have shown up before all this happened. These are visitors coming from all over the world. They fly in either to see the statue or just to get a blessing and they're happy with that. It's amazing. It blows your mind when you see it. It's all so beautiful, it's done wonders. Some people say that it's all from Satan, and say that I am the devil, and I say how can this be when so many people are being converted, coming back to Christ through these events. There are people being healed physically and spiritually. What I see is all positive."





## Chapter Eight: Heather Woods

In March 1993, the author was contacted by Bishop Eric Eades of The Holy Celtic Church in Lincoln who told him that a member of his congregation, a deacon named Heather Woods, was carrying the stigmata. Within a week of receiving the communication a meeting was arranged for an initial interview with both the stigmatic and her spiritual mentor. Subsequently, on Good Friday 1993, the author spent a second day with Heather Woods, on that occasion accompanied by a video-cameraman. Over the following seven months, until Heather's death in November 1993, the author stayed in regular contact by telephone and letter. Two further visits were made to Lincoln to interview Heather Woods about the continuing developments in her experience. In addition oral evidence was taken from Bishop Eades and members of his congregation. Written statements were received from Heather's general practitioner and the coroner who examined the circumstances of her death. Further corroborative material was gathered independently by John and Anne Spencer and later published.<sup>1</sup>

### Biography and background

Heather Woods was born in 1949 in Lincoln. She was the third of five girls, the eldest daughter died of cancer at the age of three before Heather's birth. Her father was a sales representative. As an adult Heather Woods expressed the view that she doubted the legality of some of his business. Her childhood was unsettled. The family moved house frequently, often at very short notice and to the detriment of her education. Heather Woods and her sisters were taken into local authority care as a result of her mother's psychiatric and criminal history and frequently absconded from homes and foster parents. Her mother was imprisoned for drug offences when Heather Woods was 14 years-old and later committed suicide. Her father and mother had separated after her father had been involved in a series of extra-marital affairs. It would be accurate to

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<sup>1</sup> John and Anne Spencer *Spirit Within Her*, (London: Boxtree 1994).

describe Heather Woods, during much of her early life up until the age of 18, as a seriously disturbed child. Adding to her family problems Heather Woods, in later life, described how she had been raped at the age of seven and had witnessed a sister being raped. When she was sixteen her father remarried. It was at that age that a series of events led to Heather Woods and a sister fleeing from local authority care to London and afterwards, to summarise Heather's recollection, escaping from police custody and finding shelter in a women's hostel.

The first settled period of her life began when, at the age of 18, she lodged with an elderly gentleman she knew as 'Pop'. She met Ray Woods, the man who was to become her husband, in 1969 and the marriage lasted until his death in 1982. Heather Woods had two children. Her son has mild learning difficulties. At the time of her father's death, Heather's daughter rejected her mother and chose to stay with foster parents. She was not reconciled with her mother until shortly before Heather's death. Heather Woods was a widow with a dependant son and an estranged daughter when, at the age of 43, she received the stigmata.

### **Congregation and Community**

Heather Woods was not a regular churchgoer until 1985 when she joined a Methodist congregation in Lincoln. In 1988 she was introduced to Eric Eades, a priest, and later bishop within a small independent worshipping community styled The Holy Celtic Church. A room at Eric Eades' home was arranged as a place of worship and dedicated to St Gregory Palamas. Heather Woods became increasingly involved in the activities of the church and in 1992 was ordained deacon by Bishop Eades. The Lincolnshire worshipping community numbered around twenty and the church itself claimed descent from the indigenous pre-Augustinian<sup>2</sup> British church. Eric Eades believed his episcopate was validated by apostolic succession through the Catholics of Utrecht<sup>3</sup> and

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<sup>2</sup> Augustine of Canterbury

<sup>3</sup> Who broke with Rome in 1742

the Ancient British Church<sup>4</sup>. Although to all outward appearances the worshipping community appeared to be within the Catholic tradition, theologically it was out of step with mainstream catholicism embracing certain Pelagian ideas on the margins of Catholic orthodoxy. However a strain of Eastern Orthodoxy had been inherited through the Syrian connection, which makes Heather's stigmatisation unique, in that previously no one from the Eastern Orthodox tradition had claimed the wounds. However, the idiosyncrasies of Bishop Eades' approach were such that it would be wrong to read too great a significance into the Orthodox connection. The Lincolnshire congregation was very supportive of and excited by Heather's stigmatisation which gave the congregation a status denied it by other churches in the area. Bishop Eades had been disappointed by repeated rejections when he applied to become involved in local ecumenical fraternities and much angered by a local newspaper report which described him as a "self-styled" bishop.

### **Medical history**

At the age of 15 Heather Woods underwent major surgery for the first time, having complained of severe pain in her legs. A complicated bone-graft procedure was carried out. During her life she underwent eight major and three minor surgical procedures, including a radical hysterectomy. Her medical history includes Crohn's disease, resulting in an ileostomy, and impaired renal function. Yet the post-mortem examination revealed no evidence of cancer or other underlying chronic or progressive medical condition. There was no evidence of stigmata on her body when examined following her death<sup>5</sup>. In the last years of her life, Heather Woods received regular prescriptions for morphine. Her medical record inevitably raises the possibility of Münchhausen's Syndrome, a rare obsession with disease in which patients become exceedingly skilled at convincing medical practitioners that they exhibit symptoms which do not in fact exist in order to be admitted to hospital. There they undergo

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<sup>4</sup> A Church of England clergyman, Revd RW Morgan set up the church in 1874 and was consecrated bishop, taking the name of Pelagius, by an emissary of the Syrian Orthodox Bishop of Emesa.

<sup>5</sup> Statement by Dr Nigel Chapman, coroner, in a letter written to John Spencer 25 March 1994.

intensive, often invasive treatment during which they are the centre of intense medical attention.<sup>6</sup>

### **First stigmatisation**

On May 4 1992, Heather Woods recounted noticing a blister in the palm of her right hand. This had been preceded by an itching in the palm. The next day, a similar blister appeared on the back of the same hand. On May 6, she described receiving a vision of Christ's baptism. The following day she noticed similar markings on her left hand and that evening she described a second vision, this time of Christ's crucifixion. She confided in Eric Eades who immediately confirmed to her his belief that she had been chosen for stigmatisation.<sup>7</sup> Eric Eades asked Heather Woods to monitor her feet and inform him should similar markings appear. Within a few days she said, similar itching occurred and marks followed and after the lapse of a further short period, a U-shaped mark on the skin under the ribs on Heather Woods' right side became evident. The stigmatisation of her feet was described in this way by Heather Woods. She was seated with her son when she said that she felt a strange sensation around her feet as if ants were running over them; she looked down and saw small areas of discoloured skin which over time began to bleed. From Heather Woods' account it would appear that her son Lindsay only noticed events as his mother drew his attention to them. It did not prove possible to interview him without his mother being present. In these circumstances it would be unsafe to state that he witnessed the entire process of an initial or primary stigmatisation.

The extent of Heather Woods' knowledge of stigmata prior to her own experiences was minimal, except that Eric Eades was certainly familiar with the phenomena and kept a

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<sup>6</sup> The condition was named in 1951 by Richard Asher of the Central Middlesex Hospital after the fictional, but notorious, 18th century character and habitual liar, Baron Karl Münchhausen.

<sup>7</sup> In an interview recorded shortly before his death in 1994 Eric Eades recalls discussing Heather's visions and saying 'do not be surprised if you receive the stigmata'.

picture of Padre Pio at his house and it is probable that he introduced the subject to Heather Woods prior to her own stigmatisation.

### **Shape form and progress of marks**

Heather Woods' stigmatisation occurred in two episodes. The first lasted twenty-one weeks from May 1992. Heather Woods had informed Eric Eades that she had received a prophecy that at the end of 21 weeks she would be transfigured. The exact nature of the transfiguration was not stipulated in advance. In the event she believed it took the form of a rapid recovery from an illness, after which she received a further stigmatisation in the form of a cross on her forehead. Following that climax the marks faded.

The second episode occurred in 1994. She claimed to have been forewarned that she would be marked 18 days before Easter and that an important event would transpire on Good Friday. The marks were observed over two non-consecutive days by the author. The stigmata appeared as round, livid and seeping purpura on both hands and feet, approximately one inch in diameter. The mark on her side was approximately four inches long and curved into a flattened U-shape. The marks on the hands and feet resembled the skin discolouration which might be associated with a burn or a scald. Her general practitioner, Dr SK Bhanja, described the marks he and the Dermatology Department Lincoln Hospital had examined as "spontaneous lesions of hands, feet and side" for which he could offer "no medical explanation for their appearance".<sup>8</sup>

On various occasions in the author's presence Heather Woods made a circular motion with an index finger around her marks which produced additional seepage. On Good Friday she was observed touching her forehead and drawing her finger down it in a frequent and nervous manner. On Easter Sunday Heather Woods attended her church

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<sup>8</sup> Open letter written for Heather Woods to share at her discretion dated 2 March 1993.

with a distinct red cross on her forehead. The marks rapidly faded from that day. "The wounds of Christ's crucifixion will be no more. In fact there are no marks or scars at all. They have completely healed".<sup>9</sup>

### **Claims for associated mystical phenomena**

Heather Woods' stigmata were associated with compulsive writing which could occur at any time, but normally did so when she was alone at night. She believed she was a channel for writing on behalf of various historical figures.<sup>10</sup> She left behind, at her death, a series of messages and prophecies amounting to over 50,000 words. She wrote them with her left, non-preferred hand and the hand-writing appears on examination to be in a number of different styles. It is clear and legible and suggests that she was ambidextrous. Her normal conscious hand, written with her right hand, was neat, clear and rounded. In one example of her channelled<sup>11</sup> writing, directed at and sent to the author following an episode of such writing at 2.15am on April 2nd 1993, the style takes a distinctly angular form as if mimicking a High German Gothic script, but without the disciplined elaborations of the style. Her channelled writing came in at least five different forms.

Heather Woods also reported visions: of the crucifixion in which she appeared to be on a cross; of Christ's baptism; and of the last supper. Following one of the visions Eric Eades reports seeing her wearing a Palestinian garment and having in her possession a phial of herbs. He described the two objects as having been brought back by Heather Woods from the time of Christ, saying that he believed Heather Woods, at the time, to have been a reincarnation of Mary Magdalene. Neither Eric Eades nor Heather Woods were able to produce the garment or phials as evidence. In addition to writing she drew a series of mono-tone pictures of her visions including one of Christ showing him

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<sup>9</sup> Letter to author 16.4.93, but dated 92.

<sup>10</sup> Including Benedict Spinoza and Kahlil Gibran.

<sup>11</sup> Also known as automatic or spirit-writing.

nailed to a post rather than a cross, with both hands together. Heather Woods claimed no artistic talent and examination by the author of faint line indentations on the paper on which the original drawings had been made suggested to him that they might have been traced. No source illustrations corresponding to the drawings were located.<sup>12</sup> For 20 years prior to her stigmatisation, Heather Woods claimed to have been subject to a number of instances of clairvoyance or premonitions of death.

### **Familiar Iconography**

Heather Woods had, as far as can be determined, no special devotion to any particular religious image, but was familiar with representations of crucifixion and the passion from the Catholic tradition. Despite its claimed links with the Orthodox church, at the chapel of the Holy Celtic Church in Eric Eades' home Catholic, rather than Orthodox, iconography predominated. On Good Friday 1993, a small picture of Padre Pio was noticed by the author on the wall to the north of the altar.

### **Personal response to wounds**

Heather Woods saw her stigmatisation as a personal reward from God to compensate her for an unhappy childhood and an adult life of physical suffering. She believed that the stigmata confirmed in her a gift of healing. "To me the healing is more of a miracle than the stigmata, although I know the marks are absolutely miraculous. The stigmata and the writings were given to show that God is a living God working now in our midst. I am a blessing to others, to people who are in need spiritually. I am cutting a pathway for their spiritual growth."<sup>13</sup> Heather Woods also believed that her stigmata had a prophetic purpose in drawing attention to the evils of the ecological desecration of "Mother Earth".

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<sup>12</sup> It was however not possible to undertake a complete and systematic examination of Eric Eades' and Heather Woods' modest library of religious books.

<sup>13</sup> Interview given to John Spencer.

### **Church, witness and society's response to wounds**

The response to Heather's stigmatisation within her own small church was enthusiastic and through Eric Eades she was both encouraged to interpret her experiences as being of divine origin and to display her wounds to a wider world. Eric Eades had chosen Heather Woods as his successor as pastor to his congregation and her stigmatisation confirmed, in his mind, that his choice was divinely approved and that he could leave his congregation in good hands. He was suffering from terminal cancer at the time of her stigmatisation and died at the end of her second episode of stigmatisation.<sup>14</sup> It could well be argued that he encouraged Heather Woods in her declared mystical experiences as a means by which his ministry, outside the mainstream as it was, could be acknowledged by the wider church and appear to have been granted direct divine validation. The response of the wider community in Lincoln was mixed. Heather Woods was dismissed from a part-time voluntary post at a local primary school following public revelation of her experiences. A number of friends broke off contacts with her and she described several events which she interpreted as "local people crossing the road to avoid contact" with her. To compensate, she gained a national reputation as a mystic and received correspondence from strangers requesting prayers and healing.

### **Wider ministry and perceived purpose**

Heather Woods' period of stigmatisation was too brief for any organised following to develop. Until it was exposed to a wide audience through the media during the second episode, it had been an experience known only to Heather Woods, her general practitioner, a consultant dermatologist, Eric Eades and a closed group of church members. Eric Eades took care to record each claim made by Heather Woods and test each in order to provide evidence of their supernatural nature. A number of examples exist of Eric Eades' approach, each of which can be demonstrated to be flawed in their

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<sup>14</sup> May 19th 1993.



objectivity. On one occasion she requested a copy of *The Prophet* by Gibran. This Eric Eades bought. She asked him not to open it, but held her left hand over the volume prior to receiving paragraphs of channelled writing. Heather Woods described how her channelled writings from Gibran would predict the pages in Eric Eades' unwrapped and unopened volume on which certain illustrations would appear. He cross-checked ten details which proved to be accurate. This and other 'proofs' of the supernatural satisfied Eric Eades. However the account needs to be viewed with some caution. The description of events was given by Heather<sup>15</sup> and is now, following Eric Eades' and her own death, no longer verifiable. Also, a sceptic would argue, that as Heather Woods had been forewarned that Eric Eades was to bring her the book, one which she had herself requested, and that as she had devised the test, the subsequent display of supernatural ability was unconvincing. Nevertheless, Eric Eades was glad to take these 'proofs' as evidence that the mystical occurrences claimed by Heather Woods were supernatural and consequently had a wider divine purpose. The nature of this purpose was never specified, but was assumed by Heather Woods to lie in the revelations of her channelled writings with their messages concerning the ecological destruction of the planet. Eric Eades never doubted that a supernatural element was involved in his deacon's gifts. He was aware that he had only weeks to live, and in those pressing circumstances, appeared to the author to be eager to find tangible proof, through the stigmatic in his congregation, of the reality of his faith and the validity of his orders. Both Eric Eades and Heather Woods spent long periods of time as hospital in-patients. Anne Spencer<sup>16</sup> co-related the dates and noted that when one was in hospital, the other was not. At no time did their periods in hospital coincide. One was always available to visit and minister to the other. From this she concluded that the two had developed an interdependence, with Eric Eades requiring Heather Woods' ministry and Heather Woods' requiring that of her spiritual adviser. One implication which might be drawn from this is that one of the two, probably Heather Woods, was able to choose when to

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<sup>15</sup> Evidence given to John and Anne Spencer.

<sup>16</sup> Unpublished information shared with author.

present with a condition serious enough to require hospitalisation. Whatever lay behind Heather Woods' stigmatisation, it appeared to the author from his conversations with Eric Eades, that the bishop approached death with serenity and that he interpreted his deacon's stigmata as an earthly sign of God's favour towards him and his ministry.

## Chapter Eight: Christina Gallagher

Christina Gallagher<sup>1</sup> has been the subject of media interest in The Republic of Ireland since the early 1990s when her reported visions became public knowledge. The author, aware of various newspaper and magazine articles<sup>2</sup> made contact with Christina Gallagher in October 1993 through Father Gerard McGinnity her spiritual adviser. Two visits were made to Our Lady's House at Achill Island, County Mayo and interviews were recorded with Christina Gallagher on two separate days. On the second occasion the interviews were filmed and statements taken from other members of the religious community and from Father McGinnity. Published transcripts<sup>3</sup> of Christina Gallagher's accounts of her visions were also available for reference, as were newspaper and magazine articles.

### Biography and background

Christina Gallagher was born in 1953 in rural County Mayo, Ireland. She married at the age of 18 and had two children, now adults. She received little formal education and was illiterate at the age of 14 years. She took employment in domestic service and went to considerable lengths to disguise her educational defects. However she still speaks of, and appears to be troubled, by one moment of considerable embarrassment when her employer discovered her inability to read.

In 1985, drawn by curiosity to Cairn's grotto in County Sligo, then a popular site of pilgrimage following reports of religious apparitions, Christina Gallagher herself reported seeing a vision of the suffering Christ on the Cross. From being an occasional communicant as an adult, Christina Gallagher then returned to daily mass and to regular

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<sup>1</sup> Also referred to in some early accounts as Christine.

<sup>2</sup> Reproduced in specialist low-circulation Catholic newsletters purchased through the Padre Pio centre at Victoria in London.

<sup>3</sup> Published as *Please come back to me and my Son* and edited by R Vincent (Westmeath, Eire: Ireland's Eye Publications 1992).

recitation of the Rosary, culminating in 1988 in a series of claimed mystical experiences which profoundly altered the course of her life.

### **Congregation and Community**

Christina Gallagher is a cradle Catholic, born into a society where the institutions of the Roman Catholic church hold considerable power. In rural Eire the church largely controls education and interpretations of moral issues pertaining to the law. However over the last 30 years the church has seen a gradual erosion of its influence with, for instance, its teaching on contraception and abortion being questioned by political groups working to a secular agenda. The same period has also seen a gradual reduction in regular attendance at mass and in vocations to the priesthood.<sup>4</sup> Nevertheless there has continued to be interest in alleged supernatural events which have attracted considerable popular devotion. In some instances the popular enthusiasm has been such that the church has had to take over the supervision of devotion to the claims. In other cases the enthusiasm has been of an ephemeral nature and the church has simply observed from a distance.<sup>5</sup> Unlike Italy and other Catholic Mediterranean countries, Ireland has no tradition of stigmatics. Arguably this is attributable to the Marian bias in popular devotion rooted in the celtic and pre-christian traditions. This hypothesis is not however explored further here. Of late however Irish folk-catholicism has become increasingly aware of being part of an international movement and Christina Gallagher's supporters connect her visions with some 200 to 300 visions of Mary reported worldwide since Fatima in 1917.<sup>6</sup> Thus there is an eschatological dimension to the current climate of devotion to Mary and popular eagerness for signs and wonders. Christina Gallagher may be seen as a product of a blend of Irish folk-faith

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<sup>4</sup> *UK Christian Handbook 1994/95* p26 Table C shows a fall in the number of priests in Ireland from 1980 to 1990 from 3,751 to 3,384 a decline of 9.8%.

<sup>5</sup> An example of the former would be the 19th century apparitions of the Holy Family at Knock, and an example of the latter would be the sightings of the moving statue in the wayside grotto at Ballinspittle in 1985.

<sup>6</sup> The apparitions of Mary at Fatima in Portugal which imparted supposedly portentous warnings and messages the third of which, it is claimed, was so apocalyptic that it has not been made public. Other recent examples of visions and apparitions include the Marian visions at Medjugorje from which has grown an international movement with one of the visionaries travelling the world having renewed visions in the presence of huge crowds of devotees.

and international Catholic popular mysticism. A tabloid newspaper referred to "believers" claiming Christina Gallagher's stigmatisation "proved" her to be a saint.<sup>7</sup>

### **Medical history**

Christina Gallagher described her early life as containing "health problems" but does not specify. Depression appeared to have been an element but this cannot be confirmed. Her description of how she became literate with remarkable rapidity may be of importance in understanding her state of mind. She has described how, at the age of 14, she asked Jesus in prayer for two favours. The first, that her mother, then in a coma, might recover and the second, that she might be able to read and write. She had at the time a great fear, amounting to a phobia, of books and papers. Both favours, she claims, were granted. The second occurred spontaneously when one day she took a newspaper and suddenly discovered she could read it and similarly, taking a pen in her hand, found herself able to write.

### **First stigmatisation**

Christina Gallagher's stigmatisation is not the central feature of her religious experience as she views it. The first physical signs of her experiences as a visionary occurred in 1990, five years after her first vision of the suffering Christ and two years after the commencement of her regular visitations from Mary, during which, she claims, messages for the world have been relayed through her. The marks took shape slowly and she recorded her observations in letters to her spiritual director over a period of several weeks. The relevant observations are quoted in chronological order. "I could see very clearly with the eyes of my soul Our Holy Mother as Queen of the Universe...I had the pains in my bones. I then thought I saw a red mark on both my insteps like nail tracks and sunk down.....my right foot pained me... A vein in my ankle became like it was going to burst."<sup>8</sup>

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<sup>7</sup> *News of the World* June 2nd 1996.

<sup>8</sup> Vincent p 97. In their published form the letters are, in general, not dated.

"I thank God and our Holy Mother for my cross. It has awakened a deep desire in me to suffer with love and joy for souls.....The little mark on the palm of my hand is like a spot now, though at times it gets very red. That too I desire - just pain and not the mark. The pain in my hand is great and that in my head. I have been asked twice if I would accept the cross. I said 'yes'....At times it feels as if I am on the cross....the pain gets greater in my hands and feet and the burning heat is in the sole of my right foot....Father, last night the inner suffering went on for a time. Then it went away to be replaced by a pain around the hairline." A description was given by a sister at the House of Prayer of Christina Gallagher apparently in great pain. Christina Gallagher was observed clutching her head and moaning the words, "the crown of thorns," repeatedly.<sup>9</sup> During the period of her gradual stigmatisation, Christina Gallagher reported being in receipt of regular visions. Before her own stigmatisation Christina Gallagher knew of the phenomenon and was familiar with the cases of Padre Pio, St Francis, Teresa Higginson and her contemporary visionary and stigmatic, Julia Kim from Korea.

### **Shape form and progress of marks**

Since 1990 Christina Gallagher has reported being in pain from her wounds almost continually. She has said that she experiences pain 90% of the time, with the agony receding only when the stigmata become active. On the visit to the House of Prayer made by the author in 1994, the marks did not bleed. They presented as small areas of scarring on her wrists. However three weeks later, shortly before Holy Week, she telephoned the author to say that marks on her forehead had become active and video-tape evidence was taken.<sup>10</sup> The tape shows a line of pin-marks corresponding to the wounds of a crown of thorns exhibiting below the hairline. In March 1995, following an all-night vigil at The House of Prayer, and again on Good Friday, Christina

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<sup>9</sup> Evidence taken by author.

<sup>10</sup> Hi-8 footage was taken by John Piper of Granada Television who returned to Achill for the purpose following the telephone call.

Gallagher's visible stigmata re-activated after a dormant period with marks appearing in her feet.

### **Claims for associated mystical phenomena**

Christina Gallagher's mystical life revolves around her visions which she describes as frequent and vivid. They are both visions of good and evil, with mental taunts from Satan requiring, she says, particular strength to counteract. These are experiences personal to her. Onlookers have reported her appearing to succumb to long periods of ecstatic inaction and fierce sessions of unbearable pain. Both Christina Gallagher and members of the community at Achill describe a perfumed perspiration which emanates from her. Additionally Christina Gallagher described being aware of her guardian angel, saints from history and modern saintly people, including Padre Pio. Her first apparition of Mary took place in January 1988 when she was visiting a relative in Dublin and discussing religious matters with him. "I found myself looking at a beautiful lady, in mid-air a bit above the floor....The light seemed to come from her....when she held out her hands the first time, there was a glass globe in them and it seemed as if there was smoke in it, swirling around....she began to fade and as soon as she was gone, the tears and the peace! I turned to the person with whom I had been speaking, who was crying and asked, 'did you see her?' and he said, 'I didn't see her, but I felt.'" Messages received from her visions now run to thousands of words and are essentially of a warning nature. In one vision she has described being taken to Hell to see "the abyss of sin" to relay her impressions, she said, to the living. "As far as I could look there was fire. And somehow I could see though it....and there were bodies in it, as if in a sea, swimming in this fire."

### **Familiar iconography**

From childhood, Christina Gallagher has been aware of the range of devotional iconography popular in Ireland which includes Marian imagery, representations of the

passion, the Stations of the Cross and the exposed Sacred Heart of Christ. She is also a believer in the inspirational properties of the Holy Shroud of Turin and devoted to the image displayed on it of the suffering Christ, an image which shows the wrists and not the palms to have been the point of insertion of the nails of crucifixion.

### **Personal response to wounds**

Christina Gallagher has talked frequently of a great joy associated with being allowed to suffer with Christ. She has said that she is glad to suffer through her visions, torments and stigmatisation for the sins of the world, as one chosen to share in the passion of Christ. She is inevitably no longer a simple Mayo housewife, but the focus of curiosity at the House of Prayer which she was instrumental in founding following instructions she has said she received during a vision of Mary. In 1994, when visited by the author, she divided her life between her appearances at the community and her more normal life at home with her husband. At the community where she wears the simple brown dress of a religious, she receives visitors, in particular priests, and is found at the centre of devotion and prayer. Visitors, referred to as pilgrims in the literature of the community, are enrolled at the House of Prayer in the brown scapular<sup>11</sup>. Pilgrims are also encouraged to purchase and wear the matrix medal, the design of which was given to Christina Gallagher in the course of one of her many visions.<sup>12</sup>

She describes herself as a chosen "victim soul". To illustrate this concept she recounts a vision of Christ who asked her for water. "But how am I to give you water?" she asked. Jesus replied to her, "you are like a grape, ripe. When you are crushed, that juice refreshes me. I am thirsty for souls." Christina Gallagher also sets aside time for

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<sup>11</sup> The wearing of the scapular is associated in certain Roman Catholic traditions with affiliation to a religious order or those on a pilgrimage. It is a short cloak covering the shoulders and worn under normal clothing. Pilgrims are told at the community that the brown scapular is Our Lady's garment and wearing it brings her protection.

<sup>12</sup> It shows, on the obverse, a figure kneeling at the foot of an empty cross and on the reverse, the overlapping weeping hearts of Jesus and Mary.



concentrated fasting and prayer when she believes she suffers on behalf of the damned thus saving them from Hell.

She has also, it has been reported,<sup>13</sup> offered to undergo physical crucifixion to achieve the same purpose.

### **Church, witness and society's response to wounds**

The Roman Catholic church in Ireland has granted a guarded acceptance to Christina Gallagher's claims. It could be argued that it had little option, such is the popular interest in her claims and numbers of individual priests turning to her for unofficial guidance. She is believed to have powers of discernment in many matters and priests turn to her for guidance. Around the House of Prayer at Achill<sup>14</sup> a renewed devotion to the Rosary has developed. Nothing said by Christina Gallagher or anyone on her behalf contradicts mainstream Catholic devotional practice or teaching. The rota of daily prayer follows a familiar Catholic pattern to include the recitation of the rosary, the angelus, mass and the adoration of the blessed sacrament. Outside Ireland Christina Gallagher has been granted meetings with other leading contemporary foci of Catholic spirituality.<sup>15</sup> However in 1996, concerned at the level of popular interest in Christina Gallagher and the growing tension between The House of Prayer and the local Achill Island parish priest and congregation, an investigation was initiated by the church at archdiocesan level. No curb on the activities of Christina Gallagher, or her supporters, has been suggested to this date, however a Commission of three members has been instructed to investigate affairs and report back to the present Archbishop of Tuam, Rt Rev Michael Neary. The Commission, charged with investigating both the financial affairs of The House of Prayer and reports that a personality cult has been developing around Christina Gallagher, will be mindful of the Irish Cardinal's current warning to

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<sup>13</sup> *News of the World* June 2 1996.

<sup>14</sup> Officially dedicated to Our Lady Queen of Peace by Archbishop Joseph Cassidy former Archbishop of Tuam.

<sup>15</sup> Notably Mother Teresa of Calcutta.

the Irish people against a "proliferation of alleged visions, apparitions and messages" with the approach of the millennium.<sup>16</sup> The Commission's task will be complicated by the division of opinion found within the local community. While the local church has grave reservations, traders and shop-keepers have welcomed the influx of business which the pilgrims bring to the island.

### **Wider ministry and perceived purpose**

The purpose lying behind her visions and stigmatisation is clear to Christina Gallagher. She is the intercessor between Mary and Ireland chosen to appeal to her native land to return to traditional devotion. Coupled with this is a strong call for the church's teaching on abortion to be heeded by a secular society and an implied reprimand to the ordained members of the church who have allowed traditional teachings to be superseded by more liberal practices. She warns of an imminent chastisement of the world, probably associated with the millenium, if there is not wholesale repentance. For Christina Gallagher her stigmata, relatively inconspicuous as they are to the third-party witness, are but an added validation of her calling and proof of her apocalyptic prophecies.

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<sup>16</sup> Cardinal Cahil Daly, reported in the *Daily Telegraph* June 18th 1996.

## **Chapter Ten: three further contemporary cases**

Three further contemporary cases can be added to the six already cited. The first involves a British male, the second an American female and the third an American ten year-old girl. The stigmatisation involving the man is not included as a primary case-study because it did not involve bleeding, long-term scarring or repetition of experience. However it was a symbolic stigmatisation of profound religious significance to the recipient and conclusions of wider relevance can be drawn from the event. The event took place in 1980 and involved an actor and male model from Harrow named George Rutland.

### **George Rutland**

George Rutland was an evangelical christian at the time of his experience which may be best described as a quasi-stigmatisation. At the time, he explained, he was approaching the end of his "personal religious pilgrimage". He had joined a Baptist congregation and his wife had declared herself a christian, immediately reporting a significant improvement in her health.

George Rutland described himself as being susceptible to interpreting natural events as signs and mentioned the inspiration he had received when a flash of sunlight unexpectedly illuminated his mother's funeral. The moment of his stigmata experience, he described, as the moment he knew his pilgrimage seeking christian certainty had been accomplished.

This is his account of the events which occurred during worship at a Baptist church near his home. "I looked up at the wooden cross and it was just as if someone had plugged it in. The whole thing seemed to become electrified. And as I looked up, beams of light seemed to shoot out and come straight at me and envelop me. It got stronger and stronger. It was an amazing brightness and for one very tiny flash I could

see a whole vision of Christ just hanging on this cross. The light stayed and kept me enveloped. I do not know how long it went on for, but when it eased and gradually the beams went back into the cross and behind it, I realised everyone was standing up to sing a hymn."

As he reached for his hymn book he reported that he noticed a small circular stain in the middle of his left palm. Looking to his right hand he describes noticing an identical mark. Both areas of discolouration were the size of a five pence piece<sup>1</sup>. The stain consisted of a substance which was the dark colour of coagulated blood and somewhere between a liquid and powder in consistency. "I was baffled, then suddenly had a strange realization that it might be the marks of the cross."

There was no pain, no breaking of skin or marking of tissue as George Rutland reported events. On one other occasion he describes receiving the same vision, but without the accompanying marking of his hands.

### **Maurice Roseley**

The second case is not included as a primary example for study in this context because the evidence has been drawn entirely from correspondence and a telephone interview, and not from direct examination of the evidence. Maurice Roseley is approximately 60 years of age and was brought up a Roman Catholic, but is now no longer a practising member of any church. She lives in Sun Valley, California and was stigmatised in April 1995, in the week following Easter. She had returned from a multi-faith pilgrimage to temples and holy sites in Brazil which she had undertaken with a group which she described as being on a quest for spiritual enlightenment. She has written<sup>2</sup> of her stigmatisation as a painful spontaneous manifestation which bled and oozed and lasted three months. She showed her marks to members of her travel group who were much

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<sup>1</sup> At the time of the interview in 1980 a five pence piece was the same size as the old shilling coin.

<sup>2</sup> Letter to author May 1996.

excited by their appearance. Maurice Roseley showed the marks to her eldest son<sup>3</sup> who immediately noticed, by her account, that the wounds were precisely positioned according to the crucifix on the back of his bedroom door. Prior to the stigmatisation, Maurice Roseley reported receiving a vision in the course of practising I-ching<sup>4</sup>. "I felt tired and went to lie on my bed. It was one in the afternoon, not a time when I usually rest. My eyes were closed, but I was not asleep, when I saw through my closed eyes to the sky and a cloud in the sky. From the cloud there came a ladder and a women descended. She was dressed in purple and had a radiance to her. She was not a young woman, but had grey hair. She came to me and kissed me and then returned up the ladder from where she come."

Following Maurice Roseley's stigmatisation she first showed the wounds to her medical practitioner who prescribed dermatological cream. It had no effect. "I had an inner knowing of what it was, but being human I doubted my thoughts". Subsequently she visited a medium who gave the opinion that she had, as she had suspected, the wounds of Christ's crucifixion.

Maurice Roseley has described her childhood as a normal one. "I have suffered no trauma whatsoever and by no means would I want to have suffered the way Jesus did. I do not have psychological problems and most of all I do not seek attention from others, because I am a very private person."<sup>5</sup> On questioning however, she made mention of her divorce and it emerged that she had undergone major heart surgery. Her stigmata, she said, gave her a deep knowledge, "an understanding and remembering of the teachings of Jesus Christ". She quoted the words of the medium she had consulted: "We all come into this physical destiny with our own cross to bear. During our journey through life we all have obstacles to move and hurdles to jump. You have learned how

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<sup>3</sup> She is divorced and has five children.

<sup>4</sup> The ancient system of Chinese divination based on the concept of the unified and cyclical universe.

<sup>5</sup> Letter to author May 1996.

to do this so therefore you have removed yourself from your cross".<sup>6</sup> The manifestation of stigmata, Maurice Roseley described as "a symbology of my union with the Christ consciousness".

Maurice Roseley's Roman Catholic upbringing, fused with a Californian New Age perspective, is encapsulated in her summation of her own view of her destiny. "We are all divine being, co-creators with God, the source of all life for eternity. My understanding of eternity is that there is no end. There is always growth and evolution going on in our being. I only jumped the physical one. Now on to the next.....There was a time in our own history when scientists and physicists both came to the conclusion that human beings were nothing more than matter....that nothing could top the speed of light....that we were the only inhabitants of the entire universe. Now the time has come for them to rid themselves of their archaic belief systems....we are made up of an energy force....thought is faster than light and....by no means are we the only inhabitants of the universe".<sup>7</sup>

The final quotation will emerge as especially relevant to later sections of the thesis when stigmatisation in other contexts is examined, notably that of a belief in alien visitation. It will also be shown that an examination of the new age movement and modern neo-pagan revival is relevant to the discussion of the emergence of the first stigmatics in medieval times during a period of fusion between pre-Christian folk faith and Roman Catholicism.

### **Cloretta Robinson**

The third case, researched from a published medical paper supplemented by telephone interviews,<sup>8</sup> and outlined here, involves an Afro-American child from West Oakland,

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<sup>6</sup> *ibid.*

<sup>7</sup> *ibid.*

<sup>8</sup> Source material, Loretta Early and Joseph Lifschutz, *Stigmata Archive of General Psychiatry* Vol 30 pp198-202. Feb 74 and telephone interview with subject's mother and Dr Early.

California. Cloretta Robinson was only ten years-old when it was observed, in March 1972, that she was bleeding from the palm of her left hand. At the time she was sitting in her school classroom. Subsequently she became intermittently stigmatised in her hands, feet and forehead over a period of nineteen days up to and including Good Friday that year. She bled from the hands more frequently than from the other sites. "Numerous instances of blood appearing on all sites were observed by her schoolteachers, the school nurse, her physician and other hospital staff."<sup>9</sup>

Cloretta Robinson's imagery and inspiration seem to have been drawn from her reading material during period of about a week before her experience. This had caused her to ponder and brood on the circumstances and nature of the crucifixion. Four days prior to the bleeding, she had been watching a television film on the crucifixion to which she reacted very emotionally. This was followed, as she recounted her experience to her mother, by a vivid dream centred upon the crucifixion.

Cloretta Robinson reported to the paediatrician who examined her<sup>10</sup> that she was totally unaware of the start of the initial bleeding. She said she experienced no pain or emotional change. Her past medical history was deemed by the paediatrician to be non-contributory. At the time she was in excellent health and her family had no history of prolonged bleeding, easy bruising or psychiatric disorder. At the first medical examination conducted by Dr Early, dried blood was found on her left palm, bleeding having occurred some ten minutes earlier. When the blood was washed away there were no lesions visible. Even when the bleeding sites were examined under a magnifying glass all that was seen was normal skin. Medical reports described her as "a pleasant, neatly and attractively groomed, pre-pubescent black girl, cheerful and friendly ....she was alert, well-orientated ....and her school work was low/average"<sup>11</sup>.

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<sup>9</sup> Early and Lifschutz p199.

<sup>10</sup> Dr Loretta Early, a paediatrician from the West Oakland Health Centre, California USA.

<sup>11</sup> Early and Lifschutz p198-199.

After her first medical examination, her left hand was bound and she returned to school. Within three hours, while in the classroom, her right palm began to bleed. On the sixth day of her experience there was bleeding from her left foot, a day later the right foot, a day after that there was bleeding from her right side and on the fourteenth day from the middle of her forehead. This was seven days before Easter Sunday. She was taking no medication. Bleeding from the palm of her hands occurred from two to six times daily.

Cloretta Robinson lived with her 46 year old mother who was a dental technician, her sixty-one year-old stepfather, her older sister and her four children and a brother. By all accounts the home of the lower-middle class family, although crowded and modest, was a happy place and the family were active attenders at a Baptist church near their home. The church was mildly fundamentalist and emphasised the positive aspects of christianity and good works, rather than placing an emphasis on hell, damnation and the wages of sin.

At a later interview, after the last episode of bleeding, it was revealed that Cloretta Robinson had claimed to have experienced auditory hallucinations. These began a few days before each episode of bleeding, usually at bed-time and during a brief prayer period. She heard the words, "Your prayers will be answered"<sup>12</sup>. Apart from her dreams, there were no visual hallucinations. Her dreams were frequently of biblical events and on one occasion, when asked to draw a meaningful picture, she drew a picture of Christ helping a sinner, which she elaborated with a brief story.

On Good Friday and Easter Sunday 1972, she also heard the same voices telling her to pray for certain people and that her prayers would have healing powers. The family in

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<sup>12</sup> With Dr Early after the last episode of bleeding.



general is very religious and family conversation frequently included references to biblical stories.

As an individual Cloretta Robinson did not appear to the psychiatrist who examined her to have had a hysterical personality. "She was not self-centred, heavily dramatic, flirtatious, impetuous, excitable or manifesting any neurotic symptoms. If anything she sustained a casual attitude towards her bleeding."<sup>13</sup> The psychiatrist concluded that the most striking psychological quality presented by Cloretta Robinson was her identification with the figure of Christ.

Several accounts were reported of her skin, which appeared to have no marks or lesions, oozing blood over a one to four minute time-span. On one occasion, while being observed by Dr Early, the blood on her hand appeared to increase in volume four-fold, "whirling up from the centre of the palm and spreading over the palmar creases. After wiping the wet blood away no lesions were present with the exception of a pea-sized bluish discolouration remaining in the palm of her left hand for three minutes."<sup>14</sup>

On Good Friday, the nineteenth day of bleeding, Cloretta Robinson reported bleeding from all sites simultaneously and said she felt as if it was then all over. From that day no further bleeding took place. She was watched by her family and by members of her church closely during the Easter season a year later and, except for an unsubstantiated report by one observer of some bleeding on a single occasion, there was no recurrence. She had no obvious symptoms of neurosis and the only significant history as background for the stigmata was her religiosity.

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<sup>13</sup> Early and Lifschutz p 199.

<sup>14</sup> *ibid.*

Drs Lifschutz and Early suggested that it was her auditory hallucinations which had to be taken seriously. Cloretta Robinson talked of voices telling her to go and pray with certain people. "She did so, believing that her prayers would have healing powers and in each case they did. It must be recalled that her family is very religious and that the child herself speaks in reverent terms about the life of Jesus and other biblical matters with which she is acquainted in detail."<sup>15</sup>

Drs Lifschutz and Early said the most striking psychological quality present was Cloretta Robinson's identification with the figure of Christ. "She was also preoccupied with Christ's suffering and saw her life as dedicated to relieve suffering in others."<sup>16</sup>

Cloretta Robinson never reported seeing any visions and the voices she heard were clear and gave a simple message that her prayers would be answered. As well as reading the Bible, she had also read the book "Crossroads" by John Webster. This religious book about the crucifixion, in addition to the television programme she had watched, made an impact on her when she read it a week before the bleeding began. She denied any knowledge of the phenomenon of stigmata before she herself experienced it. Yet having heard about it and experienced it first hand, she clearly identified herself with St Francis of Assisi. It is reported, that on one occasion, during her short period of stigmatisation, she was drawing pictures of St Francis and her left palm began to bleed.

For a time in 1972 she was very much the centre of local church and media attention and neither her mother or she appeared to resent this. Since then Cloretta Robinson has kept away from public view.

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<sup>15</sup> Early and Lifschutz p 200.

<sup>16</sup> *ibid.*

The case of Cloretta Robinson is extremely unusual in that she was so young when she received the marks and in that she was a Baptist and a black American.

Lifschutz and Early allowed themselves one area of speculation, which they stressed they had not investigated further. They wrote that self-induced trauma was almost humanly impossible to rule out absolutely and then, quoting Lord<sup>17</sup> they referred to several unconscious fantasies as playing a part. The two of relevance here are firstly, the desire to be non-sexual or Christ-like as a protection against incest as a saint cannot be sexually approached, and secondly, the desire not to menstruate. It is perhaps significant that Cloretta had briefly shown signs of starting menstruation eight months earlier, but the signs had ceased and secondly that she was in a family with a step-father, who was her mother's third husband, and may have experienced fears of incest. "Deeper investigations could very well reveal the kinds of libidinal conflicts described by Lord."<sup>18</sup>

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<sup>17</sup> Early and Lifschutz quoting RA Lord, *A Note on Stigmata*, *Am Imago* 14 1957 pp299-301.

<sup>18</sup> Early and Lifschutz p200.

## **Chapter Eleven: the formation and validation of stigmata and consistency of associated experiences.**

An understanding of the means whereby stigmatics receive, maintain and replicate their marks after periods of remission can be advanced from the pathology of the six cases central to this thesis. However the evidence drawn from the six contemporary cases does not, of itself, suggest one simple explanation for the physical manifestations. Instead it indicates that both psychosomatic and physical factors are involved, separately or together, and the interplay between these two factors influences, and probably determines, the progress and nature of the stigmatisation.

Previous work in this field has tended to assume that the physical and the psychosomatic provided alternative and mutually incompatible explanations. This assumption has coloured and limited previous investigations, both those carried out by envoys of the church to determine or rule out divine involvement and those undertaken by physicians and surgeons from a scientific viewpoint.

For at least 200 years members of the medical profession have had the opportunity to examine individual stigmatics. Very detailed examinations were made, in particular, of the cases of Domenica Lazzari, Therese Neumann, Louise Lateau, and Padre Pio. While these four stigmatics were Roman Catholics, members of the medical profession involved in these and other studies have not necessarily been Roman Catholics themselves and some of them have had no declared religious affiliation. The main purpose of the detailed work undertaken by physicians until the mid-20th century was to determine whether or not the stigmatics under review presented marks which were in any way invalid. Invalidity in this context was simply defined as self-mutilation or marking of the skin by a third party with or without intent to mislead. The study of

stigmata, believed Janet<sup>1</sup>, expressing the typical view of the interested scientific community of the time, required a fundamental verification of the fact that there had not been an injury of a traumatic type. Whether the doctors involved approached their work within the context of an authorised church investigation, or from the very different agenda of non-religious scepticism, they shared that common purpose and motivation.

The assumption by ecclesiastical investigators that any evidence of the physical inducement of stigmata instantly ruled out divine involvement is understandable. The view of St Thomas Aquinas prevailed, that a miracle (and stigmata were commonly viewed as miraculous), could be found in whatever God did "outside or beyond the order commonly determined or observed in nature"<sup>2</sup>. This was the understanding of the term miracle which was arrived at 700 years ago, coinciding with the start of the history of stigmatisation and the notion that St Francis had been the first person to be supernaturally stigmatised. From this perspective a stigmatic wounding him or herself would be interpreted as being an act within the natural order and correspondingly, any wound which appeared to arrive without human intervention would be viewed as potentially from God.

When investigators employed the techniques and philosophy of inquiry of the scientific age to test the same dichotomy, they also tended to limit the scope of their investigations, but for different reasons. By the scientific method they understood that observed events associated with stigmatisation, and from which their conclusions were to be drawn, needed to be capable of replication, or to be of such a nature as to occur along predictable lines. Limiting their enquiries to testing between the physical and the psychosomatic factors was thus sufficiently narrow a field of research to lend itself to the scientific method. Unique amongst the alleged physical manifestations of mystical phenomena, stigmata frequently, although not invariably, reactivate within a predictable

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<sup>1</sup> P Janet, *De l'angoisse à l'extase* Volume I, (Paris: Alcan 1926).

<sup>2</sup> RC Finucane, *Miracles and Pilgrims* (London: JM Dent 1977) p 52 quoting, Aquinas *Summa Theologica*.

cycle of activity and so it was generally agreed that the phenomena were suitable subjects for scientific investigation. The investigation of stigmata was also seen within the wider context of an investigation into the paranormal and it was hoped that conclusions drawn from uncomplicated hypotheses tested during predictable events might also apply to other mystical phenomena.

With stigmata defined as in Chapter Two, the self-imposed limitations of the medical practitioners and scientists of their studies of the marks is removed. It is thus open for a broader understanding of the nature of stigmata to be considered. However, with the element of predictability in relation to stigmatic activity being confirmed in two of the six modern cases studied, the author considered that the evidence of earlier investigations could, when assessed alongside other evidence and insights, be valuable material.

The two modern cases of relevance are those of Ethel Chapman and Heather Woods. Ethel Chapman's wounds, as outlined earlier, became especially active on Good Friday. The climax of her ecstatic vision of the passion occurred at 3pm to coincide with the reputed time of Christ's death on the cross. She was observed in this state regularly by her spiritual adviser and on one occasion by the author.

In the case of Heather Woods, her anticipated reactivation of her wounds was closely observed by the author on Good Friday 1993 over a period of seven hours, first at her home in Lincoln and then at her church, a chapel arranged in the front room of the home of her bishop. Blood from the wounds on her hands, feet and side were observed as predicted by Heather Woods and anticipated by the author, and video-recorded. During the Good Friday afternoon service of devotion Heather Woods appeared at one point to be in distress from pain. Predictability allows investigators to be in position to investigate phenomena more closely; it does not of itself provide authentication.

One of the most thorough medical examinations of repeated stigmata was made in the case of Louise Lateau whose wounds became activated on a regular basis every week on a Friday. In 1868 an experiment was undertaken with her cooperation, although not with that of her parents, by three physicians from the Belgian Royal Academy of Medicine in the presence by three other witnesses.

Louise Lateau's hands and feet were covered by the examiners in advance of the expected bleeding and remained covered until after the time of their anticipated reactivation. They were then uncovered and found to be blistered and bleeding in the expected manner. In 1875 a similar but more exacting observation was made in which her arm was covered in a glass cylinder. Again, bleeding occurred and observers concluded that it had been spontaneous.<sup>3</sup>

While similar observations were made in the case of later stigmatics, effectively, writes Ian Wilson, "these scientific tests on Louise Lateau went as far as any up to the present time. They indicate that in the case of Louise at least, something genuinely spontaneous and free from physical contrivance was responsible for her bleedings."<sup>4</sup>

Wilson was writing four years before one further experiment took place which substantiates the observation that marks, although not in this instance bleeding, can appear on the skin spontaneously without any physical intervention. The Italian stigmatic, Domenica Lo Bianco, receives a Holy Week and Eastertide stigmatisation of religious images which appear as raised red marks on her left arm. These images consist of a cross and a rosary and have been widely witnessed. Margnelli<sup>5</sup>, took the study of predictable stigmata to the next logical stage. Instead of waiting for the marks to exhibit as predicted, he hypothesized that, by recreating certain conditions, he could

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<sup>3</sup> M Didry, *Louise Lateau of Bois-d'Haine*, translated by Dom Francis Izard (Paris and Bruges: Desclée de Brouwer 1925).

<sup>4</sup> Wilson p 40.

<sup>5</sup> Dr Marco Margnelli is a physician and psychotherapist in private practice in Milan.

make the marks appear at a time when they were normally expected to be dormant. He opted to examine Domenica Lo Bianco in November 1992 when no traces of her stigmatisation from the previous Holy Week episode were visible. He interviewed her at length under careful laboratory conditions, reaching a point when he had induced in her a clear recollection of one of her Eastertide episodes of stigmatisation. At this stage Domenica Lo Bianco became distressed and Margnelli described and recorded how her state of consciousness appeared to change and it seemed as if she entered into a trance-like state. Over the period of the next hour the red marks of a cross and rosary reappeared on her arm. Margnelli and four witnesses observed the occurrence and the video evidence confirms that no external means were used to reproduce the stigmata.<sup>6</sup>

Undoubtedly some cases of stigmata, as confirmed by Margnelli and others, do appear without overt physical intervention. However, caution is advised in drawing general conclusions from this evidence. The anticipated corroboration can fail to materialise, as can be illustrated by an example drawn from one of the contemporary cases. On Good Friday 1996 George Hamilton was observed by the author and a video-recording was made at his home in Glasgow over a six hours period starting at 10.30 am. He produced no evidence of stigmatisation despite a previous history of Good Friday activity. As conclusions may also be drawn from the failure of predicted events to occur, this negative episode involving George Hamilton is not without significance. George was forewarned of the visit by letter two weeks earlier but had on the arrival of the author, appeared to have forgotten the arrangement. He appeared surprised by the visit and it took an hour to attract his attention and for him to open the door. On his arrival the author noted his hands were covered on the upper side by old dressings. When his hands and feet were examined no bleeding was evident and none was observed during the day.<sup>7</sup> The dressings were also blood free. During the visit he mostly talked of secular matters and drank fluid including alcohol. He did not eat. His

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<sup>6</sup> Private video evidence shown to the author together with photographs of the outcome of the experiment.

<sup>7</sup> In total six hours was spent with George Hamilton and at no time was he out of sight of the author.



mind was not that day on spiritual matters and throughout he retained a normal state of consciousness.

From this it could be inferred that as George Hamilton's wounds failed to show as predicted and did not develop when under continuous observation, his previous displays of wounds were suspect. If by suspect it is meant that the wounds were self-induced, that inference might contain some validity. On the other hand, his failure to produce wounds on that Good Friday might have been caused by his state of mind, a state in which he was apparently unable or unwilling to reach the altered state of consciousness required for a repeat episode of stigmatisation.

The proposition that markings of a non-religious kind have appeared on many people without any deliberate conscious physical intervention is now widely accepted. Indeed, that unspecific evidence of emotional stress can be exhibited on the skin of a subject has been generally accepted within medicine for many years. At the basic level, facial blushing is an example.<sup>8</sup> The medical literature also contains rare instances of highly specific lesions appearing through the intervention of the mind and recollection of trauma. In 1946 a case was described of a 35 year old man<sup>9</sup> who, while under close observation in hospital, had produced wounds on his arms corresponding to the rope marks he had received nine years earlier when being forcibly restrained. The marks were clear indentations which also bled. Dr Robert Moody, his medical practitioner, concluded that there was no way to describe what he had seen as other than a "genuine psychosomatic phenomenon".<sup>10</sup> When the marks had appeared the patient had appeared to be severely disturbed, re-living in his mind and in his actions the original experience which had caused the injuries. He had shortly before been given a narcotic drug.<sup>11</sup>

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<sup>8</sup> Other examples, though more complicated in their histology, are certain types of endogenous eczema.

<sup>9</sup> An army officer with a history of somnambulism and associated aggressive behaviour.

<sup>10</sup> Robert Moody, *Bodily Changes during Abreasion*, The Lancet of December 28th 1946 pp. 934-935.

<sup>11</sup> Evipan 8cc.

Moody reported three other cases where similar symptoms had occurred. In one case a man who had re-lived the experience of being buried in a building following a flying bomb explosion, reproduced the marks of the ankle and head injuries he had received at the time. It was reported that he was in acute pain for several hours during the episode of recreated trauma.

The expanded capabilities of the mind under hypnosis and the consequent effect on the body is well-observed and documented. To take scientific investigation further, a phenomenon must not only be examined under controlled and predictable circumstances to provide reliable data, when circumstances permit it needs to be capable of controlled replication. The experimental approach, when it comes to the human condition, is fraught with ethical difficulties. However there is certainly one case<sup>12</sup> of a German psychiatrist, Dr Alfred Lechler, suggesting to a hypnotised patient that she receive the marks, which she accordingly did. Dr Lechler's experiment was carried out in 1932 on an Austrian Lutheran aged 30 known as Elizabeth K. She was a seriously disturbed patient who was being treated by Dr Lechler and who was living at his home. Whatever the ethics of his decision to experiment he was able to induce in her visions of crucifixion very similar to those reported by stigmatics and one of the most dramatic parts of his experiment he described as follows.

"It was suggested to Elizabeth that a crown of thorns was put on her head and after an hour several red marks the size of a pea appeared on her forehead. In the middle of these marks red blood spots the size of pinheads appeared. During the following hours the blood spots increased and from several of them blood emerged. Some drops were large enough to roll down the forehead. During all that time Elizabeth complained of a headache and a sensation of pinpricks. The continuous observation of the proceedings

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<sup>12</sup> And possibly a second reported by B Inglis in *Natural and supernatural* (London: Hodder and Stoughton 1977) p 354, in which a Dr MH Biggs is said to have induced stigmata under hypnosis in a Californian woman in 1879. A week passed between the suggestion being made and the outcome being observed.

was done by me and the nurses. I myself could clearly see the emergence of the blood in several places."<sup>13</sup>

The Lechler case, despite the dubious ethics employed, has been widely quoted by students of stigmata. Those representing opposite points of view have employed the evidence either to suggest that a mechanism exists whereby spontaneous markings can appear which might be the means employed by God, or to suggest that stigmata only appear on suggestible and unbalanced women and the suggestions placed in their minds are entirely human in origin.

Thurston viewed the Lechler case with the caution it deserves. He pointed to what he believed was the most important fact of the case, namely that on Good Friday 1932 Elizabeth K had gone to the cinema to watch a film in which Christ's passion was realistically depicted. On returning home Dr Lechler saw that she had been very intensely affected and he noted that she complained of pain in her hands and feet. The idea then came to him of hypnotising the girl, as he frequently used hypnotism with her in his treatment. He gave to her the direct suggestion that she would like Christ have hands and feet pierced with nails. The suggestion had to be renewed more than once but it was ultimately successful, and Lechler produced photographs of both of the palms of the hands and the soles of the feet with the wounds. Subsequently, by further suggestion, he induced a condition in which tears of blood streamed freely from the eyes. This last suggestion was prompted by the publicity current at the time concerning the Bavarian stigmatic, Therese Neumann, who was reportedly able to shed tears of blood. At no time was the blood which emanated from Elizabeth K's eyes analysed and if her bleeding had followed the pattern of that studied by J Pizzuto, J Fernandes and J Gonzalez-Elaven<sup>14</sup> it might have been found that what appeared to be blood was in fact sweat which had been coloured by a pigment.

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<sup>13</sup> Alfred Lechler *Das Ratsel von Konnersreuth in Lichte eines neuer Falles von Stigmatisation* (Germany: Elberfeld 1933)

<sup>14</sup> J Pizzuto, J Fernandes and J Gonzalez-Elaven, *Gaceta Medica de Mexico* 103, 1972.

The suggestions that one stigmatic may mimic another, albeit through the suggestion of a third party, appears to be confirmed by Lechler's experiment. In his case Elizabeth K appeared to mimic Therese Neumann. In another case an Australian patient identified as Mrs H, oozed blood from her eyes.<sup>15</sup> Although he had no direct evidence, Whitlock stated that it was highly probable that his patient was also acquainted with the main facts of Therese Neumann's life. This evidence could be relevant if it is considered that stigmatics need an image or role model before producing their own marks. The phenomenon was not observed during Mrs H's visit to hospital but a local doctor and his wife gave a first hand account of her experiences. Mrs H claimed to have had visions of the Virgin Mary and sometimes of St Francis of Assisi. Independent observers were satisfied that the blood from her eyes did not originate from her conjunctivae, but oozed through the intact skin of her lower eyelid. When she was filmed in hospital during one of her Friday ecstasies, she showed all the usual outward signs of her experience, but oozing blood was not witnessed.

What is of prime significance in the Lechler case is that it is a claim of an observed instance of primary stigmatisation, ie: the first appearance of marks from previously unmarked skin, reportedly observed by a third party. Yet the facts that Elizabeth was already complaining of pain and that she was not under continuous observation over the entire period of several hours during which the experiment was conducted, seriously undermine the claim. Accounts suggest she retained no memory of being hypnotised and the marks did not appear until Easter Saturday morning, giving her plenty of time, in private, to have used physical means to realise the instructions of her doctor. Dr Lechler repeated the experiment in August 1932 after which he and nurses kept Elizabeth under close observation. They observed the stigmata become active.

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<sup>15</sup> FA Whitlock and JV Hynes *Psychological Magazine* 1978, 8. Mrs H was an Australian citizen, born in Poland in 1909, who had come to live in Brisbane in 1951. On May 23 1958 she claimed to have experienced a vision of the Virgin Mary who told her that she had to suffer for the sins of others. From that day onwards every Friday at 11am she passed into a trance state from which she could not be aroused. She described pains in her limbs, "as if somebody was twisting them" and her particular form of stigmatization was to weep tears stained with blood.

However on this occasion what was observed was not a primary stigmatisation but a reopening of the previous wounds. The doctor also suggested to her that she see visions of the crucifixion and she responded by appearing to act out scenes from the passion.

What the Lechler and Margnelli experiments demonstrate is that stigmatisation can be induced when a stigmatic is in an altered state of consciousness and where the stigmatic has a previous history of stigmatic activity. What remains elusive is the single instance of the primary stigmatisation being observed. As in the case of the patient of Moody and the reproduction of his rope-mark injuries, wounds which have previously existed can, in rare circumstances, be observed to become reactivated. The factor, or factors, which contribute towards the primary stigmatisation cannot, however, on the Lechler and Margnelli evidence be assumed to be of the same psychosomatic order as the reproduction of dormant or earlier wounds. Neither can it be concluded that because persuasive evidence exists of a psychosomatic element in the reproduction of stigmata and specific lesions of a non-religious kind, that in this an explanation exists which holds true in every case of stigmata. Comparing the case of Elizabeth K with that of Heather Woods a number of important parallels can be observed which suggest other factors may be involved over and above suggestibility leading to psychosomatic response: both women appeared to have experienced disturbed childhoods; to have been diagnosed as suffering from a variety of serious physical disorders; to have undergone multiple medical and surgical interventions; and to have displayed symptoms of depression. In Heather Woods' case, her stated belief that she had been invaded by extensive cancer was disproven at autopsy. In Lechler's reports of Elizabeth K's condition, he described her as feigning the symptoms of a hernia following a fall, and coughing blood, giving the appearance of having contracted tuberculosis, which subsequent tests proved negative. In the case of both women a *prima facie* diagnosis of Münchhausen's syndrome may be forwarded. Additionally both were under the

influence of a mentor, each of whom were keen for the stigmata to appear and whose reputations were enhanced by this happening.

The circumstantial evidence suggests in Heather Woods' case that, while a psychosomatic element may have been involved in her experience, or at least cannot be entirely discounted, there was also physical manipulation of her wounds to some degree. This is suggested by the author's direct observation of her during the Good Friday service of 1994 and the examination of the wound in her side which followed. At one point, near to the end of the service, tears appeared in her eyes and she sat down. Fifteen minutes later, after the service, she explained that at that precise moment she had felt a brief sharp pain in her side and a sense of mental desolation as she contemplated the passion. An examination of her side was made and it revealed evidence of bleeding. The immediate conclusion drawn by members of the congregation present, and implied by Heather, was that the bleeding had occurred at the moment of her pain. Further examination of the video-tape evidence however showed that the blood was dry and crusted. If bleeding had taken place only fifteen minutes earlier it would not have been in that condition, but would shown signs of being of recent origin. Two hours had passed since the state of her side had last been noted and her wound observed to be closed and inactive. During that two hour period Heather had not been not under constant observation. She had excused herself to change her clothes for the service when she had spent several minutes alone. She had had the opportunity to reopen the wound, although she was not witnessed doing so. A minor point should however be mentioned here. The claim has been made that the blood of stigmatics coagulates more rapidly than would normally be expected.<sup>16</sup> It is a claim to which the author does not attach credibility in that it is a single and unsubstantiated claim. Notwithstanding that point, given the similarities between Heather Woods and Elizabeth K, it is not unreasonable to suggest that while the psychosomatic may have been a factor in

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<sup>16</sup> A claim made by Giorgio Bongiovanni in *The Cerealogist*, 14 1995.

her response to the hypnotic suggestion, she too might also have resorted to physical intervention. Like Heather Woods, on the first occasion of her induced stigmatisation, she also had the opportunity over-night to produce the desired stigmatic effect, as had the patient of Dr Briggs noted earlier in footnote 12.

In the case of Ethel Chapman, David Lockyer sat with her on a Good Friday on several occasions. He was able to confirm that she was in no position to aggravate her lesions to produce bleeding at the precise time at which it occurred. On a balance of probabilities the re-opening of her wounds was therefore more likely to have been subject to psychosomatic influences than that of Heather Woods. Given Heather Woods' reports of other events, in particular visions, it cannot be inferred that no non-physical factors were involved in her total experience. She was taking medically-prescribed morphine around the time of her periods of stigmatisation and it cannot be ruled out that her state of consciousness was altered by the drugs. An altered state of consciousness can be associated with can produce psychosomatic symptoms as shown earlier.

The question of the cause of the primary stigmatic wound remains. That the initial opening of a wound has never been satisfactorily witnessed by a third-party might seem unsurprising given the random nature of such a rare event, although it needs to be borne in mind that many members of religious communities who have been stigmatised lived lives, where for much of the time, they lived in close proximity to brother or sister members of their order. Uniquely, Padre Pio's stigmatisation might have been witnessed except that he dismissed the potential witness from his presence shortly before the event. "I was hearing the boy's confession....I was suddenly terrorized by the sight of a celestial person who presented himself in my mind's eye. He had in his hand a weapon like a very long sharp-pointed steel blade which seemed to emit fire....I saw that person hurl the weapon into my soul....I cried out with difficulty....I asked



the boy to leave....This agony lasted uninterruptedly until the morning....from that day I have been mortally wounded."<sup>17</sup>

The stories told of the primary stigmatisation of many stigmatics have evolved into legends of visions and spontaneous woundings. However, the direct evidence suggests that in each case there has been a gradual build-up to a climax, and the moment of visible stigmatisation has been preceded by periods during which pain or other sensations have been reported as being felt in the hands or feet. Prior to his stigmatisation at San Giovanni Rotondo, Padre Pio reportedly suffered the invisible stigmata and, "more than once noticed pinkish spots on the palms of his hands and very sharp pains in them.....the same was true of piercing pains in his side."<sup>18</sup>

Some of the contemporary stigmatics under study before their first stigmatisation, also experienced sensations in those areas of their bodies which were about to be stigmatised. Jane Hunt and Heather Woods described itching. They both confirmed being consciously aware of scratching the offending areas of skin. The transition from irritation and discomfort to pain and bleeding was not recalled. In the way that Heather Woods demonstrated to the author that her stigmata could be activated by her own manipulation of the area with her finger, it is not improbable that the scratching of the palms by Jane Hunt and Heather Woods contributed to the opening of wounds. However, additional factors are suggested in the case of Ethel Chapman. Her stigmatisation, in a hospital bed under medical supervision, makes it unlikely that, prior to her wounding, she was repetitively scratching an irritating or painful area of skin. If damage had accumulated on her skin from such action it is reasonable to assume it would have been noticed and acted upon by nursing staff. Additionally, in her evidence, no mention is made of specific pain or irritation in her hands. Ethel Chapman was, as noted earlier, at that stage in constant pain and her limbs subject to

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<sup>17</sup> *Letters of Padre Pio of Pietrelcina* Vol 1, (Foggia: Our Lady of Grace Capuchin Friary 1984). Letter to Padre Benedetto 21 August 1918 p1186.

<sup>18</sup> Statement by Padre Raffaele, Padre Pio's superior, San Giovanni Rotondo, Foggia 1966.



uncontrollable spasms, causing medical staff to weight her legs down by traction to prevent her knees jerking upwards so violently as to injure her in the face.<sup>19</sup>

Ethel Chapman's account of her vision of crucifixion which accompanied her stigmatisation included a description of pain in her hands and feet at the moment she felt herself hanging on the cross. On her recovery from the vision, only her hands were bleeding. It could be that the wounds in her hands were made by her own middle fingers piercing her own palms during one of the muscular spasms she was prone to at the time. The marks on the back of her hands did not appear until a later date. Her feet, being weighted down, could not have been physically marked at the same time by her own actions and were, in the event, found to be unmarked. They never, in the seven years of her stigmatisation, bled as actively as her hands. If the pain experienced in her vision had been capable of producing psychosomatic injuries, it might be expected that the feet would have also been marked on that first occasion and also the backs of her hands. The words of Ethel Chapman describing the discovery of her wounds should be noted. "When the nurses came to wash me they noticed my hands were bleeding, in the centre of the palms. My first thoughts were that I had just clenched them in pain."

From the evidence of three of the contemporary cases, as examined above, at least two feasible physical causes of primary stigmatisation may be suggested: direct marking of the body to produce the wounds of Christ; and the incidental marking of the body producing wounds which are then interpreted as being those of the wounds of Christ.

Primary stigmatisation of either type may then be followed by incidents in which the wounds reactivate psychosomatically. This does not follow in every case and wounds may also be reactivated physically. Distinguishing the psychosomatic from the physical is notoriously difficult and, as the study of a parallel medical condition indicates, can

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<sup>19</sup> Evidence given by Ethel Chapman's daughter to the author 1980.

lead to conflicting theories. Conclusions drawn at any one time can be superseded by contradictory conclusions at a later date. A study of the medical literature over the last fifty years relating to the examination of a rare condition in which patients present with specific lesions for which they claim they can recall no physical cause, demonstrates the way in which medical thinking has evolved. Initially such lesions were believed to be of an organic origin described as autoerythrocyte sensitization. Later they were attributed to psychosomatic factors and came to be known as *psychogenic purpura*. The most recent work examines the possibility of self-abuse.

The condition is illustrated here by three examples.

The first one involves a female patient aged nineteen. She attended Aberdeen General Hospital in October 1969. The history of her condition relates that after a series of headaches she discovered skin lesions beginning to appear, starting on her legs. They formed rapidly and took up to two weeks to clear. There were fifteen episodes over a period of seven months. Following psychotherapy, during which she reported frequent beatings by her father with a strap during childhood, there was no recurrence of the injuries.<sup>20</sup>

In the second case a female patient aged 27 with a long history of psychiatric problems, was observed to suffer from extensive bruising which appeared to have no external cause. The development of the bruises started with pricking and tingling within a limited area. Thereafter reddening, swelling and increasing soreness developed for 5 - 10 hours, followed by the formation of a visible bruise. This bruise enlarged concentrically over the next 4 to 5 days, whilst the pain and swelling diminished. Previously she had been treated on five occasions by a gynaecologist after reporting obscure abdominal pains attributed to the pelvic organs.<sup>21</sup>

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<sup>20</sup> D and WD Ogston and NB Bennett, *British Medical Journal* January 2 1971.

<sup>21</sup> K Hersle and H Mobacken, *British Journal of Dermatology* 1969 (81).

The third example involved a female patient aged 43, who reported spontaneous bruising on her skin, often following what she described as mildly traumatic experiences. Her skin, she said, would first appear to smart and tingle within a palm-sized area on the trunk or a limb. Her face remained unmarked. After a few hours the area concerned became a bruise which would enlarge concentrically over a period of a week.<sup>22</sup>

In the early years of medical interest in the condition in the early 1950s, four other cases were described by Gardner and Diamond<sup>23</sup> who also made the first attempt to explain the mechanism involved. The patients concerned were all female. The age range was 19 to 43 years. Each had earlier reportedly sustained a physical injury which they believed had healed. However at a later date the bruising, pain and swelling associated with that earlier injury reoccurred. Gardner and Diamond suggested that the patients' renewed injuries could be explained in terms of auto-immunity. To test the view they attempted to reproduce the injuries on demand by injecting the patients under the skin with their own washed red blood cells (erythrocytes). The marks reappeared. Both injecting the patients with other agents and injecting a parallel sample of other patients with their own erythrocytes produced negative results. Gardner and Diamond introduced the term autoerythrocyte sensitization as a classification for their patients' condition.

In due course it was observed that patients presenting with symptoms of autoerythrocyte sensitization also shared a number of psychological characteristics. The general patient profile which emerged was that of a female with a disturbed or traumatic psychiatric history and a record of various kinds of spontaneous bleeding: some of this bleeding had been from the nose; others had had internal gastro-intestinal bleeding;

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<sup>22</sup> Ibid.

<sup>23</sup> FH Gardner and LK Diamond, *Blood* 10: 1955.

25 had reported blood in the urine. Nearly all complained of severe headaches and there was a tendency amongst them to have had problems with their vision, periods when they were unable to speak, and episodes of faintness. One of the most interesting parallels between these patients and stigmatics involved hallucinations. In one 1962 study of *psychogenic purpura*, Agle and Ratnoff<sup>24</sup> reported the case of a patient who had hallucinations of her dead father and of another who talked of seeing gold when she became angry. The same article reported patients with masochistic character traits and a tendency to be able to endure illness and the pain of surgical procedures far beyond the limits set by a normally strong ego and more suggestive of actual enjoyment of the hardship. The authors concluded that it was tempting to inquire about the "specific symbolism of *purpura* for our patients. For example, are these abreactions of previous real trauma or the beating fantasies of masochists?"<sup>25</sup>.

During the first 20 years of systematic study, it was assumed that *psychogenic purpura* was an exclusively female condition and attempts were made to interpret it in terms of hormonal activity and the menstrual cycle, although Ratnoff and Agle<sup>26</sup> noticed that only a minority of patients noticed an increase of lesions in association with their monthly periods. Whitlock<sup>27</sup> described *psychogenic purpura* as "a painful bruising syndrome almost entirely a disorder of women, mainly in the reproductive period of life."

However, in 1974 the Departments of Medicine and Psychiatry at the University of Rochester School of Medicine, Rochester, New York, published a case history<sup>28</sup> which involved a 53 year-old man of Italian extraction. The man was observed to have lesions which appeared spontaneously and showed signs of inflammation.

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<sup>24</sup> DP Agle, OD Ratnoff, *Purpura as a Psychosomatic Entity Archives of Internal Medicine* 1962 pp685-693.

<sup>25</sup> Ibid.

<sup>26</sup> DP Agle, OD Ratnoff *Medicine* 47, 1968.

<sup>27</sup> FA Whitlock, *Psychophysiological Aspects of Skin Disease* (London: W B Saunders 1976).

<sup>28</sup> R Klein, J Gonen, and C Smith, *Psychogenic Purpura in a man, American Psychosomatic Society*, 37 pp41-49.

Psychological data from interviews and formal testing suggested to them that his pain was a conversion symptom that developed during a period of sustained psychological stress brought on by the death of his mother, marital conflicts and a myocardial infarction.

It was found that the lesions, mainly on his back, could be induced by autologous blood injected into the skin on his back in conjunction with the suggestion being made to him as to the outcome of the procedure. The subject was not however kept under constant observation from the time of the injections to the time of the appearance of the lesions. Over a period of two years' observation and treatment, the patient continued to develop lesions, sometimes in close relation to emotional stress. The man was also described as pain-prone, masochistic, self-punishing, guilt-ridden and hysterical.

Although not matched in detail, the description of the personality characteristics of the Italian patient contains some similarities to the personality profile of George Hamilton. George Hamilton has developed stigmata, additional facial and back lesions over a lengthy period of time, and has undergone extensive periods of emotional stress. In an earlier age, his inability to eat would have been described as being of an hysterical nature.

Two further cases involving male patients were found by the author in the medical literature. The patients concerned were boys aged ten and fifteen.<sup>29</sup>

In 1967 Agle, Ratnoff and Wasman published a re-evaluation of the syndrome following an examination of four of their patients.<sup>30</sup> The patients were all female, the youngest aged 15 and the eldest 66 years. They were interviewed extensively. Some of

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<sup>29</sup> Z Labadidi, R Friedman, *Missouri Medicine* 8; 1971; E Kurczynski, S Cassidy and R. Heyn, *Lancet* 1 1973.

<sup>30</sup> DP Agle, OD Ratnoff and M Wasman, Studies in Autoerythrocyte Sensitization, *Psychosomatic Medicine* XXIX-5.

the interviews were carried out when the patients were under hypnosis. They were also kept under observation to ensure wounds were not self-inflicted, but it was not constant monitoring. One patient was hypnotized to a level<sup>31</sup> which included total amnesia and the production of visual hallucinations. In this state it was suggested to her that she re-experience her original injury. Her foot became painful and began to swell, although no bruising occurred as had been the case following her original injury.

In a second case, the patient examined appeared to exhibit injuries which she herself had not originally received but had witnessed. To quote the case report: "On Christmas Day the patient heard someone scream and saw a neighbour youth, who had a striking resemblance to her brother, was bleeding from a gunshot wound in the lower right thigh. She became panicky, tearful and anoxic. One week later there appeared on her lower right thigh a severely bleeding ecchymosis, which was observed to bleed externally through the skin. During the ensuing hospital stay she had severe epistaxis and an attack of hyperventilation which began when a patient in the next bed was brought back into the room after an amputation."<sup>32</sup> She was seen to be a patient who could produce physical symptoms of various kinds in her own body when empathising with another's distress. Under hypnosis, an attempt was made to study her reaction to more specific suggestion.

She was easily hypnotised<sup>33</sup> to a grade which included total amnesia for the period of the trance and responsiveness to post-hypnotic suggestion, and encouraged to relive the experience of witnessing her wounded neighbour. "Her abreaction to this seemed complete; she became tearful and writhed about in the chair. She spoke of the boy's screams and her own feelings of helplessness. It was suggested to her that she develop a lesion on the lower right thigh similar to her neighbour's wound. In the 24 hours

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<sup>31</sup> Davis-Husband Grade 4.

<sup>32</sup> DP Agle, OD Ratnoff and M Wasman, Studies in Autoerythrocyte Sensitization, *Psychosomatic Medicine* XXIX-5 p 494.

<sup>33</sup> David-Husband Grade 3.

following the trance period, she had five bouts of epistaxis and developed an ecchymosis about her left eye but not her thigh. She said that she felt as though someone had beaten her up. The next day, the suggestion was again made under hypnosis that since she would rather suffer than see someone else hurt, the development of a wound of her own might make her feel better. After the trance was ended, the patient complained of a pinching feeling about her right knee. Later in the day, the area became red and swollen, and within 24 hours a bruise appeared. One week later, she complained that the lesion was increasingly painful and said that blood had seeped through the skin."<sup>34</sup>

Agle, Ratnoff and Wasman said that studies of their four female patients demonstrated a "predominance of hysterical and masochistic character traits as well as a propensity to express psychological problems in physical form both through conversion mechanisms and psychophysiological responses".<sup>35</sup>

They acknowledged the condition was not, as had been previously suggested, one which could be explained solely in organic terms. They described autoerythrocyte sensitization as a condition restricted to adult and adolescent females. In this respect they were reacting to the evidence in much the same way as those studying stigmata, at that time and earlier, reacted to cases of stigmatisation.

By 1989,<sup>36</sup> Ratnoff had accumulated his 71 studies of cases of autoerythrocyte sensitization syndrome or, as it was becoming more commonly known, *psychogenic purpura*. He had, by then, become dissatisfied with the hypothesis that the condition was exclusively related to a reaction by the patient to her own erythrocyte stroma. Various tests published<sup>37</sup> in which erythrocyte stroma had been replaced by a number

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<sup>34</sup> DP Agle, OD Ratnoff and M Wasman, p 495.

<sup>35</sup> DP Agle, OD Ratnoff and M Wasman, p 496.

<sup>36</sup> *The American Journal of Medicine*, 87 Sept 1989.

<sup>37</sup> *Blood* 1966, 28; *British Journal of Dermatology* 1969, 81; *Blood* 1967, 30; *Proceedings Royal Society of Medicine* 1971, 64.

of other agents, had thrown considerable doubt on Gardner and Diamond's original work. Looking for other than an organic explanation for the condition, Ratnoff produced and published a table of what he identified as common emotional characteristics associated with his 71 patients.<sup>38</sup>

Ten of the patients reported hallucinations. Eighteen were described as "hysterical". Twenty-nine were described as masochistic or martyristic. In a parallel table of associated symptoms, 11 were diagnosed as anorexic.

In what Ratnoff called a typical case he outlined the experience of one woman who, when in hospital, had an exacerbation of bruising when she mistakenly believed that her spouse had been injured. Reviewing the patient's history, it was learned that during adolescence she had had complete aphonia for three years and that, for the ten years before becoming a patient, she had had frequent visions of her dead father trying to speak to her. These occurred just before sleep. Ratnoff said of her "strikingly, she appeared to accept her illness in a fashion that suggested martyrdom".<sup>39</sup>

The general patient profile emerging from Ratnoff's work was of a female with a disturbed or traumatic psychiatric history and a record of an associated or unconnected tendency to experience various kinds of spontaneous bleeding. Thirty-eight out of 71 reported frequent bouts of epistaxis, 36 had gastro-intestinal bleeding and 25 had haematuria. Nearly all complained of severe headaches and "many described paraesthesias, transient paresis, cutaneous hyperesthesia or anaesthesia, tremore, seizures or an ataxic gait. A few had periods of aphonia .....Many...had repeated syncope, transient faintness or vertigo. Some described diplopia that, remarkably was sometimes still evident when one eye was closed. Others had transient blurred vision, constricted visual fields, or even transient blindness....Bouts of bruising were often

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<sup>38</sup> O Ratnoff, Psychogenic Purpura: an unsolved dilemma, *The American Journal of Medicine*, September 1989.

<sup>39</sup> Ratnoff p3-18N.



proceeded by sensations localized to the affected site....Psychiatrists' studies indicated that patients had overt depression, sexual problems, feelings of hostility and obsessive compulsive behaviour... The patients often exhibit martyristic characteristics.. viewed themselves as self-sacrificing...Among the more remarkable features was the frequency with which... they had been subjected to myriad surgical procedures".<sup>40</sup>

Both Ratnoff and Whitlock have considered stigmata within the context of *psychogenic purpura*. Ratnoff was able to draw from his own observations of a stigmatic referred as a patient to him. In 1980, he expanded his study of *psychogenic purpura* to include a case of stigmata which had been referred to him at his Cleveland, Ohio hospital practice. This involved him in a limited review of some historical reports. The patient, he discovered, had an active and varied history of religious inquiry. She was 26 when she converted to an Eastern Orthodox religion and, at that time, she also became interested in the occult. She told Ratnoff that she had acquired psychic powers and the gifts of prophecy and healing. "She would go into trances in which she answered questions through someone else's voice."<sup>41</sup>

Two years later, after what Ratnoff describes as a guilt-producing crisis concerning her religious conversion, that she began to experience episodes of stigmatization in the wrists, the dorsa of the feet, the left anterior chest and, at times, the forehead. These episodes, which lasted only a few minutes, occurred while the patient was in a trance and were preceded by severe linear pains across her back and pains in the affected areas, "as if I were crucified". When the trance was light, the areas merely reddened and became very sensitive to touch. Two of her episodes were witnessed in hospital. The episodes continued for about four years when they ceased suddenly. This coincided with her conversion to another religious faith. At the same time she reported losing her occult powers.

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<sup>40</sup> Ratnoff p3-19N.

<sup>41</sup> Ratnoff quoted from interview with author Dec 1993.

Ratnoff described how the patient had many of the somatic complaints associated with *psychogenic purpura*. including: menometrorrhoea; haematuria; weight gains; difficulties in swallowing; and episodes of asthma. Ratnoff said that, from a partial psychiatric evaluation, the impression was gained that she had a severe hysterical character capable of episodes of behaviour in which she was dissociated from reality and prone to vivid hallucinations. A skin test with autologous blood was negative.

When Ratnoff asked her, sometime after the stigmata had left, if she might have produced her wounds by injuring herself she replied, "I've asked myself one hundred times whether I rubbed or stabbed myself. I had at the time trouble being able to distinguish the truth and know that it was the truth".<sup>42</sup>

The question as to whether the stigmata were psychosomatic, or self-induced remained unanswered. The patient's admission to having a confused recollection of past events is, as was suggested in chapter five, of relevance to the case of Jane Hunt.

Ratnoff concluded his review of stigmata and other forms of psychosomatic bruising and lesions with the words, "we have as yet no inkling how emotional pressures can bring about obvious organic results".<sup>43</sup> Ratnoff admitted that his first inclination to seek psycho-physiological explanations for the many unidentifiable skin disorders he examined might have caused him to overlook the possibility that in most cases the lesions were self-induced. This view has been reenforced by the statistics relating to the condition. Having accumulated a substantial number of cases, presenting themselves steadily over a period of time, Ratnoff observed that since the late 1980s no new cases have emerged. "It is as if the condition has disappeared".<sup>44</sup> There is no further

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<sup>42</sup> Ibid.

<sup>43</sup> Ibid.

<sup>44</sup> *ibid.*

published work relating to the condition, Ratnoff suggested, "as there is nothing to write about".<sup>45</sup>

One possible conclusion to be drawn is not that female behaviour has changed suddenly, but that the medical interpretation of the symptoms has changed due to changing social attitudes. Like stigmata, *psychogenic purpura* is not a neutral term for a medical condition existing in isolation, but a prejudicial term for a condition firmly rooted in the culture of the society. During the last ten years, both in the United States and Britain, greater emphasis has been placed on acknowledging physical abuse in society, whether relating to children or women. Currently, a woman presenting with bruising may be more willing to accept (or admit to) the physical source of the injuries (a violent partner perhaps) than consciously or unconsciously deny this possibility. At the same time medical practitioners will be more open to the existence of abuse (including self-abuse) and less willing to provide cases of multiple bruising with neutral-sounding labels such as *psychogenic purpura*.

Self-abuse takes several forms which include *anorexia nervosa*, *bulimia nervosa*, Münchhausen's Syndrome as well as the more direct cases of self-wounding. While the self-abuse might be said to be deliberate, in that women abusing themselves are aware of their actions as they themselves initiate the injuries, in another sense it can be said the abuse is not deliberate, because no person would choose to undergo the traumatic life experiences, or be of the personality type, which brings about the urges to injure.

Case histories of self-abuse collated and described by Miller, bear such a similarity to earlier cases diagnosed as *psychogenic purpura* that they could be the same condition under a different name. The similarities with stigmatisation are also striking. Miller's study included women with eating disorders and those who cut and mutilated

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<sup>45</sup> *ibid.*

themselves. She analysed histories of parental alcoholism and paternal sexual abuse. She described how in her view men and women who have experienced childhood trauma feel similar types of pain, "but they often express it in different ways. There are many ways to explain why women hurt themselves more often than men do. Men who have been traumatized in childhood are more likely to inflict on others what was done to them; they are socialized to act aggressively and to fight back rather than to allow someone to harm or humiliate them. Women are socialized not to fight back; allowing themselves to be hurt or humiliated is far more socially acceptable than being aggressive or violent towards others".<sup>46</sup>

Miller's chosen terminology is of interest. At one stage in her study she notes, "women who hurt themselves through acts of self-mutilation are more stigmatised and pathologised than women who hurt themselves through eating disorders". She suggests that although women internalise pain and turn in on themselves through self-mutilation, it cannot be a self-regarding action. Society inevitably forms a view. If random slashing of the wrists is the self-damage employed, society forms a much harsher view than if the wounds are selected in position, type and timing, to coincide with the marks of crucifixion. It is through exhibiting the wounds of Christ's suffering that, in the right circumstances, a new status can be obtained. As the marks of Christ are given a universal redemptive property, so the wounds of self-abuse too can take on a redemptive function. It is redemption through self-punishment. If the wounds are additionally those of Christ their redemptive purpose extends still further. It may then include not only the abused, but the abuser and the society which may have condoned the abuse.

This view is given credence by contemplating the circumstances of Jane Hunt's stigmatisation, making allowances for the problems of chronology. She dates her

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<sup>46</sup> Prof D Miller, *Women who hurt themselves* (New York/London: Harper Collins 1994) p5.

stigmata to losing her children.<sup>47</sup> "I felt resentful that God could do this to me, but now I know why he did it. He's so merciful, he took the children for a reason and for that I'm grateful. We had a lot of things in the family, everybody's family doesn't run smoothly. I know at the time I found it very hard to forgive my father for things that happened in the past. St James' day did it. I was praying and was told forgive. That is the start, the beginning of everything. I went down to my father who was eating his lunch, slung me (sic) arms around him. He nearly choked on his coffee, and I said, 'father I forgive you for what you have done'. I've been better, happier in myself for doing it. We've got on better and I feel a weight has been lifted from off me, just saying 'I forgive'."

TRS can, in Miller's view, take many forms and include a wide range of self-injuring behaviour, eg: burning and/or cutting ones own body; deliberately taking toxins; inserting toxic substances in the anus or vagina; and abuse in a medical guise, including prescription drug abuse, 'doctor-shopping', repeated demands for cosmetic surgery. The exact pattern of self-abuse, Miller suggest, is determined by the previous abuse, eg: attempts by one patient to force unwanted food down her own throat was attributed to the childhood abuse by her father, when he had forced his penis down her throat.

The abuse, Miller believes, is connected with arousal and that the negative excitement of the self-abuse reminds the abused of the relationship which formed between the abused and the childhood abuser. The self-abuse was observed often to be cyclical and to involve secrecy and anticipation. The pattern of events was also reported to be associated with amnesia, cognitive confusion and feelings of dissociation with self which resulted in patients describing hallucinatory experiences as if they were undergoing an altered state of consciousness. These were reminiscent of descriptions from many other sources of out-of-body experiences, especially those connected with

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<sup>47</sup> A reference to her miscarriages.

near death experiences. "I am floating outside myself. I can watch myself sitting down there...I am suddenly in Aunt Lucy's house....I see her in the kitchen with the flowered curtains and the tea cozy."<sup>48</sup>

Jane Hunt had described experiencing an out-of-body experience prior to her period of stigmatisation. "They were trying to save the daughter I was carrying. I remember the doctors shouting, 'get her off the drip'. I could see my husband standing in the corner and could see myself lying down on the bed. They rushed in and revived me. At that time I could see this door and I was going towards it. I was tossed between 'shall I go' or 'I've got to go back'. I learned later that my heart had stopped. I felt very close to God and soon after started to get very faint marks on my hands. They used to burn or itch. I could relate to God very easily."

An examination of the oral evidence of Heather Woods describing a vision and the associated healing, which she attributed to miraculous intervention and the fulfilment of a prophecy, contains many of the characteristics of TRS including arousal, retreat to childhood sensations, autoanalgesia and dissociation from self. Heather Woods had been sexually abused as a child and the passage quoted below can be read as sexual imagery. The suggestion being, that as with Jane Hunt and Cloretta Robinson, the employment of religious imagery takes on a protective or a redemptive purpose. "I was on the shore and there were two men in the water waiting for me. I turned and there were hundreds of people looking at me. I had eye contact with them all. It was wonderful. I was drawn to one of the men in the water and walked to him. He had his hand held out. It was like walking through warm oil. I came into a room and there were ten men and one other... I was dripping wet....Each man embraced me....I knew I belonged there....and I met this man, took hold of his hand and I knew it was the Lord. I closed my eyes and as we held hands I was on the Cross. There was no pain. Where

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<sup>48</sup> Miller p104.

Christ was on the Cross, I was on it with him, as a mirror image. I was looking at his face, he was looking at mine. I was on the Cross, no pain, we came as one. That was the feeling, wonderful compassion. The next minute I was wet through sitting in my chair. I looked round and my hands were bleeding... I had not eaten for months and now wanted some food. I felt like being a child again. There was no pain. I felt strong. I was excited, I was thinking over and over again about what had happened."

Within the context of TRS it is worth noting two reports concerning Padre Pio. The first concerns the many reports by witnesses of hearing him wrestle with the devil, when he was violently hurled, or hurled himself, around his cell. "Who will set me free from the miseries? The temptations pursue me more relentlessly than ever. They are a source of great suffering, not because of the continual violence I must do myself, but because they are so repellant and persistently hostile."<sup>49</sup> The second report which has not been juxtaposed with the first before, is to be found in an account of Padre Pio's childhood. "So his father when he heard the baby still in diapers, who was always crying, especially at night took him (the baby Francesco Forgione) and threw him on the bed so hard that he made him fall on the floor. 'You have killed my son,' his mother said fearfully as she picked him up. He was not hurt....but today it could be asked if this event were not a psychological shock, a trauma....Padre Pio conserved a vivid memory of this incident."<sup>50</sup> The cause of the child's distress was said to be his visions and nightmares of monsters. After being thrown on the floor it is reported that the child never disturbed his parents or cried out for his mother again and suffered his terror of the night in silence.

In extreme cases of dissociation from self, Miller describes self-abusers creating distinctive and separate characters for themselves and exhibiting symptoms of Multiple Personality Disorder (MPD).

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<sup>49</sup> Letters of Padre Pio 22 October 1910 pp230-231.

<sup>50</sup> *Acts of the First Congress of Studies on Padre Pio's spirituality*, San Giovanni Rotondo 1972 and attributed to Father Alessandro of Ripabottoni OFM.

The association of MPD with stigmata was first made by Thurston and repeated by Wilson. "The case for a link increases when we find that many of the ailments suffered by multiple personality patients are reminiscent of those we have come across in stigmatics.....What is evident is that stigmata and multiple personality seem to be so closely linked that they could be two different aspects of the same phenomenon.....In both we find the individual caught up in a flight from reality, on the one hand into a fantasy personality providing some form of release or escape from the constraints on the everyday self, and on the other into an established fantasy world of religious figures and a personal dramatisation of the events surrounding the death of Jesus."<sup>51</sup>

Patients with multiple personalities have, it seems, lived parallel lives. One self is often unaware of the others. To give an example, there was reportedly a case of a neat and conservative Georgia housewife who would unexpectedly snap into a personality who would speak coarsely and wear provocative dress.

The same woman, to quote Ian Wilson, "found herself prey to some twenty invading personalities who would take her over in such a way she would be amnesic during those times they took charge. Different personalities even had different handwriting."<sup>52</sup>

Examining the meditations and prophetic writings of the Lincoln stigmatic Heather Woods, her handwriting, which was always done with her left hand, even though she was right handed, can be seen on occasions to vary from paragraph to paragraph. Three or four styles might be visible on one page. She talked of receiving messages from various sources ranging from 16th century figures to a recently deceased anglican evangelist.<sup>53</sup>

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<sup>51</sup> Wilson p88.

<sup>52</sup> Wilson p 84.

<sup>53</sup> Revd David Watson of York.



If, as is the case with multiple personalities, one character does not recall what the other characters have said or done, could something similar be occurring in certain cases of stigmatisation? Whilst the stigmatic, in one personality, is undergoing a vision which is later recalled by the normal self, another self exists which physically makes marks on the body, which the normal self does not later recall. If this were so, the stigmatic, in his or her normal personality, would recall a vision and also find bodily marks, but be unaware that he or she had made them. To the conscious, normal personality, the vision and the appearance of the marks would be linked and be attributed to one and the same cause and, given the extraordinary nature of the experience as perceived by the recipient, that cause would be explained as mystical or divine. Once the marks were established and known about, there would be a very understandable human temptation for the person to maintain the marks so as not to lose face or cease to be the centre of attention or devotion, or alternatively the marks would replicate psychosomatically when the subject was experiencing an altered state of consciousness.

In the absence of firm evidence the above is conjecture. It is conjecture which does not however suggest fraudulent intent. For to the individual the experience would have been very real.

TRS can result in death. The ultimate expression of self-abuse is suicide. Whitlock's account quoted above of the Australian Mrs H, concluded with her death. In 1963 she said she had had a vision of the Virgin Mary who said that she would die on a Friday in November. She died on Saturday 16 November 1963 from a barbiturate overdose, at a time when her physical health was severely impaired. In her life time Mrs H attracted considerable attention within her local community, but church authorities and medical authorities gave her no encouragement. Padre Pio, in his more intimate writings, described moments of despair when he would have welcomed death. "Pray for my

speedy departure,"<sup>54</sup> he wrote to his confessor in 1915. "There will be no more comfort for me until the divine Master calls me to himself. Pray for my speedy departure for I can go on no longer. I am very much afraid of a catastrophe that I'll go mad."<sup>55</sup>

The circumstances of the death of Heather Woods have never been fully explained and in returning an open verdict, the possibility of suicide was not excluded by the coroner. Shortly before she died she had been an in-patient at a psychiatric hospital suffering from depression. Previous suicide attempts were mentioned at the inquest, but Heather's sister described them as cries for help. A note from Heather Woods addressed to her asking for forgiveness included the words, "there is pain both physical and mentally."<sup>56</sup> The note was however undated. If she had killed herself, John Spencer<sup>57</sup> points out, it would have been an appropriate religious gesture to drown herself. Her body was found in the river on whose banks she often prayed, and death by drowning might, Spencer suggests, have been to Heather Woods a final baptism by immersion. Spencer, who attended the inquest, believes that in the final days of her life Heather Woods had suffered a loss of faith and it is unclear as to whether the plea for forgiveness related to suicide or having knowingly deceived her family and congregation with her display of the stigmata. In recording an open verdict the coroner acknowledged that uncertainty.

Miller's study of TRS is based on a wide range of clinical examples and in that context, while it can be dismissed as speculative, it provides much valuable research material. Its emphasis on the origins of self-mutilation being rooted in childhood sexual abuse may be interpreted as too one-sided. Other causes of low self-esteem exist and must play a part. One, in particular may be found in the emphasis in traditional Roman

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<sup>54</sup> Letters of Padre Pio 24 January 1915 p585.

<sup>55</sup> *ibid.*

<sup>56</sup> The note was left at Heather's home and read to the coroner at inquest held at Lincoln on 13 December 1993

<sup>57</sup> Spencer p185-186

Catholic education on guilt and sin. That a high proportion of stigmatics have taken religious vows and been members of communities teaching the most exacting definitions of sin, may be of significance. Human worthlessness in the eyes of a God, who was required to send his own son to suffer a most ignominious death by public execution to redeem the sins of every member of the human race, was resoundingly emphasised in the daily teachings. Miller brings a number of key insights to bear which can validly be incorporated in this study. The work of Lord is also relevant, especially as it was applied to the case of Cloretta Robinson by Lifschulz and Early. He suggested both the sexual element and that stigmatisation often enabled stigmatics of low self-esteem to elevate themselves in their own and in their community's estimation.<sup>58</sup>

One further observation provides circumstantial evidence to suggest that stigmata are self-inflicted. Evidence exists in 32<sup>59</sup> cases of stigmatisation identifying the position of the spear wound on the stigmatic's body. Of those, 26 or 80% of the wounds are on the left side. If a right-handed person is to make a self-inflicted mark, the mark would more easily be made on the left. This ratio of left-hand side to right-hand side marks (4:1) tends strongly towards that of right-handed to left-handed people in the population.

To propose self-abuse in any form as an explanation for stigmatisation does not in any way undermine the interest in the phenomena or belittle the significance read into stigmata by so many witnesses. Neither is it an all embracing theory which needs apply in every case. There is at least one further physical, as opposed to psychiatric or psychosomatic, factor which might in some circumstances contribute to stigmatisation. It is dermatographia. The skin of certain people can be clearly marked with the very lightest touch producing defined areas of lividity. Shapes can be made in a deliberate manner and these dermatographic markings can be induced, to some degree, in 5% of the

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<sup>58</sup> Early and Lifschutz p 200 citing RA Lord p 299-301 as referred to in chapter ten.

<sup>59</sup> The figure is taken from the Imbert-Goubeyre census added to which are the observations of the author relating to the six stigmatics studied.

Caucasian population and are related to the production and distribution of histamine in reaction to the application of gentle, repetitive stroking of the skin to a specific design. Temporary patterns and even writing on the skin can be produced. At least two stigmatics have exhibited writing on their skin.<sup>60</sup> A tendency for an individual to respond to dermatographic stimuli may be enhanced by hypnosis. The popularly held view that a stage hypnotist can hold an inert object to the skin of a subject and, by suggesting it is hot, achieve a reaction, including the blistering of the skin is, however, an exaggeration of the potential.<sup>61</sup> Of the six contemporary stigmatics in this study, only Heather Woods can be said to have received a specific mark in addition to the standard wounds. It presented in the form of the cross which appeared on her forehead and which she herself might have induced, as indicated earlier, by her repeated nervous stroking of the skin.

A further factor which needs to be born in mind is the role played in stigmatisation, or parallel conditions, by drugs with hallucinogenic properties. The male patient cited earlier by Moody had produced his marks and relived an earlier experience while under the influence of a narcotic drug which had induced an altered state of consciousness. The administration of a narcotic drug as trigger or catalyst for the experience is particularly significant as it appears to be the case that an altered state of consciousness in a subject is generally associated with the display of psychosomatic injury and stigmata in particular. Of the six contemporary cases under study, Ethel Chapman, Heather Woods and Jane Hunt were taking, or had recently taken, prescribed medication for heavy pain relief prior to stigmatisation. Heather Woods had an extended period of morphine dependence, as mentioned above. However she recounted taking herself off the drug against medical advice during her period of stigmatisation. That she felt no pain from the medical conditions for which she was being treated during that period may be attributable to an auto-analgesic effect similar to that noted by

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<sup>60</sup> Sister Jeanne des Anges and Marie-Julie Jahenny, the latter manifested the words 'O crux ave' on her breast.

<sup>61</sup> T X Barber *Hypnosis: A scientific approach* (New York: Van Nostrand Reinhold 1969).

Miller in certain TRS patients. On the other hand, the author was not convinced by her claim that she had ceased to take morphine. Nor was her convinced that she had an organic medical condition, a view confirmed by the autopsy, although her history of major surgical intervention would have left her with considerable abdominal discomfort. On the day the claim was made to him he noted a half-empty container of a morphine based medication in a prominent position in Heather Woods' kitchen.

A further factor contributing to the long-term exhibition of stigmata is that the marks, once formed, can be deliberately and artificially maintained. This could be so that the stigmatic can continue to be at the centre of attention, or as a result of the stigmatic continuing with his or her desire to feel the pain of the wounds. Suspicion that Padre Pio used chemical means to sustain his wounds was raised in 1949 by Prof Amico Bignami.<sup>62</sup> He excluded simulation as a cause of the wounds describing them as a product of a morbid state. "They are also due to the use of known chemical agents (tincture of old iodine, which because of the iodidric acid that develops in it becomes very caustic and irritating). It would be a multiple neurotic necrosis of the skin perhaps unconsciously caused by a phenomenon of suggestion, artificially maintained by the use of chemicals."<sup>63</sup> This latter observation has been accepted by Father Giorgio Cruchon SJ, and further substantiated by the observation that at his death, after a long debilitating illness during which Padre Pio had neither the strength nor space to maintain his wounds, no wounds were visible on his body.

One is not here examining mutually exclusive explanations. The psychosomatic and the physical interact as does the history of trauma and the religious motive. The examination of the six contemporary cases suggests that each case is a unique interaction of influences further shaped and formed by social environment and the reaction of witnesses. The evidence drawn from the six contemporary cases tends to

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<sup>62</sup> Professor of Medical Pathology Royal University of Rome quoted by Father Giorgio Cruchon SJ, *Acts of the First Congress of Studies on Padre Pio's spirituality* p128-131.

<sup>63</sup> *Acts of the First Congress of Studies on Padre Pio's spirituality*, p131.

confirm Thurston's general observation on stigmatisation that there is hardly a single case in which there is not evidence of the previous existence of a complication of nervous disorders<sup>64</sup> before the stigmata developed. He extended his observation of historical cases to those of more modern times and attributed a degree of hysteria to every stigmatic, including those who have later been recognised by the church for their saintliness. Thurston's terminology is dated and superseded by that of Miller and others, but it makes the point clearly. Therefore it is not surprising that psychosomatic forces and degrees of self-mutilation may both be involved. To separate the two forces, as earlier studies have attempted, is to attempt to establish a meaningless dichotomy. Indeed, going back to medieval examples of stigmata, witnesses in that age would not have contemplated being so rigorous in excluding as invalid those cases involving physical intervention. It was recognised that a person wishing to empathise with the passion of Christ could validly choose or be chosen to follow the path of suffering and physical pain. In medieval times the first question put by witnesses on seeing a case of stigmata, would not necessarily have been, are these wounds physically made or otherwise? At that time there was less of a clear cut division between the physical and the spiritual, between this world and the next. The display of the shared suffering with Christ would have been enough to inspire awe.

Reviewing the medical investigation of stigmata along with investigations into other forms of non-religious marking of the body, there would appear to have been a general movement away from seeking an organic or psychosomatic explanation towards one which incorporates a new acceptance of self-abuse.

For the individual, however pious and dedicated to their faith, to present with the painful injuries of Christ's suffering and execution on their own bodies is a traumatic event, even when the wounds are self-inflicted. The trauma is then compounded by the

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<sup>64</sup> Eg: *anorexia nervosa*, self-abuse, aphasia and cataplexy.

reaction of others. Some stigmatics have been told to their face that they have been marked by the devil. In more recent times individuals with the marks have been subjected to close and intimate examination by doctors and psychiatrists. It has been inferred that they have a mental illness and they have been diagnosed as suffering from schizophrenia or hysteria.

Their faith and spiritual lives have been similarly dissected by parish priests and Vatican envoys. Often those who have conducted the investigations have done so from a position of acknowledged bias in order to disprove any claims of divine intervention. Investigators with a scientific background have often precluded any explanation which might suggest supernatural intervention, or contradict their rational view of the world. Often church investigators too have been prejudiced to belittle the experience of the stigmatics. The Roman Catholic church officially views claims of the miraculous and supernatural with extreme caution. It prefers to defer judgement and never canonises a stigmatic simply for carrying the wounds. It may even count against a cause.<sup>65</sup> The Gospel advice is that righteousness is determined not by personality or deeds but by fruits. Yet, despite all this predisposition to scepticism, or at least caution, there is no doubt that cases of stigmatics are potent foci of devotion.

The power of the stigmata lies not in divine or supernatural cause but in the response the wounds provoke, and that response is determined by the form the wounds take. Where the iconography on the body of the stigmatic corresponds to that of one of the most powerful, evocative and provocative images in western culture, the wounds of the suffering Christ, the wounded stigmatic shares in that reflected power. In stark contrast where the marks on the body of a self-abuser simply draw attention to the pathos of the self-abuse then the wounded one's despair and low self-esteem is compounded.

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<sup>65</sup> A case for beatification or canonisation.

It is strongly indicated from the observed nature of the wounds of the six contemporary stigmatics that no common causal mechanism is involved. The positioning of the stigmata varies from one case to another as does the physical appearance of the wounds. It is also the case, discounting the claim that the stigmatisation of Heather Woods' feet was witnessed by her son as described earlier, that in none of the six examples studied was the opening of the wounds in the first instance witnessed by anyone other than the stigmatic. Accounts of the first or initial stigmatisation given are entirely based upon the uncorroborated testimony of the stigmatics. Indeed, the author is not aware of any case in history when initial stigmatisation has been independently and reliably witnessed.

In the absence of witnesses, the precise mechanisms by which initial or primary stigmatisation occurs cannot be precisely identified. The histories of the six contemporary stigmatics suggest one of several physical processes might have been involved in each case. What may be noted from the examination of the contemporary cases, as mentioned earlier, is the importance of the process of recognition and validation.

The case of Ethel Chapman strongly suggests that the first marks in her hand were produced by her clenched fist. She was not a self-abuser as identified by Miller. Her marks were incidental to her vision and it was the reaction of others to them that caused her to believe that the marks were those of stigmata. They were recognised as a *prima facie* case of stigmatisation by a Roman Catholic doctor at the hospital. Had that not happened Ethel Chapman might have contented herself in her own mind that the marks were, as she had first surmised, the product of her own clenched fist and an incidental occurrence. The recognition of the wounds by the doctor was to Ethel Chapman a validation of the marks as being of religious significance and purpose.



Jane Hunt and Heather Woods sought to show their wounds to their priest at an early opportunity to be both identified and validated.

In the case of George Hamilton that recognition and validation of the marks was not provided rapidly or readily. His was the only case in which attributions of supernatural involvement were not made by people in his congregation or neighbourhood. It was only after his wounds were shown on television that he heard from viewers who were not known to him personally that they believed his marks were from God. This response provided him with the validation he required.

The marks displayed by Christina Gallagher and Father Bruse first appeared within a context of unusual congregational alertness to the possibilities of the miraculous. The marks did not trigger this alertness, but provided a reinvigoration of it and the subsequent validation of the marks came from their social context.

In the case of Christina Gallagher numerous supporters have ascribed a divine purpose to her prophetic calling of which her stigmatisation is a part. The tone of the response to her mission, which has been widely expressed, was encapsulated by her spiritual director Father Gerard McGinnity writing in 1992.<sup>66</sup> "The Second Vatican Council tells us we ought to be open to all the gifts the Holy Spirit gives to the church. As a priest, I have a duty to be open, and to give spiritual help to any person who comes to me. In Christina's case, all the criteria which the church looks for, in regard to alleged mystics, apparitions and so on, appear to me to be met. As a priest called to help her and give her guidance, I have been unbelievably enriched in my own spiritual life and priesthood by all that is reported to me, studied or which can be read. Everything I have seen and heard has only confirmed my belief in the authenticity of the events and the content of the messages. As Our Blessed Mother continued to appear to her, I could see

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<sup>66</sup> Vincent p 4.

how her own life was being beautifully changed, enriched and taken over by Jesus and Mary."

Members of Father Bruse's congregation attributed a supernatural cause to the events at the Lake Ridge church, including the stigmatisation. One member of the congregation, George Wilson attracted to the church by reports of extraordinary events, gave emphatic evidence that he had seen tears coming from the statue in the church in Jim under Father Bruse's influence. "I saw the tears....believe me, if it's not happening I'll be the first to say so. It's no hoax."<sup>67</sup> Another worshipper was accompanied by his adult daughter and had travelled four hours to be at the church. "All we want is two or three minutes of his time. We seek his blessing. We have to believe it's true."<sup>68</sup>

Eric Eades declared his belief in a divine or supernatural purpose behind Heather Woods' marks. "They have been given for a purpose by God, but what that purpose is we don't yet know".<sup>69</sup>

Similarly, Father Norman Hill encouraged Jane Hunt to see God's purpose behind her stigmatisation. He also requested healing from her. In the case of Ethel Chapman, David Lockyer saw a divine purpose, although he stopped short of talking of the marks as supernatural. "The sign of the stigmata is a novel sign in the history of this earth, rooted in a point in history, associated definitely in the minds of people with a specific person, who, according to those who follow him, declare that he was the fullest revelation of God on earth. Now whether in this enlightened age and secular environment the religious language of yesterday still has relevance or not is debatable. But of one thing we are sure, signs and symbols speak louder than words and are basic to the deep emotions and driving forces of human nature. I see no reason why the

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<sup>67</sup> *Washington Post* March 16, 1992.

<sup>68</sup> *Ibid.*

<sup>69</sup> Interview recorded with Eric Eades at his home in Lincoln, Good Friday 1993.

stigmata should not be seen in this light as a symbol in the Jungian sense, and in the religious sense, as a pointer, a reminder of the ever-present reality of Emmanuel - God with us." <sup>70</sup> Despite David Lockyer's measured approach, once Ethel Chapman's stigmata had become public knowledge she received many requests for prayers and samples of her blood from people who believed firmly that her experience was supernatural in origin.

Only in the case of George Hamilton is any substantiated objective claim of the supernatural missing. George Hamilton himself referred to paranormal events <sup>71</sup> surrounding his experience and claimed that these were independently observed. The witnesses have not been traced. However, his experience clearly falls within the first part of the definition, as do those of the other five contemporary cases, in that the form the wounds take relate directly and specifically to the passion of Christ. As to the second element of the definition, George Hamilton's stigmata may be said to fall within its scope since, following media publicity, there were a number of individuals who contacted him, as mentioned above in the context of validation, indicating that they were willing to accept his marks as being of supernatural origin on the basis of the television footage they had viewed and the newspaper photographs they had seen.

The definition of stigmata given in Chapter Two applies to the six contemporary cases and the key historical cases. However, to seek added confirmation that the six contemporary cases are presenting cases of stigmatisation which are essentially the same as those of history, it is proposed that the study of these modern cases be taken further to explore the form which the claims of associated supernatural elements take, since a recurring theme in past accounts of the lives of stigmatics is that, associated with the stigmatisation, there have been other mystical phenomena.

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<sup>70</sup> Revd David Lockyer private memorandum.

<sup>71</sup> Objects being moved around a room in a manner similar to that supposedly effected by a poltergeist.

The questions to be explored in this context, without at this stage offering explanations or precise definition of the term 'mystical', relate to the reports of mystical phenomena associated with the six contemporary cases. Are the reports of associated mystical phenomena consistent with those of the past and, in particular, are there telling details, which, once mimicry is excluded, strongly suggest a common pattern of shared experience which would go towards substantiating the claim that the stigmatisations of the six current cases, and those occurring in historic accounts, are essentially of the same nature? These issues, touched upon earlier in the historical review, will now be explored further.

The most common claim made by, and of, stigmatics is that they are visionaries. They see apparitions, it is said, and converse or interact with Christ, Mary and/or the saints. Looking further into these claims, it becomes apparent that a recurring theme involves diabolic disturbance, being taunted or attacked by Satan. Many stigmatics have described details of what they believe to be diabolic contact which are very similar to descriptions given earlier by other stigmatics of which they would have had little, if any, knowledge.

The letters of Padre Pio to his confessor and others make regular mention of physical assaults from Satan and his cohorts, whom he refers to as the wretches. "Those ugly-faced creatures afflict me incessantly," he wrote to his spiritual adviser Padre Agostino in February 1913. "For the past twenty-two days Jesus has allowed them to vent their anger on me continually. My body, dear Father, is bruised all over from all of the blows."<sup>72</sup> A description of what he claimed to be the real presence of Satan was given by George Hamilton. "I had the beautiful image again, but there was something wrong. There was a coldness in the air and the vision told me not to take communion again. I challenged him and said, 'you're not Jesus'. He pointed his finger at me and said he

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<sup>72</sup> Letters of Padre Pio p381.

would get me. I was terrified. It was the devil." Christina Gallagher, Jane Hunt, Heather Woods and Ethel Chapman told similar stories.

Further parallel experiences can be noted in the visions and ecstasies which have accompanied the devotion to the eucharist. The description of the head pains of Lukardis of Oberweimar<sup>73</sup> closely match the descriptions of pain given by Christina Gallagher. "I have long felt and still feel a very piercing and wondrous pain like a crown of thorns tightly bound to my head and running into it with its sharp spikes," are the words of Lukardis. "I feel as if needles have been pushed into my head. The feeling is so vivid I sometimes reach for them to try and pull them out. My head feels crushed and tight," said Christina Gallagher 700 years later.

The visions of The Blessed Angela of Foligno,<sup>74</sup> included one image of Mary giving her the Christ Child to hold in her arms. An account of a comparable experience is given by Dorothy Kerin. Jane Hunt described a similar vision. "Mary called me and took me to Bethlehem. There was a crib and inside was Our Saviour. Mary took him out and offered me the child to hold. But He grew heavier and heavier and Our Lady took Him back from me and put Him in the crib. It was a wonderful occasion sharing their joy."

Yet another thematic detail, the sharing of the suffering of Christ in the form of the visionary feeling himself or herself to be crucified, is also recurrent. It is not a universal experience, simply a further example of how common patterns can be seen to emerge. Ethel Chapman described a vivid re-enactment of the crucifixion which occurred at the time of her first stigmatisation at Easter 1974 and was repeated every subsequent Good Friday between noon and 3pm, until her death in July 1980. "I felt myself being drawn onto the cross. I felt the pain of the nails through my hands and feet. I could see the

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<sup>73</sup> Thurston p61 citing *Analecta Bollandia* Vol XVIII p 353.

<sup>74</sup> 1250-1309.

crowds all jeering and shouting. Of course it was in a foreign language so I don't know what they were saying. I felt in myself all the pain and the agony the Lord himself went through. I myself was in the Lord's body." Similarly, c1298 Lukardis of Oberweimar had a vision of the crucifixion. She was asked by Christ to place her hands against his, her feet against his, and her breast against his, and she felt herself sharing the pain of crucifixion as if on the cross herself. It was following this experience that she commenced her regular pattern of devotional self-abuse.<sup>75</sup>

Other parallel phenomena which lend credence to the notion that the experiences of six modern cases are consistent with those of the past include: the visions of crucifixion and Mary as described by all six stigmatics; the eating disorder of George Hamilton which falls within the scope of the study of stigmata and instances of associated inedia; the reports of the mystical perfume of Christina Gallagher and others; the reports of altered states of consciousness in the presence of the eucharistic host as reported by George Hamilton and Christina Gallagher; the mystical espousal of Christina Gallagher and similar experiences of mystical union as described by Ethel Chapman and Heather Woods; and the claim by Father Jim Bruse that the blood flow from his wounds appeared to defy gravity.

In the seventh contemporary case mentioned, that of George Rutland, it is of interest to note that his description of "beams of light shooting at him" is reminiscent of accounts of the stigmatisation of St Francis which have subsequently and frequently been reproduced in art.<sup>76</sup> It could be argued that George Rutland had seen one or more of the well-known depictions of the event. His account of his experience would therefore suggest that he incorporated this knowledge, along with other religious images accumulated over the years, into his profound moment of religious certainty. Yet his

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<sup>75</sup> Thurston p42-43

<sup>76</sup> Giotto di Bondone, *The stigmatisation of St Francis*, The Louvre, Paris and others artists.

vision also employed an archetypical image and the significance of archetypes in the context of stigmatisation will be explored in the next chapter.

The other six modern stigmatics who had long-lasting experiences of stigmatisation had described visionary images, and reported mystical phenomena, consistent with historical accounts to which, in the main, they would not or could not have had access. Only Father Bruse, of the six, had had any formal theological training during which he would have had access to a wide range of historical accounts of stigmata and mystical phenomena. That Jane Hunt had any prior knowledge of Angela of Foligno narrative is so improbable as to be discounted as an explanation. Her level of education and literacy did not give her access to the sources. That it was simply coincidence is possible. However the parallels of reported experience appear to be sufficiently numerous to suggest that they go beyond coincidence, and strongly indicate that the six contemporary stigmatics investigated are indeed in true succession to the stigmatics of the past and that conclusions drawn from their accounts will, in consequence, be applicable to a study of stigmata as a whole.

## Chapter Twelve: iconography

How it is that the stigmatics of the present day come to share experiences with stigmatics of the past needs to be explored. For while the modern stigmatics had, in many cases, no specific knowledge of the experiences of those of the past and were not involved in mimicry, the idea to be explored is that they have shared and been influenced by a common heritage of iconography and had access to common cultural archetypes.

Three examples can be drawn from the six contemporary cases, of familiar religious iconography appearing to influence the shape of a stigmatic's experience.

It was readily acknowledged by Ethel Chapman that the panorama of Golgotha which she described as having seen during her initial and recurrent vision of crucifixion drew, for its visual form and detail, on the published illustrations of the scene with which she was most familiar. Similarly, Jane Hunt found that her mind's eye picture of the house of the holy family to which she was taken in a vision, drew details from a stained-glass window she could see from her bed as a child. It may be considered significant that Father Jim Bruse's marks of stigmatisation were found on his wrists in the same way in which the wound marks of Christ were represented on the crucifix in his church.

If the stigmata are at the outset the physical products of the stigmatics, as the previous chapters suggests, it is reasonable to suppose that the shape and positioning of the stigmata will be determined, in part at least, by that iconography related to the life and death of Christ with which the stigmatic was well acquainted. An extrapolation from this observation, relating as it does to contemporary stigmatics, suggests that religious iconography might have been an important factor in determining the shape and timing of the phenomena in medieval times. It can certainly be observed, from even a non-



specialist examination of the period, that the emergence in medieval times of the popular devotion to the incarnate Christ, was chronicled in the development of religious art.

Sculpture and painting in the thirteenth century fostered "affective piety, visions and mystical experiences", wrote Constable.<sup>1</sup> Paintings took on a new function appealing to and educating the populace. Fashions or trends in iconography became distinguishable and these fashions were reflected in the devotions and iconography of stigmatics.

Representations of the passion, illustrating the utter desolation of the crucifixion, are familiar to all western christians today. While the most graphic iconography is found within the Roman Catholic tradition, the images of Christ's suffering form an integral part of the cultural imagery of all except the most isolated members of the eastern tradition and exclusive members of strict protestant sects. The images are part of the common heritage of world art.

One thousand years ago highly realistic images of the crucifixion were largely unknown. This was not due to the limitations of the artists of the time and the restrictions imposed by primitive materials. The explanation is to be found in the restrictive conventions of the times and the theological emphasis of the age. The artists of the time, who were working in two dimensions, were skilled and able to produce highly sophisticated work, as the many hundreds of vivid illuminated manuscripts testify, yet depictions of Christ's suffering were rare. Artists were not free agents. They worked within the narrow confines set by the conventions of theology and their apprenticeship training. Similarly in eastern christian art right up to the present day, images of Christ's agony are highly unusual. The icon painters are restricted, as were their medieval Catholic forbears, by tradition and training. In theological terms this is

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<sup>1</sup> Constable p 221.

attributable to the doctrinal emphasis of the Eastern tradition, which does not focus to the same degree as in the west, on the redemption of humankind through the sacrifice of Christ at Calvary. The divergence of emphasis was partly due to differences in practice. These had evolved around a thousand years after Christ, due to the physical and geographical isolation of one tradition from the other. The divergence however contained a theological element in the form of the *filioque*<sup>2</sup> controversy. The addition of a single word to the Nicene-Constantinopolitan Creed was perceived to alter the church's understanding of the nature of the incarnate Christ. Even if it did not materially do this, the fact that the controversy developed, strengthened within the western church an awareness of the position of the incarnate Christ, especially following the changes to papal liturgy in the 11th century to reinforce Rome's theological position. Rome sought to emphasise that Christ took on human flesh as a propitiation for the sins of mankind, while the Orthodox took the same Gospel evidence to stress that God, by dying as mortals die, had deified humanity. While the crucifixion was both an atonement and a triumph, the western tradition stressed the former and the eastern tradition stressed the latter. The eastern church emphasised the view of God as the light of the world, the western church emphasised the crucifixion and the suffering of the incarnate God.

Ware warns against making too simplistic a division. He rejects as misleading "the common assertion that the east concentrates on the Risen Christ, the west on Christ crucified.. It would be more exact to say that east and west think of the crucifixion in slightly different ways... The Orthodox church on Good Friday thinks not simply of Christ's human pain and suffering by itself. but rather of the contrast between His outward humiliation and his inward glory... The crucifixion is not separated from the Resurrection, for both are but a single action."<sup>3</sup>

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<sup>2</sup> The adding of one word '*filioque*' to the Nicene-Constantinopolitan Creed to describe the Holy Spirit as proceeding both from the Father and the Son.

<sup>3</sup> Ware pp 226-227.

The subtle difference was sufficient for two traditions of art and sacramental practice to evolve. In practical terms, as Rubin<sup>4</sup> and Hollister<sup>5</sup> point out, within the Catholic tradition the primacy of the sacraments was established within its liturgy with a special emphasis on the centrality of the body of Christ. This itself shaped the course of religious art which became absorbed in expressing the incarnate nature of God in Christ, especially through his redemptive suffering.

For 300 years from the middle of the 11th century Europe's growing economic prosperity enabled the great upsurge in the building of places of worship from which the Gothic style developed. The churches and cathedrals were decorated as teaching aids to familiarise an overwhelmingly illiterate populace with bible stories and the legends of the saints. There was, therefore, a huge increase in the volume of religious art produced and the themes chosen by the artists normally reflected the popular theology of the age. It was a time of apocalyptic tension through which a new devotion to the Incarnation emerged. Preceding the introduction of the new popular Feast of Corpus Christi (to honour the real presence of the body of Christ in the eucharist), the Fourth Lateran Council in 1215 had re-emphasised the central role of the doctrine of the Incarnation by obliging the faithful to partake in the eucharistic body of Christ on a regular basis. The same Council also required confession and penance to precede the communion. The Council also defined the doctrine of transubstantiation, emphasizing beyond all doubt that in the real presence of Christ at the eucharist was a sacrament which could not in any way be taken lightly. The body and blood of Christ "are truly contained in the sacrament of the altar under the forms of bread and wine, the bread being changed by divine power into the body, and the wine into the blood."<sup>6</sup> As a result, sin and redemption through the body of Christ were at the centre of religious awareness. Christ's role in redeeming the fallen through his suffering was thus

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<sup>4</sup> Miri Rubin, *Corpus Christi - the Eucharist in Late Medieval Culture* (Cambridge University Press 1997) .

<sup>5</sup> C Warren Hollister, *Medieval Europe* (New York: John Wiley and Sons 1964).

<sup>6</sup> E Peters, *Heresy and Authority in Medieval Europe* (London: Scolar Press 1980) quoting Canon I of the Confession of the 4th Lateran Council p174.

reflected in the theology of the time. The religious art of the age was a central medium of communication and can clearly be seen to have evolved in line with popular devotion over the period. This is most clearly illustrated by examining the way in which the crucifixion was depicted. It evolved over time to show increasingly graphic representations of Christ's suffering.

The earliest claimed depiction of Christ on the cross is to be found on a seal dating from the fourth-century.<sup>7</sup> It shows a simple figure with extended arms, standing on a pedestal with the twelve apostles around. A fifth-century ivory carving<sup>8</sup> is the earliest detailed representation. Christ is shown beardless on a cross with arms outstretched and nails clearly visible in the palms of his hands. The feet are side by side, not crossed and appear to be resting on a small platform. Christ's face is passive and no signs of suffering are shown in the carving apart from the adjacent, more gruesome, representation of Judas hanging himself. A Syrian crucifixion scene<sup>9</sup> of 586 shows Christ with the two thieves. He is nailed through his hands and separately through his two lower legs. He is also draped to cover his nakedness to give Christ a sacerdotal majesty and in dying to be recognised as the priest of the new law. The face appears sublime rather than anguished. It is the first known scene of Calvary depicting what was imagined to be the reality of the scene, with the soldiers offering the vinegar-soaked sponge, casting lots or holding the spear, according to their role.

Over the next 500 years the numbers of depictions of the crucifixion which have survived are few. Except in Syrian art, where the realism of the crucifixion tends to be represented more faithfully, illustrations of the crucifixion of Christ do not, generally, display the suffering. It was common, for instance, to show the feet of Christ resting on a ledge, a device which deliberately minimised the extent of the depicted suffering.

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<sup>7</sup> Reproduced in Roland Bainton, *Behold the Christ* (New York: Harper and Rowe 1974) p 145.

<sup>8</sup> British Museum.

<sup>9</sup> Rabula Gospel, Biblioteca Medicea, Laurenziana.

It is not until the art of the cathedrals of the 13th century that the suffering is shown in its true awfulness. A window at Poitiers shows a blood-red cross. The relief sculpture at Ardèche, while still maintaining the convention of showing Christ's feet at rest on a ledge, shows the arms drooping and the head hanging.

By 1250 artists had started to depict the dead Christ displaying the wounds of His suffering. When showing him on the cross before death the convention of showing a footledge was abandoned. Also it was not until the thirteenth century that Christ on the cross was depicted wearing the crown of thorns. By then an "insatiable imagination set to work on all the circumstances of the passion".<sup>10</sup>

As Bainton observed, "commonly in the twelfth century and thereafter the European mind was obsessed by a sense of guilt to be expunged through the sacrificial death of Christ. The measure of this sacrifice was depicted by showing him dead upon the cross."<sup>11</sup> To the agony of the depiction of the physical death was added the lamentations of Good Friday with the dead body of Christ being held by his mother, his head cradled in her lap. One of the best known examples of this theme is by Giotto painted, as Mâle observed "with his incomparable power."<sup>12</sup>

To reinforce the theology it became increasingly common for the image of the crucifixion to be taken from inside the church to the main entrance to be displayed to the world at large, as at St Gilles du Gard Abbey church in France. In following centuries the crucifixion continued to be shown in graphic detail with artists more and more seeking to depict the depth of the suffering of Christ. A good example of this is to be found in the work of Giotto in the late 13th and early 14th centuries. Gombrich describes how Giotto abandoned the old formats which required a painting to be little

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<sup>10</sup> E Mâle, *Religious Art in France in the the middle ages* (Princeton: Princeton University Press 1978) p85.

<sup>11</sup> Roland H Bainton *Behold the Christ* (New York: Harper and Row 1974)p148

<sup>12</sup> Mâle p23

more than a substitute for the written word to give the illiterate access to christian teaching, and introduced a new realism. "He shows us so convincingly how each figure reflects the grief of the tragic scene that we sense the same grief in the cowering figures whose faces are hidden from us."<sup>13</sup> All restraint was abandoned. German and Spanish artists developed themes started by their French and Italian predecessors and while no detailed conclusions can be drawn from this observation, there appears to be a coincidence between the development of graphic depictions of the crucifixion, especially in Spain, and the increase in examples of stigmatisation in the country. It may also be noted that instances of stigmatic wounds in the wrist were only observed after the revelation, by negative photography in 1898, that the wounds of the Turin shroud image took that form.

Furthermore the overwhelming majority of stigmatics have been Roman Catholics with stigmatisation being almost unknown in the historic orthodox and celtic churches which did not follow the same tradition of realistic religious art. The only exception to this being the case of Heather Woods whose Holy Celtic Church relied heavily on western imagery whatever its claimed antecedents as an Orthodox off-shoot.

The facts surrounding stigmata, both the mechanisms of marking and issues of authority, are so complex and interwoven that to establish conclusively a simple link between popular iconography and stigmata is unlikely to be possible. However, the examples of the six contemporary cases do show a strong circumstantial link. In the case of Father Jim Bruse, a single familiar image appears to have been highly influential in determining that his wounds appeared in his wrists as opposed to his palms. Yet, arguably, it is the combined force of the images of suffering which have been more influential, reenforced by their cultural setting.

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<sup>13</sup> E H Gombrich *The Story of Art* (London: Phaidon 1950) pb p147.

To illustrate the potential capability of cultural background together with iconography to produce experiences which are capable of being interpreted as paranormal, a modern form of non-religious stigmatisation may be taken. Underpinning and feeding this modern form of stigmatisation is the iconography of the science fiction genre, to be found in cinema and television films, pulp-fiction and comics. Over the last 30 years a body of anecdotal evidence has gathered concerning individuals who have claimed to have encountered alien visitors and been physically marked by the experience. A man in Gulf Breeze, Florida, where a number of Unidentified Flying Objects (UFOs) are reputed to have been sighted, witnessed what he believed to be an alien spacecraft. The experience left him with physical marks in the form of punctures of the skin on the back of his left hand. A set of seven equally-spaced marks in a circle around a central mark bled, it is reported, for a number of days.<sup>14</sup> Far more lurid accounts of stigmatisation have emerged from individuals who give accounts of being taken aboard alien spacecraft and there intimately examined. The parallel which exists between this and stigmata is that, in certain instances, abductees have reported and demonstrated on their bodies wounds which they claim to have been caused by their abduction experience and the tests which were carried out on them. "Abductees report no pain associated with such scars....which range in shape from small scoop marks to elongated thin scars. These scars are permanent records of abduction experiences....Scarring is found not only on the body surface. It may occur internally as well. Abductees have reported anomalous scar tissue in their vaginas, gall-bladders, nasal passages and sinuses....A less harmful but disconcerting physical effect is the anomalous bruise. It is common for abductees to wake up with black and blue marks on their bodies. Men discovered large bruises around their genitals. Both sexes find numerous black and blue marks on their arms and legs right after an abduction."<sup>15</sup> Other symptoms including headaches and discharges, which, when combined with the above account are suggestive of the clinical accounts of psychogenic purpura.

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<sup>14</sup> The Cerealogist no.14, 1995.

<sup>15</sup> D Jacobs *Secret Life* (New York: Simon and Schuster 1993 ) p243 .



Some accounts are reminiscent of those of Jane Hunt, Angela of Foligno and other stigmatics who recounted visions in which they held a child in Heaven who, in Jane Hunt's case became increasingly heavy. This is an account of an experience given by a female abductee who claimed that the aliens who had abducted her wanted her to hold a baby. "So they asked me if I wanted to pick her up.... The nurse woman handed her to me. I kind of liked holding her, but I was so afraid."<sup>16</sup> The reports of abduction are more often made by women than men and in Jacobs' study the ratio of women to men selected for study was 22:17.<sup>17</sup> This figure is noticeably similar to the gender ratio of living stigmatics.

Attempts to explain abduction accounts range widely and include hysterical contagion, fantasy, fraud, repressed memory of abuse, multiple personality disorders and psychosomatic causes, all hypotheses familiar to the student of stigmata. The framework within which any explanation may be placed is also a religious one, since the belief system of the abductees is both a cosmology and a set of ideas in which beings superior to humans interact with the people of the earth. Indeed the gradual build-up of sightings could be interpreted, as Brookesmith and others have done, as meaning that aliens are revealing themselves to humankind in the way that God revealed himself first to the Jews and then, through Christ, to the whole world. "In UFO-related reports there are a cluster of symbols and images that directly parallel what seem to be almost universal religious symbolism and imagery."<sup>18</sup> The mandala-like nature of the flying disk and its interpretation as an archetype of healing and wholeness were pointed out by Jung.<sup>19</sup> Jung took the view that the flying discs were archetypical images similar to those found in dreams.<sup>20</sup> Brookesmith observed, "if the objects

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<sup>16</sup> Jacobs p175.

<sup>17</sup> Jacobs Appendix B p327.

<sup>18</sup> Peter Brookesmith, *Communion Cups and crashed saucers* lecture to Fortean Times Unconvention 1995.

<sup>19</sup> Carl Jung, *Man and his Symbols* (London: Aldus Books 1964) p249.

<sup>20</sup> Carl Jung *Flying Saucers: A Modern Mythg of Things Seen in the Sky*, (New York: New American Library 1959).



themselves suggest the numinous and miraculous, their occupants are even more remarkable.. not just different but vastly superior".<sup>21</sup> They are the beings who leave the marks, supposedly, on the abductees. The parallels in imagery go further. Here George Rutland's experience is relevant on two counts. Firstly because of his account that the palms of his hands had been stigmatised not by lesion but by a pigment the colour of dried blood, which he described as a weird substance, something between a liquid and a powder: abductees have also spoken of finding an unidentified liquid substance on their clothing or bodies. Like the substance reported by George Rutland the liquid has not been not kept for analysis. Secondly because like St Francis and others, his experience involved strong beams of light emanating from a source. Brookesmith described the abduction scenario as rife with similar symbolic "religious routines. Close encounters with aliens frequently involve aliens zapping victims with a beam of light.. the light of revelation that knocked Saul of Tarsus down, that amazed the shepherds at Bethlehem when glory shone around and that revealed the Paraclete at the baptism of Jesus."<sup>22</sup> Or, to take the Islamic equivalent. "The comer by night....the star of piercing brightness".<sup>23</sup>

The aliens are also said to be bearers of messages and in the main the messages are apocalyptic. The abductees tell of warnings from beings of superior intelligence that the planet is due to be destroyed by an ecological disaster of human cause. They offer to help avert the disaster, or, to put it another way, to redeem the world from the folly of the human race. "These message echo the fundamentals of religions anywhere....they suggest the means to human redemption and the purpose of life."<sup>24</sup>

Of the many religious archetypes associated with the study of UFOs and claims of alien abduction there is one which is particularly striking. The case has been made for

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<sup>21</sup> Brookesmith.

<sup>22</sup> Brookesmith.

<sup>23</sup> Surah LXXXVI 1-3 *The Qur'an* translated by M H Shakir (New York: Tahrike Tarsile Qur'an Inc 1988) p409.

<sup>24</sup> Brookesmith.

identifying the Holy Grail as a wide, silver dish or spinning wheel.<sup>25</sup> Brookesmith suggests current UFO mythology is a new form of the old legend in which the secret of the Grail is kept by the crippled Fisher King. "But really we are all Grail keepers, staring in pain and bewilderment at the debris of our spiritual life, unable to heal ourselves. The degree of our degradation as a civilisation is shown in the inability of this most contemporary myth to speak to our condition. The UFO religion remains incoherent, locked in its pathological mode of victim, martyr and masochist, because it is deluded that the proof of its truth must take the form of solid scientific evidence."<sup>26</sup>

To expect the ultimate truth of stigmata to emerge in the form of solid scientific evidence is, it can be argued, a similar delusion. The imagery employed by the "victim soul", Christina Gallagher, to describe her journeys to heaven and hell, the 'stigmartyr' of Heather Woods, the pain of the stigmatics can only be investigated scientifically to a very limited degree. It is the myth and the allegory created by, and employed by, the stigmatics and the followers which needs to be understood.

That there appears to be common ground linking stigmata and alien abduction is not solely being argued in abstract isolation from events. The Sicilian stigmatic Giorgio Bongiovanni, additionally claims personal contact with the alien beings of Ufology and, without the prompting of the theoreticians, he appears to have drawn the two archetypal experiences together into one.

His reputed stigmatisation occurred in April 1989 when he had a vision of the Virgin Mary, in a not untypical experience for a stigmatic. He saw her, it is reported,<sup>27</sup> as a bright shining light. He was instructed to travel to Fatima where he again encountered the Virgin Mary and was stigmatised by two rays of light striking his hands, feet, left

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<sup>25</sup> J Campbell *Creative Mythology* (London: Viking 1969).

<sup>26</sup> Brooksmith.

<sup>27</sup> *The Cerealogist* no. 14, 1995.

side and forehead. The marks did not show instantly but emerged over time, with his hands being wounded first, followed by his feet and side. The marks are now permanently visible and include a cross on his forehead. It is said the coagulated blood from his wounds form into other religious images. In his visions, Giorgio Bongiovanni continues to encounter beings of light which he describes as extra-terrestrial in origin. The beings have, by his accounts, explained to him that he is the reincarnation of one of the visionaries of Fatima and that the aliens are leaving warning messages for the human race in the form of crop-circle pictograms. He believes he has been chosen by the aliens to take a message of warning from them to the human race that great natural catastrophe is imminent, as is the second coming of Christ, around the turn of the millennium.

The essential message of Giorgio Bongiovanni is contained in the title of the journal with which he is active, *Non Siamo Soli*.<sup>28</sup> His message is that other intelligences within the universe wish to interact with the human race. Jung said of the saints who received the stigmata that they become in "a visible and concrete sense....carriers of the Anthropos-image... the gigantic symbolic human who embraces and contains the whole cosmos".<sup>29</sup> "The anthropos, in this context, being the cosmic man. The symbolism of Giorgio Bongiovanni may be seen as one and the same as that of the traditional stigmatics except that he draws the boundaries of the cosmos more widely than the earth.

How the specific images displayed by the stigmatics, and which emerge in their visions, are selected by them, is open to speculation. The selection is taken from familiar iconography which is subject to change over time. The images drawn from art do not remain static. In the way that dreams can seem to take harmless objects from every-day waking life and manipulate them into objects of nightmare terror, so the

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<sup>28</sup> We are not alone.

<sup>29</sup> Jung, *Man and his Symbols* pp 200-203.

stigmatics take standard religious themes and mould them into their visions. The images they produce are unique to themselves yet simultaneously archetypal. The image of suffering displayed by the stigmatic is instantly recognised. It is the pain of God, the omnipotent, identifying inseparably with the suffering of the outcast at the moment of his greatest ignominy. It is this suffering of the God incarnate which became increasingly part of popular devotional focus in the Catholic world 800 years ago and which art began to portray. As this new focus of devotion became established, and artists became ever bolder in their realistic illustration of it, so simultaneously the era of the stigmatics began and from that time stigmata became an established form of piety. While external influences and interpretations evolved, the essential symbolism and pattern of the wounds remained unaltered.

Within the field of communications studies the term sign has a specific meaning. It is that symbol, logo or brand-mark by which a set of values or ideas may be recognised. It is defined by its properties in that it has a physical form, it refers to something other than itself and is used and recognised as a sign.<sup>30</sup> The sign is also capable of movement or evolution in the way that Nixon defines the concept. This concept suggests that movable signs "can be adopted by audiences and taken into new areas of meaning".<sup>31</sup> Stigmatisation is the sign by which a particular form of christian devotion may be recognised. It may also be seen to be a movable sign.

As was demonstrated earlier there is a continuum traceable from the first stigmatics to the present day in terms of shared experience which enables the observer to conclude that the modern stigmatics and those of medieval times share a common phenomenological experience. However, that continuum involves evolution and a shifting overlay of transitory cultural influences which reshape the presentation of the phenomena. Thus the gender balance alters as does the geographic distribution and the

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<sup>30</sup> T O'Sullivan, J Hartley, D Saunders, M Montgomery, J Fiske, *Key Concepts in Communications and Cultural Studies* (London: Routledge 1994) pp284-285.

<sup>31</sup> Neil Nixon *Fortean Studies Vol 3* (London: John Brown Publishing 1996) p285.

sources of influential iconography. Nevertheless the essential archetypes associated with and which are represented by stigmatisation remain constant. Determining whether these archetypes are selected and adopted consciously or unconsciously, and whether if the latter, the unconscious source of the archetypes is a Jungian collective unconscious or the stigmatic's sole unconscious memory, is beyond the scope of this study. What may be argued is that through their stigmatisation the recipients of the marks become as living allegories. In their bodies and through the stories that they relate, and which become associated with them, they figuratively represent and convey meaning which is both instantly and universally recognised and pertaining to the nature of God. The saints who receive the stigmata, wrote Jung, become carriers of the Anthropus-image in a visible and concrete sense, and thus symbolise "the working of the Holy Ghost among men".<sup>32</sup>

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<sup>32</sup> C Jung, translated by RFC Hull, *Psychology and Religion: West* (London: Routledge 1958) 1991 edition p185.

### Chapter Thirteen: questions of authority

When examining the history of stigmatisation, two striking features emerge. The first is the phenomenon's emergence as an established form of piety in the 13th century. The second is the strong female bias in reported cases. An exploration of the factors contributing to these two notable features throws further light on the nature of the phenomenon. These factors are macro-social and further suggest that restricting an examination of stigmata to that of an individual expression of devotion, or one of only micro-social interest, is insufficient.

In that stigmata are an expression of an incarnational theology, it is proposed within the structure of this chapter that an examination of the medieval origins of the phenomena and their gender bias, should start with an examination of other forms of devotion to, and contact, with the incarnate Christ and be followed by an exploration of the phenomena within the wider social context. St John the evangelist wrote, "the word was made flesh and dwelt among us".<sup>1</sup> The Gospel writers tell of a celebration of that embodiment of God, in Jesus, being instigated at the last supper as a perpetual memory of Christ's death and sacrifice.

Within the catholic tradition, the priest has an authority invested in him to mediate between the people and God. He is given the direct access to the body of Christ in the eucharistic prayer of consecration plus the authority to grant absolution of sins in the name of Christ. While it is acknowledged by the Roman Catholic church that all baptised members share in Christ's priesthood and all have a role to play at the eucharistic sacrifice, the power to consecrate and to actuate the sacrifice is divinely committed to bishops and priests.<sup>2</sup> This position, which it is said dates back to Ignatius of Antioch at the end of the first century, was codified at the Reformation in response to

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<sup>1</sup> John Ch I v 14.

<sup>2</sup> R Pasco and J Redford, *Faith Alive, a new presentation of the Catholic Faith*, commended by Roman Catholic Cardinals of the British Isles 1988 (London: Hodder and Stoughton 1988)

Protestant claims that Christ's priesthood was unique and all Christians shared in it equally. "Since, in the New Testament, the Catholic church has received from Christ the holy, visible sacrifice of the eucharist, it must also be acknowledged that there exists in the church a new, visible and external priesthood into which the old one has changed."<sup>3</sup> It is also the case that, within the western tradition of christianity, the churches from which stigmatics have emerged have, in almost every instance, been churches where this pattern of priesthood has been accepted. The one notable exception to this is the church<sup>4</sup> of which the child stigmatic Cloretta Robinson was a member. It is significant however that in her church, although the priesthood of all believers was accepted doctrine, as a minor Cloretta played no direct part in the shared authority of her congregation.

Essential to this pattern of priesthood is the concept of authority. Members of the church are authorised by the hierarchy of the institution, an authority traced back through the apostolic succession to the first apostles, to perform their allotted role and in many instances accept an obligation of obedience to others placed over them. It was this good-ordering of the church which in the 13th century was questioned. From the vantage point of history, the resultant crisis of authority can be clearly seen to have coincided with the emergence of, on the one hand, certain forms of passionate popular devotion and on the other, new collective expressions of heresy. In the medieval context the forms of passionate devotion involved and incorporated the development of a popular lay-driven emphasis on the physical sufferings of Christ. 'Lay' is here used to describe all those people who were non-clerical, that is, those who had not themselves been granted authority by the church to have direct access to the sacred mysteries.

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<sup>3</sup> R Pasco and J Redford p 175 quoting proceedings of 23rd Session, Council of Trent 1563 translation by John Redford.

<sup>4</sup> An independent Baptist church in California.

In medieval times all woman were members of the laity. Even the powerful abbesses with quasi-episcopal authority were unable to consecrate the elements at the eucharist. Men with a religious vocation had the opportunity and the encouragement to enter priestly orders. Women were excluded from the priesthood, as remains the case in the Roman Catholic church today.<sup>5</sup>

This suggests the hypothesis that the subsequent history of stigmatisation as a predominantly female experience relates to it being a lay experience, as women were denied the ultimate expression of their devotion to the body of Christ. This approach challenges the previously held common assumption that women were more likely to receive the stigmata because their sex is more prone to 'hysterical' behaviour. This latter view, that women are intrinsically more emotional, imaginative, religious or hysterical than men was previously accepted with little question by earlier investigators, who were, in the main, male members of the Roman Catholic church. To quote, for instance, Farges, who in 1926 received the approbation of Pope Benedict XV, "(hysteria) is an illness... ten times more frequent with the woman than the man".<sup>6</sup> In 1951 Thurston wrote, "it remains true that at normal times, and especially under the conditions in which girls were formerly brought up, women were and are much more subject to hysterical fits than men. Now, while in the course of the last seven centuries there have been an immense number of female mystics about whose complete stigmatisation no doubt is possible, there are only two quite clear cases of men being externally marked with all the five wounds. Moreover, even here we have no evidence of periodic bleeding on successive Fridays, such as is common in female stigmatics. The natural inference would seem to be that what predisposes to the reception of the stigmata is not unusual virtue, but some form of nervous susceptibility, more often met with in women than in men....I venture to say that there is hardly a

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<sup>5</sup> To opponents of the ordination of women to the priesthood, the term priest can only be male as the priest represents Christ at the eucharistic table, and Christ became incarnate as a man.

<sup>6</sup> Farges p 471.



single case (of stigmata) in which there is not evidence of the previous existence of a complication of nervous disorders".<sup>7</sup>

What appears to have been overlooked by Thurston and Farges is that prior to the emergence of stigmata, other physical manifestations of religious devotion had been known and were generally associated with men. One example was instanced earlier involving certain shipwrecked crusaders, but other cases have existed. One of these dates from the First Crusade of the 11th century. Cohn tells of the French peasants who joined the armies on the way to Jerusalem, and about whom stories developed that when they were killed in action, miraculous crosses were found on their shoulder-blades.<sup>8</sup> These stigmata had a particular significance in medieval eschatology since it was said that such a mark had been borne by Charlemagne and would be borne by the last emperor before the Apocalypse.

While the views of Thurston and Farges are understandable within the context of the evidence available to them, they need to be radically revised in the light of the statistical evidence of the last 50 years which has seen the ratio of female to male stigmatics alter dramatically from 6.5:1 to 1.5:1. Although this ratio still favours females, it is a remarkable change which calls for a re-examination of previous theories explaining the gender imbalance. Significantly, the first male stigmatic, St Francis, was not ordained and operated outside the normal structures of the church, often as a challenge to its authority. Also the later 20th century cases include for the first time three male priests and one case, that of George Hamilton, involving male periodic bleeding, thus calling into question the previous implication that stigmatisation was essentially a female experience, as only women had the innate capacity to experience repeated and predictable haemorrhaging. The explanation for this gender bias also involves wider issues of authority. In the last 100 years, the social forces which previously channelled

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<sup>7</sup> Thurston p 123.

<sup>8</sup> Cohn p 65.

female devotion to the Body of Christ into personal acts of piety, while men were expected and permitted to channel their devotion into the public activities which the church controlled, have changed. Individualism too has not by-passed the church. The male vocation to the priesthood has become less attractive and the control of the church over its priests less rigid with an increasing number of priests forsaking their orders for the secular life.

Questions now arise as to why in Christendom in the 13th century a new lay type, emphasis or style of religious devotion emerged. Reaching an understanding of the 13th century emergence of stigmata involves an examination of the condition of medieval western European Christendom. Caroline Walker Bynum writes: "The first five hundred years of Christianity had established that a male clergy, whose authority was based on office, would serve as the fundamental channel of God's message and God's grace to the laity - that is all men (including monks) who were not clergy and all women. But despite the continuing importance of ecclesiastical office, the early Middle Ages have frequently been seen as the period of 'monastic spirituality,' both in the sense that monks were the vicarious worshippers for all of society and in the sense that the monastic role was held up to all as the christian ideal. To ordinary people in the 9th and 10th centuries contact with the clergy was often limited to baptism, burial and paying tithes....Salvation, for oneself and one's relatives, came by making gifts to monks and nuns who said the prayers that assured a right relationship to God....The most significant locations of holiness and supernatural power were the relics of saints. It was the Gregorian Reform movement of the mid-11th century that created a church headed by the clergy and began the process of locating supernatural power most centrally in the eucharist, which the priest controlled."<sup>9</sup>

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<sup>9</sup> C Walker Bynum, *Jesus as Mother, studies in the Spirituality of the High Middle Ages* (California: California University Press 1982) pp 9-10.

While the priest had control, there was nevertheless a growing demand for involvement. Eucharistic devotion from the last quarter of the 12th century, wrote Ernest McDonnell, "was marked by eagerness to see the host at the moment of consecration and thus to allow communicants this more sensuous contact with the humanity of Christ... Gazing on the miraculous ministered to a craving for the miraculous."<sup>10</sup>

The eucharist was refigured in the 11th and 12th centuries, "to create a new structure of relations, thus modifying the symbolic order and the social relations and political claims which could be attached to it."<sup>11</sup> A change of this nature in theological emphasis in medieval times was not a matter of interest limited to ecclesiastics, but something which could have a radical effect on social and secular perceptions. For, as Rubin pointed out, at that time the language of religion "described and explained the interweaving of the natural and supernatural with human action".<sup>12</sup> Rubin maintained that from around 1100, the paradigm which emerged within society as a whole was sacramental. It was eucharistically centred and this over-view of life matured and was disseminated over the following two centuries in Europe and became subject to "wide-ranging creativity and application".<sup>13</sup>

"Both men and women could use the sacrament as a departure, or see it as a distraction; They could join in Christ's suffering identifying with it either as the sympathetic vulnerability of a weak feminised body...or in terms of submission to trial, as it could have been for the male recipients of stigmata."<sup>14</sup>

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<sup>10</sup> McDonnell p 312.

<sup>11</sup> M Rubin *Corpus Christi, the Eucharist in Late Medieval Culture* (Cambridge: Cambridge University Press 1997) pb p319.

<sup>12</sup> Rubin p1.

<sup>13</sup> Rubin p347.

<sup>14</sup> Rubin p319.

In 1264 Pope Urban IV ordered the church, as mentioned earlier, to observe the feast of *Corpus Christi*. The feast, which is still observed today involves, indeed centres upon, the veneration of the blessed sacrament. Earlier, in 1215, when the Fourth Lateran Council had confirmed transubstantiation as a tenet of faith, it had been within the context of the establishment of an authoritative confession of faith against which the heresies of the Cathars and Waldensians and others could be judged. One consequence of this was that while attendance at mass was encouraged, the lay participation in the communion was reserved for special occasions. The stipulation of the Council that it was the duty of all christian adults to confess and receive the sacraments of the eucharist at least once a year at Easter, was as much an imposed limitation on lay people communicating as it was an encouragement. There were fears that the more people who partook of the real body and blood of Christ, the greater the possibility that the elements could be deliberately or accidentally desecrated or mishandled. Thus a further barrier between the laity and their access to Christ was raised. Symbolic of the Church's ambiguous approach, which wanted lay participation in the sacraments encouraged and yet contained, was the development of the rood screen as an architectural feature. The screen, placed across the church between nave and choir, obscured the congregation's view of the sanctuary.<sup>15</sup> The rood screens took their name from the carvings and depictions of the crucifixion with which they were commonly decorated.

The adoration of the host and the feast of *Corpus Christi* may be seen as the compromise between church and laity which the church hoped would enable the laity to revere the body of Christ while only being allowed a limited and controlled access to it. The introduction of the new feast may be seen as the response by the church to several challenges to its authority which had emerged. The 11th and 12th centuries constituted a period when several groups sought an experience of God for themselves other than through the mediation of the institutions of the church. By the end of the 12th century and in the early years of the 13th century, individualism had not evolved sufficiently

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<sup>15</sup> C Brooke, *Medieval Church and Society*, (London: Sidgwick and Jackson 1971).

within European culture for individuals to contemplate an expression of their unique personality in isolation from a group, but it enabled new groups to evolve, within which individuals could explore the inner mysteries of their own relationship with God. Hollister attributes this in part to the process of medieval urbanisation which facilitated the fermentation of new ideas and the expression of dissatisfaction with the existing order. "Although the vast majority of Medieval townsmen remained loyal to the church, a troublesome minority... turned to new anticlerical sects... Many of the anticlerical sects crossed the boundary between orthodox reformism and heresy by preaching without episcopal or papal approval."<sup>16</sup> One such sect highlighted by Hollister, the Waldensians<sup>17</sup> earned church disapproval through its denial of the sacramental powers of the ordained priesthood. This was an example of a reaction of a new, frequently literate urban population against the clergy. As Rubin put it the reaction against "the raising of... fallible, sometimes ill-lettered men to the status of mediator between Christians and the supernatural."<sup>18</sup>

The 12th and 13th centuries also saw a rise in the number of women seeking a religious life. Partly this was due to demographic reasons. With increasing numbers of men absent on crusades, or killed during the religious campaigns of the period, there were more women than men of an age to marry, and an alternative to marriage and procreation was required. Add to this the idea that virginity was a calling deemed every bit as worthy as motherhood, in that it was seen as a source of spiritual power, and it may be seen that conditions were right for a growth in women's religious movements.

The established monastic orders throughout Europe, especially the Cistercians and Dominicans, saw an expansion of convents. Later in the 13th century (notably in Germany, Holland and Belgium), new lay religious communities also came to be established. They attracted considerable interest from women, some of whom were

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<sup>16</sup> C Warren Hollister, *Medieval Europe* (New York: John Wiley and Sons 1964) pb p220.

<sup>17</sup> Founded (c1173) by and named after Peter Waldo, a merchant from Lyons.

<sup>18</sup> Rubin p348.

widows of the crusaders. A notable feature of certain of these communities was that the Beguines, as the women members came to be known, took no vows but dedicated their lives to an exploration of their own individual spirituality. In particular, in many cases, a devotion to the eucharist and humanity of Christ concentrated this exploration as an intense contemplation of the body of Christ and his physical suffering. This led to some contemplatives, Beguines and others, experiencing the suffering for themselves as if in imitation of Christ. Ziegler believes women, "took much further than men the prevalent desire to live in imitation of Christ."<sup>19</sup> The ultimate imitation of Christ was to suffer as Christ, and the ultimate reward was to share the wounds. Ziegler points out that after St Francis, stigmatisation became initially a predominantly female experience and that it was consistent with the practices of many women of the time who "fasted, scourged themselves, rolled their bodies in nails, bled profusely and wept."<sup>20</sup> This approach carried a strongly-implicit belief that, in the pursuit of salvation, the new independent religious and members of the new communities had no need for intercessors, and that the road of individual piety was open not just to priests, but to the laity, in particular women, who were specifically excluded from the priesthood.

However the focus of individual devotion remained the eucharist and the church could veto displays of excessive behaviour by denying the sacraments. In the mid-13th century the Chapter of the Abbey of Citeaux in France agreed to forbid communion to those who could not retain their senses during the celebration of the mass. The very fact that the church had a veto carried with it the understanding that any action or reported experience which did not attract overt disapproval or a specific prohibition, was implicitly condoned and confirmed by the church.

A new situation therefore existed in the 13th century for lay people to explore their deep inner spirituality and personal relationships with God under the protection and control,

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<sup>19</sup> J Ziegler, *Reality as Imitation* contributor to *Maps of Flesh and Light* edited by U Wiethaus (New York: Syracuse University Press 1993) p126.

<sup>20</sup> Wiethaus p 121.

if not always the encouragement, of the church. Since this involved lay people by definition the majority were women. Men with a religious vocation had the priesthood as an option. Therefore, there emerged in much of Europe by the 13th century, a number of women of conspicuous piety about whom, and around whom, stories of mysticism began to develop. Francis of Assisi was unusual in being a man who preferred not to exercise the option of priesthood, and about whom reports of mysticism were made. A delicate balance of power existed. Women corrected priests who in ignorance deviated from the correct liturgy. Those with claims to the mystical life were empowered by what they understood to be divine revelation and grew in self-confidence. They chose and dismissed their confessors. Indeed the power of the holy women grew, asserts McNamara, from the 12th to the 14th centuries "until many champions of orthodoxy feared it more than heresy itself."<sup>21</sup>

Yet faced with the potential defection of a substantial portion of its membership, McNamara writes, the church determined to make use of those whom they would normally have preferred to silence. Knowing that ultimately their access to the sacraments depended upon the clergy, the women submitted to the authority of the church, but in a way which was so exaggerated that it effectively had the opposite effect. While the flagellation and fasting of many pious women was intended to reinforce the strength of the sacraments, McNamara claims the practices fostered an independence which alarmed the church and the matter was aired as one of episcopal concern at the Second Council of Lyons in 1274. "Orthodox women submitted themselves to clerical authority as soldiers under military discipline. They fasted and mortified their flesh to train their souls for battle."<sup>22</sup>

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<sup>21</sup> Jo Ann McNamara, *The Rhetoric of Orthodoxy*, contributor to Wiethaus p10.

<sup>22</sup> *ibid* p13.

When Mary of Oignies was forbidden from enlisting in the crusade against the Albigensians<sup>23</sup> she increased her mortifications. She was just one of the women of the time who according to McNamara developed their weapons with courage and initiative. "Where men fought heresy with theology and the stake, the tangible power of the institution they controlled, women fought with their own bodies. Self-inflicted wounds enhanced their identity with Jesus. The stigmata became a certain sign that divine power endorsed the struggle."<sup>24</sup> This notion that within the medieval context women fought with their own bodies parallels with that identified and reviewed earlier of Miller, who observed how women used the self-infliction of wounds in a secular and modern context.

The largely female emphasis on adoration of and devotion to the eucharist in the 13th century has also been described by Caroline Walker Bynum. "Margaret of Ypres (d 1237) and Christina Mirabilis (d 1224) could not bear to be without the eucharist. Lutgard of Aywieres (d 1246) took such pleasure in it that her Abbess once compelled her to omit it as a penance....Francis of Assisi seems to have turned to the mystical women of the Low Countries in a desire to partake of their Eucharistic piety. Agnes Blannbekin (d 1315) chose to become a Beguine in Vienna so that she could communicate more frequently....The psychological and spiritual reasons for this female concentration on the eucharist seem to have been fundamentally the same as the reasons for the flowering of women's mysticism - this is, the need for a substitute for clerical experience. If Christ was incarnated in the hands of the celebrating priest as in the Virgin's womb, might he not also be incarnated within the communicating nun or Beguine, and might not each of these types of spiritual maternity bear fruit in spiritual children?"<sup>25</sup>

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<sup>23</sup> Also known as the Cathars, the heretical movement from the town of Albi in France which arguably presented the greatest threat to papal authority of all European based heretical movements.

<sup>24</sup> Wietaus p13.

<sup>25</sup> Walker Bynum pp 256-257.



Devotion and an ardent love for the humanity and passion of Christ often took the form of visions and raptures associated with the veneration of the body of Christ. Christine of Stommeln (1242-1312) viewed her participation in the eucharist as the perpetual commemoration of her marriage to the heavenly bridegroom. If, as the church taught in marriage, two people became as one flesh, her devotion to Christ necessarily took a physical form. Also, if sin is the separation from God, it follows that a sinner's salvation is in seeking the closest possible identification with God. This can be achieved in the form of the closest possible identification with the body of Christ. In 1268, Christine of Stommeln received stigmata, with the wounds in her hands, feet, forehead and side bleeding every Easter. Her preserved skull<sup>26</sup> shows a series of regular markings, suggestive of indentations made by a crown of thorns. If stigmata are explained as solely as a psychosomatic dermatological phenomenon, indentations would not have occurred. Their existence, assuming no congenital deformity or other injury was involved, might suggest pious self-mutilation as the cause. As with the Blessed Angela of Foligno<sup>27</sup>, the Blessed Vanna of Orvieto<sup>28</sup>, Helena Brumsin<sup>29</sup>, Elizabeth of Herkenrode<sup>30</sup>, the Blessed Helen of Veszprim<sup>31</sup> and many other stigmatics of the period, Christine of Stommeln, it may be hypothesised, combined her excessive devotion to the eucharist with pious physical self-abuse to participate in the meaning of Christ's Passion even more deeply.

The purpose to which the devotions and experiences of these women were put in the 13th century was particular to its age. This may be seen from examining the life of Gertrude of Helfta, who received invisible stigmata, the pain but not the visible marks. Gertrude of Helfta described herself as a servant of others: her role was to translate scripture; compose prayers; to offer counsel and spiritual advice. Her vocation was

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<sup>26</sup> at Nideck in France.

<sup>27</sup> 1250-1309.

<sup>28</sup> 1264-1306.

<sup>29</sup> d1285.

<sup>30</sup> d1275.

<sup>31</sup> dc1249.

both preaching and the cure of souls. Walker Bynum writes that her role was also to "serve as a channel of information directly from Christ... serving herself as a mediator, a direct channel of grace and forgiveness that supplements and sometimes replaces the sacraments and the priesthood".<sup>32</sup> To do this she had to demonstrate an authority which both superseded that of the church and yet could not be denied by it. This authority derived from a devotion to that which was in the gift of the church, namely the eucharist, but it was a devotion which took such a form and intensity, that the devotee, through visions, raptures and ultimately the pain of stigmata, could be seen to be having direct communion with God. While the church could on occasions attempt to dampen down such excess, it could not deny the piety of the women involved or the existence, when it was apparent, of the sign of God's supernatural favour, the stigmata.

It can therefore be argued that stigmata as phenomena appeared as a consequence of the church's elevation of the eucharist which, in its turn was a consequence of the pressure of popular devotion. The laity, particularly women, discovered through a personal devotion to the eucharist a ministry every bit as valid as the priesthood. This personal devotion was intense and mystical and centred on being in empathy with Christ's passion. In certain cases the stigmata appeared as a consequence of (or as was argued at the time a reward for) this intense concentration on the sufferings of Christ. The stigmata, appearing to be supernatural in origin, were taken as a sign of God's favour, so re-enforcing the mystical ministry. Men had no need to follow this path. Those who wished to partake in a celebration, or contemplation, of the incarnation and humanity of Christ had the priesthood open to them. So it came about that until the case of Padre Pio in the 20th century there was no reported case of a priest receiving stigmata.

When a priest is ordained he accepts the authority of the church. In crude terms he accepts a bargain that in return for his submission to the church, he will not only be

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<sup>32</sup> Walker Bynum pp 170-196.

allowed access to the central mystery of the eucharist, the body of Christ, but also be granted authority of his own to act in the name of the church.

What the stigmatics of history have all had in common is a sense of exclusion. Women stigmatics have felt a sense of exclusion by virtue of their sex. A similar sense of exclusion has been felt by men who were, in conscience, unable to submit to the authority of that which they perceived as a corrupt church, or one in error.

Significantly, the only bishop to have had the marks, the 20th century Spanish Archbishop Clemente Dominguez, is a leader of a schismatic sect. He claims to have received visions of the Virgin Mary who imparted to him a series of declarations allegedly hostile to the Vatican. He requested but was refused ordination by the Archbishop of Seville but, in 1974, he travelled to Rome with two colleagues and there persuaded a Vietnamese archbishop, Petrus Ngo-dinh-Thuc, that Mary required him to ordain them as priests and then bishops. The unauthorised ordinations resulted in the excommunication of the schismatics. Nevertheless the now self-styled Archbishop Dominguez can claim, accurately, that his orders are in Apostolic line. His wounds take the classical form with the addition of a cross on his forehead.

Leaving that singular case aside, it can be argued that during this century, the secular climate of individualism and independence of thought has emboldened some recognised priests to feel that, despite their ordination vows they are in some way at odds with the church. Fr Jim Bruse received his wounds at a time when he says that he felt that he was excluding himself from the church through doubting his vocation. Up until his stigmatisation, Padre Pio had lived a most irregular life and for a long period, due to ill-health, had been directed to return and stay at his home and severely restricted in his celebration of mass.

The Roman Catholic hierarchy has traditionally viewed any new case of stigmata as a challenge to its authority. Fr Bruse has been disciplined by his Bishop and ordered to

make no further public statement. Padre Pio was, for many years, ordered to refrain from saying mass in public and even at his death<sup>33</sup> the Vatican had not officially accepted his marks as genuine. Caution is normally the reaction to a case and endorsement usually comes several generations after the stigmatic's death<sup>34</sup>. One common reaction is for the church to attempt to recapture its authority over the stigmatic if it has any power to do so. Members of religious orders in particular have been kept under close control. Those beyond the Church's reach have frequently been condemned as diabolic counterfeits.

The six contemporary stigmatics firmly state or stated a belief that their marks were in the gift of God and were given for a purpose. Christina Gallagher states that their purpose is to act as a symbol of authority or validation of her moral eschatological crusade. Jane Hunt believed the marks were to show her that she had a healing ministry. Father Bruse suggested the purpose of the marks was to authenticate the other mystical phenomena and encourage his congregation's revival. Ethel Chapman felt they were a reward for her faithful endurance of her illness, Heather Woods stated that the marks had a prophetic purpose. Only George Hamilton said that while he believed they came from God, he did not know why.

Notwithstanding the growing secularism of the present age, the devotion to the passion of Christ has been maintained fervently in many places, and possibly been given a new emphasis by popular devotion to the image of the Turin Shroud whose hidden negative image of Christ's wounded body only became widely known with the invention of photography. There is evidence too of an impatience amongst the laity today with the willingness of modern theologians to come to terms with modern scientific and secular thought. Evidence drawn from the experiences of Christina Gallagher and Fr Bruse suggest the existence of a popular longing for mystery which the church is not meeting.

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<sup>33</sup> 1968.

<sup>34</sup> The personal devotion of Pope John Paul II to Padre Pio is believed to be the explanation for the proposed exceptional early beatification of the priest.

Coincidentally, and perhaps consequently, not only have the instances of stigmata been maintained and even grown in the 20th century, the ratio of female stigmatics to male has radically altered, as mentioned above. The 20th century has conveniently provided a social laboratory to test the theory that it is lay piety rather than female hysteria, which accounts for the distribution of stigmata.

Reflecting on the six contemporary cases, arguments can certainly be forwarded that elements of their experience and history lend credence to the above approach. A common thread binding them most surely exists in the issues they raise, deliberately, unwittingly, unconsciously or by default, in relation to themselves and their group *vis-à-vis* those they perceive as being in positions of authority, in particular those in whom they see a guardianship of spiritual authority.

For Heather Woods, these matters were put into focus by the question of her deacon's orders and the validity of her congregation. Her stigmatisation gave much encouragement to a small congregation which felt it was marginalised by other churches in the city of Lincoln where it was based. Heather Woods' mentor, Eric Eades, derived much comfort from her stigmatisation. In the last days of his life he interpreted events as giving authority to his episcopal orders. He in turn encouraged Heather Woods. It was a relationship of mutual support and validation.

For Father Bruse the authority issue was the crisis of his vocation. Given the doubts that he was harbouring as to the validity of that calling, he needed confirmation that he retained the priestly authority invested in him to celebrate the mass. An important element of this process of self-doubt and self-justification involved certain conflicts which appeared to be looming between him and his Bishop.

George Hamilton is a man whose poor education and low self-esteem denied him a possible vocation to the priesthood which would have allowed him the opportunity to

experience the numinous through the priest's sacramental authority. Any sense of self-worth comes to him from his stigmatisation, yet even this is not totally fulfilling as he craves, and is consistently denied, a sign that the church and the community acknowledge the validity of his marks.

Christina Gallagher, in her self-confessed zeal and mission, continues to challenge the authority of the church in what she sees as its complacency. Currently, as a church commission<sup>35</sup> examines her case in circumstances reminiscent of others from the past, she finds herself involved in a very direct challenge to the Irish Catholic hierarchy.

Ethel Chapman was one of the world's powerless having hoped to achieve much in life through her stage-career. She came to realise to her disappointment that illness and domestic circumstances had reduced her to a state of almost complete physical dependence on others. For her to feel that she had gained control of her destiny she required a direct mandate or authority from God. She believed that this was given to her through the stigmata which empowered her to act as a valid and acceptable healing channel and a seer.

Jane Hunt at the time of her stigmatisation was attempting to take upon herself, or discover within herself, the authority and capacity to forgive sins. She wished to give absolution to her father for his abuse of her many years before. Yet arguably, she needed a courage or authorisation outside herself to do this, such was the mental pain induced by the memories of events and the long period of rancour which had passed.

That questions of authority are involved is an indicator that stigmatisation is not an isolated form of individual piety. The process of stigmatisation both reflects wider social concerns and tensions and, through the interplay of the stigmatic with the community and those in authority, helps resolve them. A case of stigmata seldom

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<sup>35</sup> A three member commission appointed by the Archbishop of Tuam.

leaves the community of witnesses unmoved and requires a response from those in authority. This response can range from one of investigation followed by disciplinary action (as in the instances of Padre Pio and Father Bruse) to a reassertion of authority (as in the case of Christina Gallagher) or to one of grasping an opportunity for evangelism (as in the case of the Anglican congregation of Jane Hunt). But for several factors, stigmatisation as a form of piety might not have emerged in the 13th century: these factors include medieval urbanisation; lay anti-clericalism; church response to heresy; and the demography of the period. If it is believed that God operates in such a way that he allows events to collude in this way to produce specific results, it may be argued that the Holy Spirit was then at work. However several of the factors identified involve human choice and the exercise of freewill and it is not the purpose of this thesis to enter into the debate on predestination and the other issues which would be involved if this line of investigation were to be pursued further.

## Chapter Fourteen: mysticism and stigmata

It was the understanding of Thurston, and several 20th century Roman Catholic writers<sup>1</sup>, that stigmatisation was a physical manifestation of the mystical experience. Mysticism is a religious practice, or state, associated with almost all faiths. It is a difficult word to define and it takes many forms, but may be described as the search for a direct experience of the divine or the quest for the absorption of the ego into the ultimate reality. It is not the exclusive prerogative of Christianity, although as far as can be ascertained, only Christianity has associated with it a tradition of stigmatisation, defined as a marking of the body with signs or evidence of empathetic suffering which is believed to be formed in association with mystical experience.

This study does not set out, through the examination of examples of modern stigmata to further the definition or understanding of mysticism. While Thurston and other 20th century Roman Catholic writers have described stigmata as mystical phenomena it can be argued that they would have been more accurate in their description if they had restricted themselves to writing of stigmata as physical manifestations of Catholic spirituality.

Stigmatisation is a very rare event and arguably is of only peripheral interest to students of mysticism. The rarity is such that there is only a single contemporary example of religious stigmatisation involving a member of another faith known to the author and that involves the reproduction of christian imagery. The example allegedly involves a male Egyptian Muslim who has, on several occasions, received a cross-shaped wound on his back. The account of this stigmatisation told to the author<sup>2</sup> included the claim that the mark regularly appears following a dream in which the recipient feels himself being beaten by christian priests attempting to persuade him to convert from Islam. No

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<sup>1</sup> Farges, Summers, Williamson, Biot and others.

<sup>2</sup> From an unattributable (off the record) source at the BBC World Service and unconfirmed by the author.



evidence has been found to confirm a popularly held view that, in rare cases, devout Muslims have displayed on their bodies the stigmata of the battle wounds of the Prophet. However numerous instances exist of ascetics from many religious traditions who carry the scars of their severe self-discipline, but about whom no claims are made that they have received those scars by divine or other supernatural means. The reported inner spiritual experiences of stigmatics are of interest, whether they are categorised as belonging within the christian mystical tradition or not. Vivid inner experiences are invariably reported by stigmatics alongside the physical manifestations of their condition.

It is strongly suggested in the preceding chapters that the wounds of the stigmatics are of human origin and that the phenomenon of stigmatisation needs to be understood within the context of collective human behaviour. A strong element of human determinism is involved. Nevertheless in parallel with the physical events, stigmatics report undergoing experiences of an inner spiritual nature. This has been the case with all the six contemporary stigmatics although the intensity of the inner experiences reported varied. Christina Gallagher talks about her whole life being dominated by her spiritual vocation as a victim soul. Father Bruse, on the other hand, described brief moments of vision and ephemeral spiritual revelation. All six contemporary cases reported feeling moments of bliss and tranquillity which they attributed to an awareness of the presence of God.

That a sense of the numinous was experienced by these stigmatics is, consistent with the methodology employed in this thesis, not doubted. While each claim is subjective and untestable, outward visible signs of trance or distress were observed on occasions by the author in the cases of Ethel Chapman, Christina Gallagher and Heather Woods.

It might seem difficult to reconcile the notion that stigmatics whose wounds have been produced by human means, in some instances knowingly by themselves, might also be

capable of transcendence. To explore this further one needs to turn to the experiences of other religious traditions including those described by Christians as pagan. For similar experiences of inner bliss, tranquillity and ecstasy are reported by members of other faiths. In this context it is of particular value to examine the pre-Christian religious beliefs of Europe and their synchronisation with medieval European Christianity.

It is a misconception to suppose that the pre-Christian folk faith of Europe had been totally superseded by Christianity throughout Europe by the end of the first millennium. Bartlett's paper of 1985 for the Historical Association concerning the conversion of Pomerania from paganism to Christianity examines a Christian mission of the 12th century. The missionaries encountered a form of paganism which was totally institutionalised, controlled by a priestly caste and which determined the rhythms and practices of the year. Despite being part of Europe and bordering Christian Poland, Pomerania was at that time almost entirely untouched by Christianity. The mission under Otto Bishop of Bamberg was deemed a success in that the message was received well by the ruling classes. However Bartlett concluded that the conversion took much longer to penetrate all levels of society. "Whether the Pomeranian 'inner man' of the twelfth century was transformed or not, the mission had an important and irreversible consequence - the end of public pagan cult. Even if pagan cult survived in secret, there was no public and communal worship to focus the old religion or a priestly caste to orchestrate it."<sup>3</sup> Consequentially the coherence of the pagan system crumbled to be replaced by or synchronised with the patterns of Christian practice. Nevertheless as Bartlett observed with and added and more general reference to Christianised Europe of the time, "the attempt to impose a truly Christian pattern on the *rusticitas* of the baptised population of western Europe must sometimes have seemed"<sup>4</sup> an uphill struggle. For many generations the church was required to compromise. Fletcher notes in particular

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<sup>3</sup> R Bartlett *The Conversion of a Pagan Society in the Middle Ages* History -The Journal of the Historical Association Vol 70 no 229 1985.

<sup>4</sup> Ibid.

the way the church "made room for customs, beliefs, practices and practitioners of long ancestry and continuing vitality outside a christian dispensation."<sup>5</sup>

The pre-christian faith of Europe has been variously described as pagan, or animist, and took a variety of forms in different parts of Europe, but essentially it revolved around the involvement of the people in the rituals of the cycles of the year. It was a set of beliefs which was ultimately to intermesh with christian practice in every part of Europe and result in the sharing of certain festivals, practices, archetypes and images.

The celebrations of the death of the earth and its rebirth at the turn of the year became Christmas within this synchronicity. Frazer wrote, "it appears that the christian church chose to celebrate the birthday of its founder on the twenty-fifth of December in order to transfer the devotion of the heathen from the sun to him who was called the Sun of Righteousness. If that was so, there can be no intrinsic improbability in the conjecture that motives of the same sort may have led the ecclesiastical authorities to assimilate the Easter festival of the death and resurrection of their Lord to the festival of death and resurrection... which fell at the same season."<sup>6</sup>

The christian festival of resurrection, Easter, adopted the name of the old pagan spring festival associated with the goddess Eostre and there was a synchronicity of iconography. It is noteworthy that some of the most elaborate representations of the pre-christian images are to be found in churches of Cluniac foundation or in Gothic cathedrals. Moissac, on the pilgrimage route to Compostela, contains what has been described as "one of the most notable green men of this period".<sup>7</sup> The green man has been described by Anderson as the archetype of death and renewal<sup>8</sup>, another form, it may be suggested, of Jung's cosmic man, of which Christ may be said to be the

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<sup>5</sup> R Fletcher *The Conversion of Europe* (London: Harper Collins 1997) hb p 253

<sup>6</sup> J Frazer *The Golden Bough* (London: MacMillan 1950) abridged edition page 359.

<sup>7</sup> W Anderson *Green Man* (London: Harper Collins 1990) p 62.

<sup>8</sup> Anderson p 14-33

christian allegorical representation. "The cosmic man is not only the beginning but also the final goal of life - of the whole of creation. 'All cereal nature means wheat, all treasure nature means gold, all generation means man,' says Meister Eckhart."<sup>9</sup>

A major difference existed however between the old religion and the more formalised Catholic substitute in that the old religion was participatory. It included its elements of mystical practice as do all earth religions. The sense of the numinous, or at least an experience of transcendence, was evoked in a variety of ways through ritual, the imbibing of hallucinatory materials and the playing of rhythmical music. Vivianne Crowley, a pagan revivalist has written of how, when the old earth religions were superseded, ritual was neglected. In the process people "lost the sense of the endless cyclical process of the life force....By enacting the ritual dramas....we activate the archetype."<sup>10</sup> Mindful of the loss of a participatory faith felt by the common people, the christian evangelistic movements of the medieval age set out, in the promotion of pilgrimage and feast days, to re-order and re-describe traditional practices in such a way as to involve the people. As Joseph Lynch confirms, this recognition of the need for popular participation occurred at the same time as stigmata emerged as phenomena. "The growing popular reverence for the eucharist was relatively new in the twelfth and thirteenth centuries and was just beginning to find adequate expression in ritual and pageantry."<sup>11</sup>

Finding this expression took time and initially the imposition of Catholic practice on popular faith hindered popular participation. People who had found their own oneness with the God of creation in their traditional practices found their access to God blocked by the church, which insisted that access to the tangible evidence of God in the mass was only available through the intercession of the priest. God was no longer to be

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<sup>9</sup> Jung *Man and his Symbols* p202.

<sup>10</sup> V Crowley, *Wicca, the old religion in the new age* (Wellingborough: The Aquarian Press 1989) pp12-13.

<sup>11</sup> J Lynch *The Medieval Church* (London and New York: Longman 1992) page284.

found in the bread of the harvest and the flesh of hunted animals, the creatures of mother earth, but in the allegorical bread of life, the flesh of Christ, available only on request through submission to the mother church.

Modern neo-paganism has embraced many of the aspects of the medieval mother earth cults and nature-worship within the new age spiritual awareness of ecological issues. The theology of the stigmatic Maurice Roseley of California USA is much influenced by such thinking. Heather Woods also felt her stigmatisation was, in part, to draw the attention of a wider world to modern ecological damage and, as she expressed it, "desecration of God's creation". Her channelled writings contained references to the sorrow of God in witnessing the human race destroy that which he had made. She wrote of the "abuse of Mother Nature which provided every sustenance for her children". In words which closely resemble those of Lovelock's Gaia theory<sup>12</sup>, she also wrote, "Mother Earth is a living planet. We are destroying our own home."

It should also be noted in the context of conflict between the formal church and the nature based folk-faiths, that much of the devotion to the female elements of the divine (as expressed in such terms as mother earth) were eventually absorbed into the Church's approved devotion to the Virgin Mary. All the stigmatics of history whose cases have been examined by the author, have included within their theology a deep devotion to Mary. The Marian influence is incorporated into the piety of all six of the contemporary stigmatics and is especially strong in the case of Christina Gallagher. Her visionary dialogues with Mary were reported well before her stigmatisation and are, for her, the most important element of her total spiritual experience.

A further factor to be borne in mind when examining medieval stigmatisation is not theological, but political. In large parts of Europe, the secular feudal lords nominated

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<sup>12</sup> The hypothesis of the independent scientist James Lovelock that the planet earth should be viewed as a living organism. Published as *Gaia, a new look at life on earth* (Oxford: Oxford University Press 1997)

their own supporters for high ecclesiastical office, both episcopal and monastic, and expected from their nominees a pragmatic allegiance. Ecclesiastical questions of authority had political overtones. During this period anyone appearing to exercise the authority of the pre-christian indigenous faith was officially discouraged. The secular and ecclesiastical powers were united in demonising the pre-christian folk-faith and the healers, wise-women and others associated with its practice. These shaman-like figures of the pre-christian era were forced underground and described as witches and the followers of Satan.<sup>13</sup>

To some social anthropologists the term shaman is culturally specific and is applicable only to the practitioners of the rituals associated with the indigenous animism of Siberia and Central Asia. Eliade, who defined shamanism as the manipulation of the sacred said that to use the term to apply to any "magician, sorcerer or ecstatic found throughout the history of religions...would result in... a notion at once extremely complex and extremely vague".<sup>14</sup> Yet he acknowledged that ethnologists commonly used various terms connected with a wider understanding of shamanism interchangeably to designate certain individuals found in all primitive who were believed to possess magico-religious powers. By extension Eliade said that the same terminology was applied when studying the religious history of civilised people.

It is within the broader understanding of the shamanic, that the healers and the wise women associated with pre-christian western Europe may be seen as shamanic figures and it was they who in some instances re-emerged as the stigmatics. That is not to say pagan wise women converted and themselves became christian mystics and stigmatics, rather that the vacuum left in society by the suppression of those who practiced shamanic arts was filled by the new generation of christian women who followed both a calling of prayer and practical action. Several of these women became renowned

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<sup>13</sup> Joseph H Lynch *The Medieval Church* (London: Longman 1992) pb p261.

<sup>14</sup> Eliade Mircea, translated William R Trask, *Shamanism - archaic techniques of Ecstasy* (Princeton University Press 1964) p 3.

counsellors or founded hospitals. In a similar way today modern stigmatics often state that they feel their experience calls them to prayer and practical action, which frequently combine within a healing ministry: Jane Hunt held healing services and Ethel Chapman specifically prayed for the sick by name.

The association of the stigmatics with the shamanic is reinforced, despite Eliade's reservations, by Eliade's descriptions of shamanic initiation. Commonly incorporated within initiation ritual was the concept of body substitution. In the way that the stigmatics appeared` to offer their own bodies as substitutes for that of the suffering Christ so the shaman offered their bodies to the spirit world for a spirit soul to enter and substitute for their own souls. The initiation was frequently preceded by periods of sickness and the central element of initiation was consistent. "The death and symbolic resurrection of the neophyte involved a cutting up of the body performed in various ways."<sup>15</sup> The cutting of the body in some cases included piercing a hole under a fingernail on the right hand and the making of an incision in the tongue.

Both Eliade and Drury<sup>16</sup> described the practices of shaman as including conjuring and knowingly practising deception in order to assist followers to believe in their powers to act as intermediaries between the material and the spiritual worlds.

At the same time as the stigmatics emerged in medieval Europe, the shamanic, or wounded healers, re-emerged in legend, for instance in the Arthurian myths. The image and environment of the secular court was re-worked in popular imagination to produce the Knights of Arthurian chivalry. The pagan Grail, the archetype of regeneration and the Earth Goddess, took on a christian form and became the vessel or cup of the Last Supper. In legend it was said that Joseph of Arimathaea took the cup and used it to wash the body of the crucified Christ before entombment. The Grail captured the blood

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<sup>15</sup> Mircea p 56

<sup>16</sup> Nevill Drury, *The Elements of Shamanism* (Shaftesbury, Dorset: Element Books 1947).

of Christ as it seeped from the wounds. The legends in which the christian and pagan mythology was fused were first written down in the late 12th century by Chrétien de Troyes and within a century they were known and universally popular throughout northern Europe and beyond. The context for their popularity, wrote Godwin, was that of a society "which had lost its ability to respond to the collective dream, or myth... unable to heal itself or to fulfil its need for the spiritual or the religious....The male-dominated church of Rome had subsumed all local myths into its own grand scheme. But its rigid orthodoxy and weird hatred of Eve had resulted in a one-sided, stagnant and corrupt vision."<sup>17</sup>

The Grail stories are believed to have existed in the oral tradition for many years before being written down, but in being recorded they also became christianised and redemptive. The christianised legend is revealed, believes Godwin, as a salvic myth. It is a story of redemption recalling the loss of paradise by Adam and Eve which is then regained by Christ. In some versions the saviour-hero, the perfect knight, is a thinly disguised stereotype of Christ himself.

Re-worked again to suit the 20th century, the Grail legend is seen by Jung as a universally applicable image of the quest for truth and the inner-self amidst a modern spiritual waste-land. In both modern and medieval lore the Grail is a vision reserved for the eyes of the soul and can only be seen by "those who have attained a certain consciousness, who have raised themselves above the limitations of the senses".<sup>18</sup>

The archetypal imagery of the Grail (the cup or receptacle) is found in Christina Gallagher's messages. This passage, taken from a vision she has described in which Christ spoke to her, reflects both her image of herself as the victim soul crushed for

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<sup>17</sup> Malcolm Godwin, *The Holy Grail* (London: Bloomsbury 1994) p 8.

<sup>18</sup> Rosemary Guiley, *Encyclopedia of Mystical and Paranormal Experience* (London: Grange Books 1991) p243.



Christ's refreshment and the universal image of the blood of Christ being the blood of the sacrificial passover lamb collected in the Grail of the last supper.

"You are a victim in union in My Love. You give me a drink of souls. There are few this day willing to give me a drink of love, little flower. The Blood of the Lamb is being desecrated, trampled upon."<sup>19</sup>

The inner spiritual journeys described by the six contemporary stigmatics can be said to have features in common with the products of the altered state of consciousness as identified by Margnelli.<sup>20</sup> As he points out, the altered states of consciousness may be entirely devoid of formal religious connotations. While they may be induced through devotion to a deity, they may also be the products of hallucinatory drugs, mantra, asceticism, ritual or pain.

There is the opinion that every human is capable of transcendence and the discovery of their inner spiritual selves. Everything in nature, wrote the artist John Lane from his perspective of eco-spirituality, is pervaded by the power of the spirit. Lane<sup>21</sup> maintained that the idea of the self being only a very small part of the psyche was today a commonplace belief. An immense array of evidence, he claimed, suggested that unconscious processes ranging from dreams, habitual behaviour, pattern recognition, creative imagination, intuition, religious experience and illness make up a large proportion of the life of everyone. Consciousness, he argued, might be described as a narrow visible spectrum between the subconscious - for example instinctual drives and repressed memories - and the supraconscious including creative imagination, intuitive judgement, aesthetic sense and spiritual sensibility. Beyond everything that the individual calls self there is what mystics have called the divine ground; a deep sense of personal being which is at one with the universal spirit.

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<sup>19</sup> Vision of October 5th 1992 Vicent 1992 supplement viii.

<sup>20</sup> Marco Margnelli, *Gente di Dio* (Milan: Sugarco 1988).

<sup>21</sup> John Lane, *The Living Tree - art and the sacred* (Bideford, Devon: Green Books 1988).

A note of caution needs to be interjected at this stage. The self-image of modern neo-pagans involved in what may be loosely described as New Age religious practice as being spiritual descendants of the practitioners of the pre-Christian faith in Europe tends to be an over-simplification both of the linear connection between the old and the modern and the whole notion of pre-Christian faith being capable of being described solely as pagan. The references to pre-Christian paganism above, which have tended to incorporate the New Age over-view, have been included for illustrative purposes. Further and more detailed study of pre-Christian religion taken from scholarly and impartial sources would provide better illustrations of the possible influence of residual pre-Christian practice on Christianity in the Middle Ages and whether or not this influence was a factor in the development of stigmata.

From the evidence set out above relating to the six contemporary cases, together with the evidence from the historical cases examined, it would appear that while stigmatics may share a common background of low self-esteem and a tendency to self-abuse, they mature spiritually in many different ways. After the euphoria of her stigmatisation, Heather Woods fell into a deep clinical depression. She was admitted to a psychiatric hospital. As has been mentioned earlier, the cause of her death remains unknown, but the possibility of suicide exists. To paraphrase the words of one of the greatest spiritual writers, St John of the Cross, Heather Woods' soul was unable to complete its journey through the dark night. Many stigmatics have hoped for death at the times when they are overwhelmed by their experiences. Padre Pio wrote frequently of his wish to die. Yet Padre Pio, Margnelli suggest, was able to transcend his suffering. By using it as an expression of love he was able "to achieve the negation of the individual, the submission of the ego and be born into a new identity. He arrived at a maturity of the spirit which few but the great saints and mystics achieve".<sup>22</sup> On the other hand, it is possible, even probable, that Heather Woods found the final resolution to her spiritual suffering in her premature death of her own volition.

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<sup>22</sup> Margnelli in conversation with the author 1994.

This thesis is not a vehicle in which any attempt will be made to explain mysticism or to hazard an opinion as to whether the sense of the numinous reported by mystics is in a real sense a contact with the divine, or a chemically-induced hallucination, or rooted in some other natural, but as yet, little understood property of the human mind. It is nevertheless relevant to observe how the stigmatics conform with certain accepted patterns of inner-experience.

Underhill<sup>23</sup> described a mystical path, or exploration of inner spiritual experience, as being composed of five psychological stages. The mystic traveller, while not necessarily expecting to experience each stage, was to be warned that along the way he or she would experience both extreme suffering and extreme joy. To outline Underhill's insight: the first stage involved a sudden awakening or realisation within the self of the existence of God; from there the pendulum of experience swings to the second stage, a time of self-imposed hardship to banish the desires of the world and the senses which keep the self from the divine; by the third stage the mystical traveller could experience, in prayer and meditation, a joyful awareness of the presence of God; then, Underhill described the pendulum swinging to the dark night of the soul, despite every attempt to surrender the self to God, there is nothing but a void of despair; finally, a transcendent state is achieved. The five stages are summarised as the awakening of the self to consciousness of divine reality, The purgation of the self, illumination, the purification of the self, and union with the one. On the path the mystic may experience a whole range of phenomena to substantiate each experience. There will be visions, raptures, voices and the most intense sense of both joy and desolation. The imagery of these experiences will be archetypal, in other words follow the recognisable and familiar "patterns of human emotional and mental behaviour"<sup>24</sup> established over centuries.

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<sup>23</sup> Evelyn Underhill, *Mysticism* (London: Methuen 1912).

<sup>24</sup> M L Von Franz writing in Jung - *Man and his Symbols* p308

Of the visions of the six contemporary stigmatics, it is those of Heather Woods, Ethel Chapman and Christina Gallagher which have been most thoroughly recorded. Over the five-year period from January 1988 to December 1992 Christina Gallagher recorded, in letters and statements to her spiritual adviser, a series of messages and revelations which she described as coming, in visionary form, from Jesus, Mary and certain other saints. The images of light and radiance associated with the visions, and which she described, were in a form which could be described as standard for a stigmatic visionary.

The messages relayed by Christina Gallagher were often very precisely directed to her own society. The priests of the church were selected for direct revelation as was the nation of Ireland. Frequently individuals and families were singled out. "I had the experience which is like going to sleep, but is not sleep. While I am in this state it is like living where I'm looking at. I found myself on the cross as has happened before. The pain was awful...I saw Jesus in a Moses basket and I was given an awareness of a particular family. The basket was swinging as if into the family unit. Then the baby called my name and said, 'feed me, love me, do not abandon me.'"<sup>25</sup>

Christina Gallagher has herself described her state of religious ecstasy as a sense of floating during which she becomes unaware of sound or other distractions. "A time of total peace, it's like having my inner eyes stand back from me and let me look through my soul. My soul is in my body....it's as if it just floats one step out in front of my body. I feel nothing but total peace, joy. It's like part of Heaven."<sup>26</sup>

She has also said that her visions are frequently distressing and reinforce the messages of warning which she feels obliged to relay, in particular that the people of the earth are to undergo God's chastisement as punishment for their sinfulness. She reports

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<sup>25</sup> Vision of December 26 1992 Vincent supplement 1992 pxviii-xix.

<sup>26</sup> Vincent p99.

journeys to the places of torment reserved for sinners and being taken by Mary to view the ultimate destruction of the earth. In one apocalyptic account she has described how she felt being taken to a great height from where she saw the figure of Christ with his arms outstretched in the sky. She then watched as balls of fire fell from the sky. The people below stared in terror or ran around in hopeless panic.

Experiencing both the pain and the joy, Christina Gallagher reports visions of great bliss. "I could see this wedding ring sparkling. Our Holy Mother held the ring....as she asked me, 'My daughter will you accept to be truly in union with my divine son, Jesus?' I did not know what she meant, but I said 'yes'. At that, Our Holy Mother took the ring finger of my right hand and put the ring on my hand....Then I could see Jesus and his face was so bright and full of love. He was dressed in white...Then Jesus....said, 'Nothing in Heaven or on Earth will break this union'. At that Jesus looked at me with love and then Jesus bent down and kissed my forehead. I felt as if I was in Heaven....I felt a warm heat."<sup>27</sup> The mystical marriage is a common theme in the history of female stigmatisation and may exist in mystical experience without the appearance of the wounds. Sometimes a discolouration of the finger to represent the ring of betrothal has been reported. The 19th century stigmatic Célèstine Fenouil was observed to have a line around her finger which was described by witnesses. "It is a vivid red line encircling the finger with tiny crosses occurring at intervals....the ring shows much more conspicuously on Sundays....it is a red mark probably accompanied with a thickening of the epidermis".<sup>28</sup>

Christina Gallagher said that in her vision Christ, as her heavenly bridegroom, described her as " a victim in union in my love...I am love, unity, peace. Few come to drink of me...There will be many calamities and plagues. My hand will strike many Godless places."<sup>29</sup> She has also recounted moments of revelation which she described

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<sup>27</sup> Vincent 1992 supplement piii.

<sup>28</sup> Imbert-Gourbeyre Vol 2 p114.

<sup>29</sup> Vincent 1992 supplement px.

as flashes of enlightenment. "I was conscious of Mary being the Virgin Mary and Jesus being blood of her blood, flesh of her flesh, because it was not through man but God she conceived Jesus. The veil of the Temple was split in three stages. First at the birth of Jesus...through Mary, her virginity was split....Stage two, the perfect split as Jesus is on the Cross, redeeming the world. Stage three is completed through the purification, which will split the sinful from the Good as we are the mystical body of Christ. Stage one, the creator is suffering as Jesus suffered....In stage two, all will become aware of God....in stage three, with the chastisement, all sin will be destroyed. and the mystical body of Jesus will be purified and unified."<sup>30</sup>

The consistency of Christina Gallagher's accounts both with similar accounts from historical sources and with the path of the mystic as described by Underhill is striking. She has the moments of revelation, the swings from pain to joy plus the illumination of the third stage allegorically described in her espousal.

Heather Woods visionary experiences were less vivid in that many of her insights were not revealed not as visions but in the form of channelled writing. She recorded around 50,000 words of channelled writing, set down in a variety of handwriting styles, and she submitted her output to Eric Eades for comment and interpretation. It contained many references to herself and to Eric Eades, often of little more than ephemeral interest, dealing with day-to-day matters relating to their congregation. Other parts of the output may be described as a type of religious pastiche employing older forms of the English language as drawn from the Book of Common Prayer or the King James' Bible. Even in private correspondence she fell into this archaic style to distinguish ordinary information from references to her spiritual life. "During my long period of invalidism I could cope with the Holy Spirit's presence within me, which has made me be able to be cheerful and develop a powerful intercessory prayer life....in spite of this my condition steadily grew worse....I entered the local hospice where my friends and

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<sup>30</sup> Vincent 1992 supplement p.xvii-xviii.

my family expected me to die. But Angels and the Holy Spirit moved from within, and spake to me saying by my faith and obedience towards the Lord."<sup>31</sup>

The same letter recounted that she had experienced visions and spiritual tests including "dry periods when my prayer ceased to give me joy". For two weeks around the time she wrote the above letter, Heather Woods' output was prolific. Much of her writing was completed at night. It was a time of intense, perhaps manic, activity and while she received graphic visions, she also described many moments of less-focused experiences of the divine presence. "Sunday morning I arose at 4.30am after being in the presence of divine power, and encompassing pure love. I spoke in the awareness of my future being and spoke just four words 'I'm home, aren't I?' The divine presence replied, 'you are coming home.' I awoke, went across to my mirror in the bedroom and saw a cross thus, manifesting upon my forehead."<sup>32</sup>

From time to time Heather Woods' writings took the form of epithets of encouragement and advice. This passage illustrates this genre. "Guilt is a burden God never intended his children to bear. God forgives us, he also forgets. Our heavenly father does not shelter us from the winds of adversity, he uses it to strengthen our faith. The sweetest music surely flows from those who feels (sic) lifes (sic) pain, yet tunes their heart to God's great love, and in that, remains in faith.....When temptation knocks, send Jesus to the door, for the highest kind of giving is done from the bottom of the heart. As whoever gives a cup of cold water, will by no means lose his reward. And when all alone I stand, shield me with your mighty hand, as when you break God's law, you are the one who is broken. So if you are looking, and need a friend, Jesus is looking for you!"<sup>33</sup> As she received her writings, Heather described how she was aware of

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<sup>31</sup> Letter addressed to various friends, dated and timed 16.4.93 , 4.25 am.

<sup>32</sup> Letter to author dated April 16 1992 (93 was the correct date). A drawing by Heather Woods of a cross with two additional marks above each cross bar to denote rays of light, was included.

<sup>33</sup> Channelled writing dated 23.6.92 3.45am.

reaching for a pen, but oblivious to the words she was inscribing. She wrote on any paper that was to hand.

Ethel Chapman also felt compelled to write and believed that her late husband spoke to her through her poetry. She compiled a volume of verses which she had published at her own expense<sup>34</sup>. It would be too simplistic to dismiss it as doggerel of no literary value or spiritual significance. Some of it was autobiographical and all of it was written in rhyme.

"For years I have suffered an illness, one that most people dread.  
My world begins at my pillow and ends at the foot of my bed."

It is the description of the way she wrote the poems which is of interest for it parallels Heather Woods' account of how she received her prose. "It's just not me who's writing the poetry. My hand is guided and I just write what's in front of me. I don't stop and think, I don't know anything about it until I've finished and read it. I don't know who's guiding me, but I feel it is a good force, a very good force."

Ethel Chapman's explanations of who, or what, the good force might be were contradictory. She mused that it might be her husband atoning for his sins, or possibly St Francis. "He was a troubadour and wrote poetry. He was on the stage too. I connected the whole lot together. Our lives are very much alike in some ways. He was a bit of a lad when he was young and I was a bit of a girl."

Ethel Chapman's visions fell into two main categories. Firstly there were those linked to Biblical imagery, for example, her vision of the crucifixion. These she likened to dreams and she was able to accept that she had probably drawn on her own store of memories to construct and imagine them. In one such vision she found herself on the

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<sup>34</sup> E Chapman, *The Gift and Other Poems*, (Self-published with New Horizon 1977).



steps of the Temple at Jerusalem. "They were ordinary stone steps...it was dusky....it was almost a dream as if it wasn't real. I could see the Temple in front of me. I knew it was the Temple because the Lord said that he would take me up the Temple steps....It was noisy, very noisy and then it finished. I am just befuddled. I lie awake at night and think about it during the day." She recalled a similar vision in which she found herself walking in a beautiful garden with Christ.

The second category of visions which she described were those with a clairvoyant content. "I hear the voices of people who are about to die. I can sometimes see them, they come into my room. Once I saw a person in my chair. It was impossible as she was in hospital at the time. In my imagination she was in my room." The image then thanked Ethel for praying for her. "I feel so much love for them, I just want to give them a hug, but I can't....I can't get to them. I knew when Pope John Paul was going to die. It was a funny sensation. I felt someone coming to grip hold of me tight. I thought it was somebody real who had got into bed with me. The person said, "it's alright, it's only Paul." He kept talking about Popes. "I won't be here tomorrow, I won't be here tomorrow, the voice just faded away. The next day I told the staff and they told me that the Pope had died."

From the sampling of the inner spiritual experiences of three of the six contemporary stigmatics it would appear that they shared the pattern of experience identified by Underhill in respect to mysticism. Certainly, the pendulum mood swing from joy to desolation was present, and the sudden and joyful sense of the awareness of the divine. This characteristic of mystical reports has been frequently noted in reports of the experiences of previous mystics.

Another characteristic of the inner spiritual experiences of the stigmatics has been a confused sense of linear time. This was apparent in the reports of Heather Woods, who found that her visions and insights coincided with long periods when she lost track of

current time. George Hamilton has reported a lost sense of time when in the state of confused ecstasy he associates with taking communion.<sup>35</sup>

It would be difficult to claim that any of the contemporary stigmatics studied had advanced in their inner spiritual journeys as far as the great mystics of history, although it is said that a select few of the stigmatics of the past have progressed that far. Supporters of the cause of Padre Pio believe that he was remarkably advanced and cite the nature of his wounds as evidence. It is said by guides at S Giovanni Rotondo<sup>36</sup> that Pio's wounds were far deeper than the superficial skin lesions of most stigmatics, indeed that they were complete holes through his hands, and this was evidence of the depth of his mystical character. The notion that the depth of mystical maturity and the depth of stigmatic hand wounds is linked is an attractive, but essentially untenable argument. Even the supporters of Padre Pio would hesitate to denigrate St Francis of Assisi or Julian of Norwich as mystics and yet the former's wounds took the form of surface nail heads and the latter only reported the pain of the invisible stigmata. There would appear to be no correlation between the depth and nature of the stigmata and the stigmatic's mystical potential.

The third stage on Underhill's path, that of illumination is likened to the moments of creativity reported by artists. Heather Woods' and Ethel Chapman's creative urges did not result in the production of high art, yet it could be said that, allowing for their lesser capabilities and talents, they were undergoing an illuminating experience. Conversely, it may be pointed out that essential to the creativity of illumination is the ability to draw on the greater divine experience that is beyond the artist and to express it in artistic endeavour. Understanding illumination in this way, it may be said that Heather Woods and Ethel Chapman failed to connect with the numinous at that profound level. Their inner-spirituality encompassed the first two stages only, the awakening to divine reality

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<sup>35</sup> It is frequently observed by UFO abductees that they lose track of time and following their reported abduction experiences they say that long passages of time remain unaccounted for.

<sup>36</sup> Confirmed by author on visit to S Giovanni Rotondo 1994.

and the purgation of self which follows. Nevertheless, seen in this way, their spiritual experiences were consistent with those described by some mystics of history, if somewhat less advanced than their stigmatisation might suggest. This fact in itself suggests a further insight into the phenomenon. An element of the purgation of self may be the employment of the discipline of pain to rid the self of material desires. Therefore the infliction of injury on the self could be part of the perceived progression from Underhill's stage two to stage three and what could be more appropriate to a christian mystic than to mimic the wounds of Christ in order to enter the divine presence?

The clairvoyant visions of Ethel Chapman might be said to fall outside the normal experience of the christian on a journey of inner spirituality. Christina Gallagher's visions might be said to be clairvoyant, in that they claim to foretell the future, but may be more properly be described as prophetic, in that they contain warnings and offer listeners the opportunity to avoid the consequences that which is foretold. Ethel Chapman's premonitions of death are, according to her accounts, concurrent perceptions of an inevitable event. She believed that she was contacted by the dying and the newly dead.

That stigmatics and mystics attract to their experiences the fashionable and familiar imagery and language drawn from the culture of their age is not unknown. The case of the Italian UFO contactee and stigmatic is one current example as is that of the American, Maurice Roseley who believes that she was reincarnated into her current stigmatised personality to "conquer the struggles and pains of the physical plane".<sup>37</sup>

The recounted, inner spiritual experiences of five of the principal stigmatics of this study, their visions and their other revelations of the numinous, do appear to be consistent with the wider reported accounts of christian mystics, stigmatics and others.

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<sup>37</sup> Letter to author May 1996.

The most noticeable common feature exists in the pendulum swing of emotions and the sudden revelations of the divine. Only Father Bruse falls outside the pattern in that his descriptions of his vision of Calvary, and his reported encounter with a celestial music, were not followed, to the best of the author's knowledge, by any corresponding period of abandonment and desolation.

It cannot be concluded that stigmatisation is a characteristic or reward granted to the mystic at the final end of an inner, spiritual journey. For in a transcendent state it would be supposed that the physical, even including the replicated marks of the suffering Christ, is irrelevant. The soul is at that stage beyond the material. Stigmatisation is associated with the early stages of an inner spiritual journey. It is a very rare phenomenon and, as shown earlier, is frequently associated with individuals of low self-esteem who are prone to self-abuse. Stigmatisation occurs when the stigmatics are still very much rooted in the material world, when it could be said, God comes to them in his incarnate form through the images of Christ's suffering on Earth.

The examination of the experiences of the modern stigmatics within the Underhill framework and within the context of neo-paganism thus point in the same direction. The stigmatics identify with the material world, both in the form of the incarnation of Christ and within their identification with their concerns for ecological issues as expressed in a neo-Gaia form. In identifying with the material world it is not inconsistent for material means to be employed to create the conditions within which the stigmatics and their congregations can experience transcendence. In the way that within the shamanic tradition, practitioners employed music and conjuring to assist their followers to commune with their Gods, so stigmatics use physical wounds and images to assist their witnesses to come nearer to Christ. In shamanic ritual both the tricksters and tricked became united in the transcendent experience. Similarly the stigmatics and their congregations may experience a shared transcendence. And viewed in that way the stigmatics may be seen like the shaman to be performing a social role which has been

well documented historically and pan-culturally. Also it may be seen that this role involves a belief in the possibility of mediation between the material world and that of the spirit through the apparent practice of mysticism and the evocation of several common archetypal images. And thirdly it can be argued that a sense of the numinous or the transcendent may be generated by means which themselves appear to be of no divine origin or have no divine endorsement.

The stigmatics may be said to be visionaries in as much as the shape and form of their visions suggest they share patterns of experience with others who have been recognised as visionaries but who have not displayed the wounds. Sufficient evidence exists to indicate that the accounts of visions given by the six contemporary stigmatics were not shaped by a conscious foreknowledge of the visions of others. Their experiences are archetypal and an argument might even be forwarded that they are sourced in some form of Jungian collective unconscious, although to pursue that line is beyond the scope of this study. Similarly the proven psychosomatic element involved in repeated stigmatisation would appear to be a phenomenon which may be beyond the conscious will of the individual. At the same time the primary stigmatisation of the stigmatic is rooted in the material world and, in all probability, the consequence of human action. In a sense therefore stigmatisation is a hybrid phenomenon, in part determined by the material world and in part by the 'mystical'. This notion, although not expressed in the same 20th century language, would have been familiar and acceptable to the medieval mind.

## Chapter Fifteen: stigmata and belief in the miraculous

The visible and tangible stigmata exist firmly in the physical world. The associated visions and mystical, or transcendental, experiences are not of the material world. They are expressions or products or functions of the mind and/or spirit. Numerous claims of supernatural events have come to be associated with stigmatics. These events have often been described as miraculous and they are recounted as if they had taken place in the physical world. Stigmatics are said to bi-locate, defy gravity, emit a sweet perfumed smell, to give three examples. Yet these events are not open to scrutiny at will. What therefore is their nature? Do they exist in the physical world or that of the mind?

To answer these questions it is necessary to return to the definition of stigmata employed in this thesis which incorporates the notion that the phenomena are capable of being interpreted by observers as being of supernatural or divine origin, keeping in mind that no implication that the marks are truly of God, or of a supernatural origin, is included in this definition. The sole point being made is that observers, and not necessarily all observers, should be capable of believing that the marks and associated mystical phenomena, are attributable to a supernatural source.

It is also necessary to explore the term miraculous as associated with events involving the six contemporary stigmatics. Not only were the events seen as wonders and marvels, there was also the inference frequently found in the testimony of witnesses, that they believed the marks were, to borrow the words of CS Lewis, "an interference in nature by supernatural power"<sup>1</sup> and a deed, to paraphrase St Thomas Aquinas, executed by God outside or beyond the order commonly determined or observed in nature.<sup>2</sup>

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<sup>1</sup> CS Lewis, *Miracles* (London: Geoffrey Bles 1949) p 9.

<sup>2</sup> St Thomas Aquinas, *Summa Theologica* quoted from R C Finucane, *Miracles and Pilgrims* (London: Dent 1977) p52.

In the original language of the New Testament several words are used which in English have been translated as miracle. As Moule points out<sup>3</sup> the word *thaumasion* (marvel) is rarely used, instead *dunamis* (power) and *semeion* (sign) are preferred by the Gospel writers. The Epistles introduce other words to provide nuances which are seldom appreciated today by Christians talking of the miraculous. One of those words is *teras* which, says Moule, originally denoted the unnatural and monstrous but came to be applied to what the New Testament writers recognised as the deeds of God.

When the term miracle and the description 'miraculous', were employed with noticeable frequency by many who came into contact with the six contemporary stigmatics under consideration, the words were used in their modern English simple all-embracing form to include concepts of the marvellous, the powerful, the unnatural, the portentous, the signatory and the divine. That events surrounding her stigmatisation were miraculous was a view taken by Eric Eades of Heather Woods. Miraculous is also the current perception, shared by her supporters, of the entire ministry of Christina Gallagher.

The use of the word miraculous was most apparent in the accounts of events surrounding the stigmatisation of Father Bruse. His stigmatisation was heralded by claims that statues wept and accompanied by many other claims of physical objects appearing to behave in an untypical manner. At face value the events surrounding Father Bruse met the standard criteria required for the use of the all embracing term miracle. They involved occurrences which were perceptible to the senses, transcended the natural course of events and took place within a religious context. On the assumption that the events were the work of God, Christians following the definition of St Thomas Aquinas would have recognised a miracle. The events were, to all appearances, outside or beyond the order commonly determined or observed in nature.

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<sup>3</sup> CFD Moule, *The vocabulary of Miracle* one of a collection of essays by members of The New Testament Seminar, edited by CFD Moule and published as *Miracles* (Oxford: A R Mowbray and Co 1965) pp235-238.

However reputable a standard definition may be, there is no overall agreement as to how the constituent parts of that definition should be themselves defined. There is much room for debate even in finding a definition for the term 'natural event'.

Contemporary definitions will vary according to the predispositions of those employing the term. Historically, the notion of the miraculous has been in a constant state of evolution and redefinition. Its definition at any moment in history has been dependent upon what were commonly accepted at that time to be the laws of nature.

The stigmata are extraordinary in themselves, yet in addition almost all cases have gathered to them, or have had associated with them, other remarkable claims. Whether any of these claims can be described as miraculous depends very much on the understanding of that word. A miracle does not necessarily imply that the laws of nature have been broken. The word is popularly used in a sense that implies no supernatural involvement. "Miracle escape of child from plane crash", would be a headline accompanying a newspaper story about an amazing and fortuitous event which in no way implied the child had been plucked by a supernatural force from the wreckage. On the other hand the word miracle is frequently used to imply a supernatural dimension to an event.

There are, without doubt, cases of inexplicable healing. People have remissions of illness which the medical profession cannot explain. Christina Gallagher's spiritual adviser Father McGinnity endorses claims of extraordinary healings made on her behalf and described as miracles by her followers. In a homily to pilgrims at The Achill House of Prayer in 1996, he described how the stigmatic had cured numerous people. "In one case, a young boy, flown in from New York doubled up in pain from rheumatoid arthritis took no medication from the day he came (to Achill)."<sup>4</sup>

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<sup>4</sup> The Times, 9 September 1996.



The power of the mind over the body is immense and not fully understood. This young boy's remission from his condition might have been attributable to psychological factors. Nevertheless, the term miracle was applied. This was not unusual because the term is frequently employed to describe events which do not involve supernatural forces, but involve applications of the laws of nature which, at the time, are not fully understood.

Society's understanding of the laws of nature is not a constant. To the people of a century ago the modern world would have been unimaginable. That people could fly across the Atlantic or have instantaneous communication by telephone and television would have attracted the description 'miraculous'.

The gulf between a popular medieval and a popular modern western notion of what constitutes a natural event can be illustrated by this familiar example. To the medieval mind thunder was regarded as a sign from God fraught with miraculous significance. It was viewed as direct evidence of God's power and displeasure. Today it is generally regarded as an exceptional, but entirely natural occurrence. Nevertheless an element of the primal fear of thunder could be said to linger, even in the minds of the people of a developed civilisation. Thunder can still instil fear and awe into those witnessing its power. although it is now understood in meteorological rather than supernatural terms.

The supernatural dimension has not vanished entirely from the common psyche and those so predisposed might still retain an element of that medieval understanding. For instance, following the consecration of David Jenkins as Bishop of Durham in York Minster in July 1984, the ancient cathedral was struck by lightning and several opponents of the ordination suggested that the lightning might have been of divine origin. It can be seen that elements of the medieval mind-set have survived, or are somehow ingrained, in the human make-up. Without at least an element of that ability to contemplate the miraculous, it could be argued, though never proven, that the

stigmata and other miraculous reports could never have existed in the 20th century. Indeed it could be said that the ability to transcend the material world is essentially human and distinguishes the human as a spiritual being apart from the rest of animate creation. Furthermore there would appear to be a case for saying that not only does that ability exist, but there is moreover a yearning to transcend the material world present in many individuals and communities. This will be examined below.

Up to this point the adjectives 'miraculous' and 'paranormal' have in many respects been employed interchangeably, with the assumption being that the miraculous is the paranormal within a religious context. It is a working definition which needs to be examined further. It could be said that if a paranormal phenomenon, extra sensory perception for instance, were proved by empirical means to be real and repeatable, then presumably it would no longer be a paranormal phenomenon. The proof in itself would have altered the boundary between the normal and the paranormal. CS Lewis wrote of a miracle being "a divinely ordained exception to the natural order"<sup>5</sup> and that the impossibility of obtaining empirical proof when examining a miracle was itself a spiritual necessity. If a miracle were, in similar circumstances of empirical investigation, proven to have a rational explanation, does that therefore reduce it from being a miraculous to a mundane event? It can be argued this would only be the case if that rational explanation reduced the propensity of the event to inspire wonder. For included in the definition of a miracle must be the sense of wonder. The event, of itself, need not be a product of God circumventing his natural order. For that event to be miraculous the event needs to be capable of inspiring awe.

It is possible to speculate, in the context of the six contemporary cases of stigmatisation, what might have happened if witnesses had become disillusioned with the stigmatics at an early stage. If Father Bruse had been observed tampering with a statue to produce a supposed supernatural event, the sense of wonder shared by the

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<sup>5</sup> Lewis p 184.

congregation at his church would, in all probability have evaporated instantly. On the other hand, Eric Eades appeared to be so determined to believe, and was so dependent on believing, in the divine origins of Heather Woods' spiritual revelations, that it seems likely he would have found a way of accepting a proven case that Heather was physically inducing her own stigmata. He might have seen the proof as having a divinely-inspired purpose to test his faith, or he might have re-evaluated the events of the stigmatisation and convinced himself that Heather Woods' self-abuse served a willing pious function to enable her to empathise more closely with the suffering God.

Shaw put it this way, speaking as a playwright through the character of The Archbishop of Rheims.

"A miracle, my friend, is an event which creates faith. That is the purpose and nature of miracles. They may seem very wonderful to the people who witness them, and very simple to those who perform them. That does not matter: if they confirm or create faith they are true miracles....Frauds deceive. An event which creates faith does not deceive; therefore it is not fraud, but a miracle....Miracles are not frauds because they are often, I do not say always, very simple and innocent contrivances by which the priest fortifies the faith of his flock."

Shaw continued with the Archbishop referring to St Joan and the test imposed on her. This was a test of her perceptive powers. She was expected to recognise the Dauphin, whom she had not met, as he hid within the throng of the court. "When this girl picks out the Dauphin among his courtiers, it will not be a miracle for me, because I shall know how it is done, and my faith will not be increased. But as for others, if they feel the thrill of the supernatural, and forget their sinful clay in a sudden sense of the glory of God, it will be a miracle and a blessed one."<sup>6</sup>

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<sup>6</sup> GB Shaw, *St Joan* (London: Constable 1924) Scene 11 pp23-24

The Shavian approach certainly has a ring of authenticity. His proviso that miracles are often, but not always simple, contrivances serves both to cover the position of the church and to be intellectually honest. If it can be said that in all of the six contemporary cases of stigmatisation a simple contrivance is the most likely explanation for the emergence of their marks, and that consequently a sense of marvel was engendered within those who observed and, additionally, that the stigmatics were involved in an inner spiritual journey, it can be reasonably stated that no paranormal forces need have been involved.

The Shavian perspective can however be extended to examine the circumstances in which observers are not simply deceived, but are seeking and are willing to be deceived. This idea goes beyond an individual choosing to suspend rational judgement for psychological or emotional reasons, into structural conduciveness. This was described by Stewart as the factors in the natural or social environment which allow episodes of collective behaviour to occur. These conditions, he argued, do not cause the subsequent episodes of collective behaviour, but they do create an environment in which episodes may develop, assuming the other determinants combine in the required manner.<sup>7</sup>

The author observed a series of events in Ireland in 1985 which illustrated the way in which factors combine to allow episodes of collective religious behaviour to occur. They concern the matter of the moving statue of Ballinspittle in County Cork.

In the summer of that year stories emerged from the small village of Ballinspittle in County Cork, in the Republic of Ireland, that a statue of the Virgin Mary in a roadside grotto had appeared to move. As the summer passed, more and more people reported seeing the statue move and sightings of moving Madonnas were reported from other

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<sup>7</sup> J R Stewart, *Sasquatch Sightings in South Dakota: an Analysis of an episode of collective delusion* published in GK Zollschan (and others) *Exploring the Paranormal* (Dorset: Prism 1989)

parts of Ireland. By September there had been over 30 similar stories, many of which had been embellished to include statues which not only moved but raised their arms, talked and even walked. Enormous crowds gathered at the grottos to see the phenomena and on one night alone at Ballinspittle, a crowd of 15,000 was reported.

The author visited the village at the height of interest in the activity of the statue and observed the crowds gathered in a sloping field opposite the grotto reciting the rosary, accompanying the words of a prayer-leader over a makeshift loudspeaker.

All eyes were on the statue which was between three and four feet tall and set in a small, well-tended garden. It was lit by a halo of lightbulbs. From time to time someone in the crowd would exclaim, "she moved!" and describe excitedly to his or her neighbours what the statue had just appeared to do. There were no movements which everyone saw at the same time but it appeared that most people saw some movement at some point. Collectively, the effect was that a crowd was said to be seeing a statue move and in that form the story was told later to friends and inquirers.

Yet the fact that people saw the statue move in their own way and at their own time, would suggest that the movement was not the product of an inanimate object acting in some strange physical manner, but was more to do with the way the various people looking at the statue were reacting to it. A team from the Department of Applied Psychology at University College, Cork, examined the events and carried out a number of experiments which demonstrated how in the dark, people move and sway unwittingly.

"When people weren't given visual contact with their environment then their movements were a lot less controlled and they weren't able to stay still and moved and swayed about a lot. So, what could be happening at Ballinspittle is that when you are there at twilight, you haven't got visual contact with your immediate surroundings. As is usual, you are going to start swaying about on your feet, perhaps your neck will start

trembling as you might have been looking up for too long and on the back of your eye you will see the image of that little statue on top of the hill. You will see that image moving. Because people are not aware that it is themselves who are moving, they will interpret that movement as being the statue."<sup>8</sup>

Yet how might this explain reports of other events associated with the statue? One man described how the Virgin Mary's face miraculously changed to that of Christ and others reported seeing her cloak blow in the wind. The University College team explained the report with reference to a series of unspecified experiments carried out within their discipline of psychology since the 1950s. These experiments suggested that if someone looks at a hazy, ambiguous image, then he or she tends to interpret what they see by guesswork, drawing on familiar images from personal experience. "We also know that if you stare at something for any length of time your eyes will become hazy. So if you stare at a statue for a couple of minutes without blinking your eyes too much, that statue is going to become rather hazy in outline to you and you will not be seeing the fine detail, and it is very possible that you might start to interpret what you see according to what you want to see."<sup>9</sup>

On investigation by the author, it transpired that people had seen the statue move before the summer of 1985, but until that time no one had made an issue of the optical illusion. This raises the question as to why the reports of the moving statue had proliferated and captured the public imagination at the time. What were the factors in the natural or social environment which had combined to create the atmosphere in which a series of major, although short-lived, folk-religious events had taken place? Several suggestions were made at the time.

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<sup>8</sup> Interview with investigation team leader Dr Jurek Kirakowski recorded by the author Sept 1985.

<sup>9</sup> Ibid.

The local postmaster and member of the Committee of Trustees responsible for the shrine, Daniel Costello made this observation: "People have shown an interest in the supernatural when times have been hard. In times of prosperity it's a case of God is in his heaven and all is right with the world, but then in times of recession, as now, when their whole way of life is upset, it is time to look to a more supernatural approach to their dilemma. I have heard that after the war in Italy, 300 statues moved and whether that was the Virgin in Heaven trying to console her people or what, I don't know".<sup>10</sup>

The Roman Catholic church always approaches supernatural sightings with some caution. Within the hierarchy there is a desire to keep control of the spiritual lives of the faithful and to guide them in the way it sees fit. church leaders prefer not to be sidetracked by what they would see as ephemeral manifestations of excessive folk-piety. The local Roman Catholic bishop, Michael Murphy, Bishop of Cork and Ross, did not wish, by visiting the shrine, to give the events at Ballinspittle the stamp of church approval. However he said that in his opinion in Ireland that summer a new excitement had returned to church life and he believed that much good had followed from people meeting at the grottos.

"They are very prayerful gatherings, very devotional, and I also know that the effect has been very good for quite a number of people. Divine or supernatural intervention in the affairs of men is extremely rare and for that reason one has to approach any alleged appearances or movements with caution. It is common sense that one would first of all want to be sure that all possible natural explanations are exhausted before the church would decide there had been some divine intervention. There have been similar instances in the past and, as you know, it is reaching almost epidemic proportions at the moment, with sightings of this kind. I think that by waiting things might clarify

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<sup>10</sup> Interview with author Sept 1985.

themselves. If we had to set up a commission for all the reported movements of statues and encounters with the Blessed Virgin, we would be working overtime."<sup>11</sup>

If the bishop was unwilling to endorse the sightings as the work of God, he was required by his diocese to have some explanation as to why there was, to use his own expression "almost an epidemic" of moving statues. "Within the church there is a certain questioning of accepted values and matters of faith. People generally may be in need of some sign of reassurance." Bishop Murphy believed that the sightings contained a message for the leaders of the church. The people of Ireland, he perceived, were hungry for a spirituality of their own. "Since Vatican II there has been great emphasis on the intellectual side of things, discussion on various matter pertaining to the church and belief. Some of this may well have passed over the heads of people. Not enough attention has been paid to the emotional side of religion and certainly there has been no attempt at promoting a genuine lay spirituality and a genuine popular devotion."<sup>12</sup>

The popular devotion to the moving statues, like the popular devotion to so many of the extraordinary events of christian history, did not last long. By the end of the summer of 1985, the crowds had begun to drift away from Ballinspittle. The novelty had worn off and everything came to an abrupt end when the statue, the object of devotion and wonder, was destroyed by a group of Protestants from Northern Ireland in protest at what they saw as the idolatry of the devotion.<sup>13</sup>

The relevance of the moving Irish statue to a study of stigmata is in the manner in which it demonstrates how a folk-religious event can emerge when the time and conditions are right ,as a consequence of thousands of people willing themselves to interpret a natural event as a sign from God. There is a similar well-attested story of

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<sup>11</sup> Interview with the author Sept 1985.

<sup>12</sup> Interview with author.

<sup>13</sup> 31 October 1985.



such an event involving Padre Pio which resulted in a miracle being attributed to him but which can also be shown to be an optical illusion.

As in Ballinspittle, the illusion was seen by a susceptible crowd willing a miracle to happen. It happened as Padre Pio was celebrating mass and an account of the event was given by Father Michael Hollings who was serving at the mass and standing next to the stigmatised priest. It should be noted that Father Hollings described himself as "a great believer in miracles without being someone who takes that belief as being an important element of his faith".<sup>14</sup> The function of a miracle, in Father Hollings' view, is as a restorative of faith or, as in the Gospels, a means by which Christ provided evidence of His divinity. The reputed miracles of Padre Pio were not, to Father Hollings, an essential aspect of the stigmatic's ministry, although he realised that they could appear to be so to some people. He described how he had witnessed an alleged miracle as a young priest staying at San Giovanni Rotondo. "I think Padre Pio could have worked miracles, I've no doubt of that at all, but to me he didn't work any. The only time that I was really involved in the sort of thing which gets things distorted, was when I was serving the mass. At a particular time, just before the communion, the Host is broken. Padre Pio's hands were sore. He broke the Host and the Host fell into the chalice.

"I saw the Host in the chalice when I gave him water for the ablutions after the communion, and there it was. As soon as we arrived out of the church afterwards, my companion and I, everyone said: 'Miraculo, Miraculo!' So we said, 'Why?' They replied, 'Host was there, and then it was gone!' So we said; 'No, it wasn't' - and so a miracle had occurred, which in fact had not occurred. There is always the danger of this sort of thing happening."<sup>15</sup>

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<sup>14</sup> Interview with author 1994.

<sup>15</sup> BBC Television documentary on Padre Pio transmitted 22 Sept 1968.

In this manner a natural event becomes a miracle. Similarly, the retelling of a remarkable story about a saintly person can, over the years, be embroidered to add extra supernatural elements. Again, the life of Padre Pio provides an example. Many stories are now freely told about the Capuchin and his perceptive gifts as a confessor and charismatic personality. Many of these stories, as told today in popular books and by guides at San Giovanni Rotondo, contain references to his alleged supernatural gifts, notably his bi-location<sup>16</sup> and his Odour of Sanctity. Tracing the sources of such stories is extremely difficult and it is not now possible to re-examine the evidence. However, the author has traced one popular story to an early reference and has noted how a key element contained in the story, as currently told, is not contained in the original version.

The story being used as an example was first told to the author by one of the brothers<sup>17</sup> at San Giovanni Rotondo who had, in Padre Pio's declining years, cared for him. The version quoted comes from a popular biography. It refers to the events surrounding the death of a man in the town of Udine, some 50 miles north-west of Venice and the birth of his daughter. "Giovanni Battista Rizzani was a committed freemason and precautions had been taken to ensure no priest would enter the house. A few hours before he died, his pregnant wife Leonilde, a practising Catholic, was kneeling praying at his bedside, hoping for a last-minute conversion. She suddenly became aware of another presence in the room and looked up. She saw a young Capuchin friar standing over the bed. As soon as she looked at him, he left the room. She followed him, only to see him apparently disappear into the air as he walked down the corridor... Unsettled by what she had just seen...she was caught by violent contractions...and gave birth five weeks premature to a little girl. Leonilde went back upstairs and laid the child on the bed beside her dying husband....The local priest....had been trying to gain entry to the house, but had been kept back by Rizzani's fellow masons who formed a picket line

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<sup>16</sup> A reported ability to be able to be in two places, often many miles apart, at the same time.

<sup>17</sup> Father Alessio Parente.

across the gateway. When news came that a baby had been born the priest said to the masonic blockade, 'You can prevent a priest from assisting the dying man, but you can't prohibit me going to baptize the child'. At this they let him past. He found the mother and child with the dying man who opened his eyes, saw the priest and cried out, 'My God, My God, forgive me!' The priest thus anointed him before Rizzani slipped back into a coma and died, reconciled with God and the church."<sup>18</sup>

Father Alessio's version of the same story includes mention of the dying man and the freemasons but implies that it was the bi-located Padre Pio who anointed the dying man and who also saw the child. Unless the account given by Father Alessio has been distorted by his imperfect English, it involves a major contradiction, because the story is traced by Gallagher and Alessandro<sup>19</sup> back to Padre Pio's own account of a vision he experienced at 11pm on 18 January 1905 during which he was sent to a house and was entrusted with the care of a child by Mary. "I was in the choir....I suddenly found myself far away in an elegant house where the father was dying whilst his child was being born."<sup>20</sup>

The letter contains no mention of freemasonry, neither does Alessandro's account. Also in 1905 Padre Pio was not ordained and could not have anointed the dying man. The two details appear to have been grafted onto a story which originated from an account of a subjective experience recounted by Padre Pio. A second story is told concerning a young woman who came to Padre Pio. She became a devout follower of Padre Pio and believed that she was the original child in the house to which Padre Pio had bi-located. The full story as told in the form of a Padre Pio legend contains details, such as the name of the dying man, which have been incorporated from the second story.

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<sup>18</sup> J Gallagher, *Padre Pio, the pierced Priest* (London: Fount 1995) pp36-37.

<sup>19</sup> Alessandro of Ripabottoni, *Padre Pio of Pietrelcina* (San Giovanni Rotondo: Our Lady of Grace Capuchin Friary 1987)

<sup>20</sup> Alessandro p 46.

An example of embellishment which is far simpler to trace is found in the evidence given by one of the six contemporary cases. It involves the account given by Heather Woods of her Good Friday episode of stigmatic pain. It is possible to compare her account as told to a third party directly with the author's own recollection and television recording of the event. She described events in this way: "During the time the crew was there I got changed to give a service. I asked them if they minded and they did not. In fact they wanted to film the service. I had to wear bandages to stop the bleeding ruining my shoes, apart from that I was in my usual clothes for the service. I can't remember a lot about the service. I remember giving the address and then we were singing the last hymn. I can't remember any more or even bowing and coming out of the church. I can remember just this sharp pain for a few seconds, in my side. It hurt so much. I wasn't aware I was crying or anything, just that I felt this pain only for a few seconds. But they must have seen my reaction, or a change in my face, because the camera zoomed in. You can see on the documentary how the tears were streaming down my face. I looked to be in agony."<sup>21</sup>

Heather Woods' account continued with her version of the events which followed the service. "I lifted my blouse and took the bandage off. The wound was big and deep and the bandage was wet through with blood. It had trickled down onto my vest and the top of my pants. Ted<sup>22</sup> pointed out that the wounds must have opened up, because he and his crew had earlier asked me to wash so that they could see what they were like. There couldn't have been any blood before then, so it has to have appeared recently... They began to pack up and go. Then Ted asked his cameraman to zoom in on my forehead. I asked what all the fuss was about. 'It's like a red mark,' Ted said, 'I just saw it as you moved past the light'. If I remember correctly Ted was saying, 'David, zoom in on it. As I'm talking to you Heather, I can see it moving. I can't believe this. It's manifesting now, and we're getting it on camera.' He described it as quite raised

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<sup>21</sup> Spencer p 150-151.

<sup>22</sup> The author.

and asked if I had any idea what it might be... I told him of the cross that appeared last time."<sup>23</sup>

The errors in Heather Woods' recollection may have been due to deliberate exaggeration or to over-enthusiasm, but the fact that the errors exist is undeniable. There was no camera crew, there was one cameraman, named John. The blood on her wounded side was crusted and appeared to pre-date her reported pain in the church. Her account of the pain in the church was similar to that given on other occasions, when she had described it more as the pain of desolation than a pain of a physical order. She did not give an address. She had not been asked to wash her side wound earlier, only her hands and feet. The final description of the forehead mark appearing is totally unsubstantiated by the video recording. Her forehead was filmed on the instructions of the author as earlier he had observed her stroking her forehead in a nervous manner and she had informed him of the previous occasion when a cross had appeared. The author wished to have a film record of the state of her skin on the Good Friday suspecting a cross might manifest later. She did not live to see the footage shown in a documentary. It was broadcast briefly in a religious magazine programme.<sup>24</sup>

The implication which may be drawn from the two examples of embellishment above is that accounts of the miraculous do indeed evolve and transmute over the years as they are repeated. Furthermore, it could be suggested that almost all such stories, if traced back to their sources, might be found to contain very little, if any, content of a supernatural nature. The supernatural content could well be seen to have been added to give drama and power to the original narrative. Another confusion which arises is between subjective experience and objective incident. A subjective experience, a vision

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<sup>23</sup> Spencer p 151.

<sup>24</sup> *This Sunday* Granada TV May 1993.

or dream, transmutes in the telling from one person to another, into a narrative supposedly describing a material event.

The experience of Cecil Humphery-Smith demonstrates how subjective and objective experiences can coalesce in such a way that the resulting narrative becomes a powerful means of conveying religious conviction. Cecil Humphery-Smith knew Padre Pio in person. He was guided by the priest, healed of head pain and was, he says, much moved and uplifted by his celebrations of the mass. Padre Pio was the singular most influential force in his spiritual life. He believes that he first encountered Padre Pio in bi-located form. Humphery-Smith was in hospital in Placenza in Italy recovering from a major road accident when, in a semi-conscious state, he became aware of a Capuchin friar who came to hear his confession. "I shall never forget the vigorous, almost unfeeling, way in which he made me make a good confession, digging out long-forgotten faults."<sup>25</sup>

A friend of Humphery-Smith waiting outside the hospital room where he lay did not see the friar enter or leave. Humphery-Smith acknowledges that he was near to death and not in a lucid state. "I experienced detachment from the body and many of the mental processes said to be associated with death."<sup>26</sup> His experience was entirely subjective, yet nonetheless very real and highly influential. It became even more real to him when several years later he met Padre Pio and says he recognised him as the friar who had heard his confession.

Several explanations can be hypothesised to explain Humphery-Smith's experience of Padre Pio in terms of imagination, coincidence or recovered memory. What remains of great significance is the impact and effect on his life. Indeed the followers of Padre Pio have derived much inspiration from all the stories of remarkable events told about the

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<sup>25</sup> C Humphery-Smith writing as a spiritual son, *A Saint on My Back* (a privately printed recollection dated 1983).

<sup>26</sup> *Ibid.*

priest, many of which grow with frequent repetition. The accumulative effect of these stories and the charismatic influence of Padre Pio, have profoundly moved many thousands of individuals. Suggesting that the stories told about him may evolve over time in no way suggests that they are being deliberately manipulated. There is no evidence that the story-tellers are motivated from any malign, devious or self-interested intent. The stories are exaggerated simply from: 1) the eagerness of the devout to share their enthusiasm and 2) human shortcomings in relaying information accurately.

This point is illustrated by the events at Achill in March 1995 when a group of pilgrims from churches in County Down were present at the House of Prayer at the time Christina Gallagher underwent a particularly prolific episode of stigmatic bleeding. They were visited briefly by Christina Gallagher shortly before starting an all-night prayer vigil, during which their prayers were accompanied by a background recording of Christina Gallagher describing her vision of Calvary. The vigil was interrupted at 3am by a member of staff who asked the pilgrims to pray for Christina Gallagher who, at the time it was said, was suffering acutely in another room from one of her painful empathetic visions of Christ. In the words of one of those attending the vigil, "Nobody even questioned what was happening, it just made us all focus".<sup>27</sup> At 4.30am another member of staff invited the pilgrims to see Christina Gallagher. They found her, "exhausted as if after childbirth....with blood around her feet and the bottom of her nightdress caked (in blood)".<sup>28</sup>

Father McGinnity was with her and the pilgrims were told he had ministered to her during her suffering. The pilgrims reported later that they had witnessed a miracle. "A mixture of emotion flooded the room," said one witness. "People were weeping with both astonishment and sorrow at the woman's suffering and joy that God had graced these people with witnessing such an event."<sup>29</sup>

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<sup>27</sup> The Democrat March 29 1995.

<sup>28</sup> Ibid.

<sup>29</sup> Ibid.

There is no reason to doubt the validity of the emotions felt by the pilgrims. After a night of intense prayer on the theme of the crucifixion they had seen a blood-covered woman whom they believed had received the wounds of Christ. Their faith was reinforced.

The sceptic would have no hesitation in pointing out that the pilgrims witnessed nothing supernatural. Staff had given them second-hand accounts of events which were supposedly happening to Christina Gallagher, but out of their sight. Then, after a period during which they had been depriving themselves of sleep in order to concentrate on prayers relating to the passion of Christ, they had been shown what they were told was the bloody evidence of Christina Gallagher's suffering. Sceptics will also allege that the more such a group of people wants to believe in something, the more likely it is to overlook the contrary evidence. This notwithstanding, members of the group present that night underwent a significant group religious experience.

Similarly, Eric Eades and his congregation were much encouraged as a christian fellowship by a stigmatic in its midst who was given an additional credibility by the presence of interested outsiders. Listeners to Heather Woods' account of the Good Friday service, it may be suggested, would have been disappointed not to have been given the embellishments. Thus Heather Woods gave John and Anne Spencer a vivid account of the events to be passed to their readers. The Spencer's book was specifically aimed at a readership with an interest in the paranormal and exceptional events.

One event which she claimed was paranormal has since been thrown open to serious question. The circumstances are such that Heather Woods is very likely to have known that she was fabricating evidence. A photograph was taken in her chapel at her home. When developed it showed a curving beam of spiralling white light. Heather told John and Anne Spencer that she had previously seen this light, which she believed to be the



Holy Spirit, and had asked for the photograph to be taken in order to capture the phenomenon. The photographer was not told of this purpose and only had the supposed significance of the photograph drawn to her attention once it had been developed.<sup>30</sup>

Heather made the photograph available to her congregation with her explanation, which they willingly accepted.<sup>31</sup> Initially John and Anne Spencer accepted Heather Woods' account. Later however they accidentally reproduced a similar light effect and on further investigation discovered it was a photographic fault common to the kind of camera which had been used and which they were able to replicate at will. This, and the fact that Heather Woods only claimed that she could see the Holy Spirit in her chapel after the development of the film, strongly suggests that her claim was one of *post hoc* invention.

Let it be supposed, at this stage, that an incident of stigmatisation and the legends connected with it have a profound effect on an individual who witnesses it or hears stories told about it. The effect is life-changing and involves that person having a glimpse of the divine. Yet, that initial stigmatisation proves to be a deliberate and cynical fake in the sense that the perpetrator was fully aware at all stages of what he or she was doing. This scenario is suggested by the case of Father Bruse, but it must be stressed no evidence exists to prove it is an accurate statement of what happened at Lake Ridge. Many explanations can be suggested by the events in the parish surrounding Father Bruse. What follows is just one theory and as there is no evidence to suggest it is the correct interpretation of events, merely one of many hypotheses.

A junior priest with a proven record of dare-devilry and exhibitionism finds himself working in a parish where morale is low and the congregation is dwindling.

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<sup>30</sup> The photographer Betty Eades, wife of Eric Eades gave an account of the events to the author.

<sup>31</sup> Evidence from Betty Eades given to the author.

Consequently, the church is suffering a steady reduction in voluntary giving. This causes the priest further anxiety. This is detected by the parishioners and morale sinks lower. It is a downward spiral.

To rectify the situation, the priest decides on unilateral action. Mindful of a number of stories of mystical events occurring in other parishes in his country, he decides to instigate a mystical event of his own. Using a simple trick and a plaster statue he convinces his parents and immediate friends that an inanimate image of Mary is weeping. Emboldened by his success, he tries the same trick on his senior priest and other members of his congregation. Before long word spreads that a miracle is taking place. The congregation swells in size. Donations increase remarkably. Lapsed churchgoers return to their faith.

When a few cynics suggest that the weeping statues always become activated when the priest is at hand, he decides to take on a bold move. Admitting that it is indeed true that he appears to have some supernatural effect on the statues, he then allows the congregation to notice blood seeping from his hands. Immediately the miracle is doubled in its potency. The media begin to take note. He becomes the centre of national attention. People queue at his confessional and clamour to attend his masses in order to take communion from his blood-stained hands. His wisdom as a confessor is talked about, as are his healing powers. A religious zeal grips the parish. Hundreds convince themselves that a great spiritual revival is underway. Each mass becomes a festival. People are uplifted as never before and experience a spiritual euphoria which they take to be an experience of the presence of Christ. Many report being born again in the spirit and when one worshipper claims to see a statue change colour, others in the congregation imagine they too saw the event. The priest himself is caught up in the moment. His conscious mind becomes aware of visionary moments and he experiences a sense of the numinous which he has not known since the moment of his first calling to the priesthood.

Alarmed by events, his Bishop calls the priest for an interview. Under intense cross-questioning, the priest admits his original hoax, but then goes on to describe how he has no clear memory of subsequent events and is confused in his own mind about the visions he has seen and the wounds in his body. The priest is instructed to go on leave and not return to his parish until events have quietened down. He is to make no further public statement on the matter. Within a year the miraculous events are but a memory. All the parish has to show for its few weeks of notoriety is an increased membership and sufficient funds to start work on a new church building and community centre.

Returning from a hypothetical scenario to the real events. From the witness statements gathered concerning the events surrounding the weeping statues at Lake Ridge, it appeared that when the crowds were at their greatest and most fervent there existed a willingness to believe which overrode the normal common-sense the members of the congregation employed in their everyday lives. There was a willingness amongst members of the congregation to suspend their usual sense of disbelief and be caught up in the events. It could be said that, as an audience at an opera leaves the parameters of the normal world on the outside of the theatre, so the congregational members at Lake Ridge left their critical faculties outside the church. There was a willing suspension of disbelief. There is firm evidence that many people, not normally worshippers at the church, travelled long distances in an attempt to see a miracle for themselves or to seek counsel or healing from the stigmatised priest. The dynamics of the occasion may be said to be similar to those at work in the instance of the moving statues of Eire.

Miracles, it would seem, do not appear in isolation. In the epilogue to his study of miracles, CS Lewis put the view that God does not shake miracles into nature at random. "They come on great occasions: they are found at the great ganglions of history - not of political or social history, but of that spiritual history which cannot be fully known by men. If your own life does not happen to be near one of those great

ganglions, how should you expect to see one? If we were heroic missionaries, apostles, or martyrs, it would be a different matter. But why you or I? Unless you live near a railway, you will not see trains go past your windows. How likely is it that you or I will be present when a peace-treaty is signed, when a great scientific discovery is made, when a dictator commits suicide? That we should see a miracle is even less likely. Nor, if we understand, shall we be anxious to do so....Miracles and martyrdoms tend to bunch about the same areas of history - areas we have naturally no wish to frequent."<sup>32</sup>

Examination of claims of the miraculous associated with stigmatisation would suggest that while Lewis was right in proposing that they occurred in relation to surrounding events, he was incorrect in suggesting that they solely appeared at times of spiritual significance, occasions, furthermore, which most people would choose to avoid rather than seek out. Miracles, or at least claims of miracles, would also seem to appear at times when social circumstances and individual miracle workers have the opportunity to interact, and these frequently are times when society is willing the miraculous to happen. In some societies this interaction is deliberately fostered as part of the cultural experience of the group and individual miracle workers are fostered and encouraged to ensure that anyone who so desires can have the opportunity to witness a miracle. This is particularly evident in cultures with a shamanic tradition. It is within a recent study of the shamanic tradition that Schnabel<sup>33</sup> introduces a new dimension which has a relevance to the understanding of stigmata. Shamanism or divination, in its wider sense, is a pursuit found in a wide range of cultures, many of them independent of each other, when an individual practitioner, validated by the community, acts as the intermediary between the material and the spiritual worlds. This he or she achieves by entering a state of dissociation or trance using rhythmic music, mantra or hallucinogenic drugs.

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<sup>32</sup> Lewis p171-172 .

<sup>33</sup> J Schnabel, *The Munch Bunch*, *Fortean Times* Issue 70 1993 pp23-29.

Despite the discouragement of the church, aspects of shamanism are noticeable within the lives of the saints. Patlagean<sup>34</sup> has shown in his model of a saintly life, established by hagiographical tradition, how individuals sought powerlessness in both the material and ethereal worlds and thereby gained power over both, enabling them to transcend, or bridge, the two spheres of existence. Through abstinence from sexual activity and fasting, the saints pushed themselves to the limits of their natural selves.

Simultaneously, through what they perceived to be demonic encounter, they tested themselves to the spiritual limits. When the period of training had been completed the saintly figure returned to the world free of the limitations of time, space, the impact of the elements and social pressure. In the christian tradition the saint seeks to imitate Christ, but the description of preparation and fulfilment corresponds very much to descriptions of the initiation, and subsequent operations of shaman.

In his examination of shamanism within the context of Münchhausen's Syndrome, Schnabel described shamanic rituals in which seemingly paranormal events were conjured up in such a way that many commentators were confounded by the facility with which seemingly genuine phenomena appeared alongside barely-concealed sleights-of-hand. He suggested that this ambiguity also existed, historically, in claims of stigmatisation and in modern western times in claims of alien abduction and satanic abuse. Within the same context he referred to a sexual ambiguity sometimes associated with shamanic practice, which gave the shaman a cultural licence to bridge many different worlds simultaneously. While this latter observation is relevant both to the case of one modern stigmatic, the Italian Michele Improta, examined by Margnelli and discovered to be a male transvestite and, at least, one possible historical case in the 13th century in Oxford, it is not borne out by the examination of the six contemporary cases. However, George Hamilton on becoming a stigmatic, felt obliged to lead a celibate life

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<sup>34</sup> E Patlagean *Ancient Byzantine Hagiography and Social History in Saints and Their Cults*, edited S Wilson (Cambridge: Cambridge University Press 1983) cited by H Loiskandl in *Exploring the Paranormal* edited by G Zollschan, J Schumaker, G Walshe (Dorset: Prism Press 1989) pb p 346-351.

and Father Bruse too, as a Roman Catholic priest, may be presumed to have renounced sexual activity. Neither Ethel Chapman, a single, disabled woman nor Heather Woods, a widow had, as far as can be ascertained, a sexual partner. Ethel Chapman chose to have her hair cut in a severe, almost masculine style. Such circumstantial evidence cannot, however, be taken to substantiate the notion that an element of sexual ambiguity was incorporated into their behaviour. Jane Hunt's visions contained specifically feminine imagery, especially in the form of maternal feelings towards the child Jesus. With reservations concerning Schnabel's references to sexual ambiguity in mind, it is worth examining his thesis further. It draws together further a number of seemingly contradictory aspects of stigmatisation.

Schnabel initially proposed that the condition Münchhausen's Syndrome belongs to a common group of behaviours and phenomena which includes hysteria, shamanism, mediumship, poltergeists, spirit-possession, multiple personality disorder, ecstatic self-mortification and mystics. He cited Goodwin's<sup>33</sup> observation of behavioural parallels between individuals in the above groups. The areas of parallel include frequent self-abuse, feigned or imagined physical symptoms, histories of childhood abuse or trauma, histories of lying, active imaginations and changeable life stories and sudden disappearances. Schnabel continued with his observation that Münchhausen behaviour, hysteria and the dissociative disorders are not only interconnected but have long been implicated in paranormal-type experiences and claims, including UFO abductions, spirit-possession, mediumship and shamanism. "These in turn have often been connected to deceptive behaviours, from the tricksiness of poltergeists, to the outrageous frauds of mediums, to the sleight-of-hand gimmickry of shamans. We might therefore suspect that Münchhausen's-type behaviour too is linked to the paranormal."<sup>34</sup>

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<sup>33</sup> Jean Goodwin psychiatrist at the Medical College, Wisconsin USA as reported by Schnabel.

<sup>34</sup> Schnabel p 27.

He suggested that as Münchhausen patients deceive the medical profession with their plausibility, so psychic media deceive their clients and stigmatics their mentors and communities. The doctor, the medium and the confessor in each case is duped because the guile of the perpetrator is never suspected and all three groups of practitioners are willing, or conditioned, to believe rather than disbelieve.

Schnabel cited the case of Benedetta Carlini to illustrate his thesis that a stigmatic may also be a form of shaman and describes the early 17th century religious as a renaissance shamaness. Despite a growing reputation as a visionary and stigmatic the Tuscan nun was jailed as demonically possessed after accusations of fakery and lesbianism were levelled against her.

Goodwin has retrospectively diagnosed Carlini as a Münchhausen patient with a multiple personality disorder and described her as a classic illustration of the deeper relationship between deception and the paranormal. Her self-reported childhood history had included harassment by the devil and her parents had sent her to a convent at the age of nine years. With reference to the published prosecution document of the time<sup>35</sup> Brown<sup>36</sup> points out that Carlini, despite her growing reputation as a visionary and focus of the paranormal was found to be producing her stigmata with a knitting needle and smearing her own blood on statues of the Virgin Mary to make it appear that it was weeping blood. Carlini also reported a vision in which she prepared for her own sacred marriage to Christ himself, by having her heart removed by Christ and replaced with one more worthy. The heart-exchange motif, Brown reported, was common in the lore of female saints. Schnabel added that the vision had links with shamanic initiation in which ordinary vital organs are replaced by supernaturally-derived ones.

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<sup>35</sup> *Immodest Acts*, Bodleian Library, Oxford.

<sup>36</sup> Judith Brown, *Immodest Acts: The life of a Lesbian Nun in Renaissance Italy* (Oxford: Oxford University Press 1986)



Through shamanic experience, stigmatisation, or even hospitalisation for repeated treatment, individuals who consider themselves of little worth can find themselves the focus of much attention. The shamanic experience, Schnabel observes can elevate the lowliest member of society to a position of substantial power. Its central features include a long prelude of oppression or illness and a crisis involving possession or wounding, by otherworldly entities. The illness and wounding is so fundamental to the process that the shamans are often referred to as the wounded healers. Schnabel continues with the claim that, to be ordained as a shaman, if the subject had not suffered an illness, it was necessary to fake one. An epileptic seizure was considered to be especially appropriate. Schnabel draws on the observation of the anthropologist IM Lewis that membership of the shamanic order "gives women the opportunity to gain ends which they cannot readily secure more directly. Women are, in effect, making a special virtue of adversity and affliction....literally capitalising on their distress."<sup>37</sup> Schnabel then adds a quote from an American UFO abductee who confessed to inventing her claims, "the only way in which people who become abductees can get any kind of satisfaction is to fabricate some sort of story to get the focus of attention that they need".<sup>38</sup>

Having reached that point Schnabel does not then dismiss shaman and stigmatics as hysterical, attention-seeking frauds. He introduces the notion that the deception has a purpose. He suggests that the shaman used sleight-of-hand to deceive witnesses who had expected to witness the extraordinary and would have been disappointed if they had not. The wish not to disappoint is matched by the suggestion that Heather Woods embellished her accounts of her spiritual experiences in order to meet the expectations of the Spencers and their readers. Those witnessing shamanic displays wished the shaman to exercise a spiritual and political authority, for it gave to them, via the shaman, access to another world. Furthermore, the deceptions were also devices to

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<sup>37</sup> Schnabel p26.

<sup>38</sup> Ibid.



enable the shaman to achieve his, or her, goal of dissociation. Whether it was drugs or rhythmic chanting which was employed, additional aids were required both by the shaman and the audience to achieve the required magical effect. It was a relationship of mutual interdependence in order that both might transcend the present and the material. In the case of stigmatics, Schnabel suggested, their deliberate acts of self-mutilation might be employed to achieve the desired effects of dissociation.

The mutually beneficial interdependence involved in the relationship between Heather Woods and Eric Eades is of interest in this context. At the height of Heather Woods' visionary activity they were in daily contact. They would frequently telephone each other at night and call on each other during the day for counselling and prayer. Heather Woods' claims of mystical revelation provided Eric Eades with important spiritual support as he faced death from cancer. As her Bishop, he gave her constant attention and encouragement, which was what she needed.

Other similarities may be observed between the shamanic model of behaviour and the experiences of the six contemporary stigmatics examined. Jane Hunt, Ethel Chapman and Heather Woods all reported visionary experiences which coincided with the taking of strong, pain-killing, potentially hallucinogenic medically-prescribed drugs. Christina Gallagher's trance-like ecstasies are frequently associated with the rhythmic and concentrated chanting of the Rosary. All six stigmatics have claimed, or had it claimed on their behalf, that through their wounds and experiences of suffering they have healing gifts. They were, in shamanic terms, thus transformed into "wounded healers". The shamanic model is not an exact parallel with that of the stigmatic. However drawing parallels between the two traditions throws light on stigmatisation as a group phenomenon every bit as much as being the experience of a single individual.

## Chapter Sixteen: from cause to effect

In earlier chapters it was proposed that the 20th century cases of stigmata, which have been examined for this thesis appear, allowing for the evolution over time of iconographical detail and cultural context, to be consistent with the phenomena which have existed for over 700 years. They correspond in appearance, associated phenomena and claims. They attract to themselves, a rare form of pious devotion. A complex set of factor appear to be at work, but while evidence of the miraculous exists, meaning that a sense of wonder or marvel<sup>1</sup> was engendered, no direct evidence of supernatural activity has been confirmed. To say that in no historical case has a saintly person ever been graced by God with these marks as a sign of his favour, is going beyond the evidence. To say that it is unlikely that God would so act is as far as one can safely venture theologically, given the way in which the divine hand holds back when more important intervention is required and given the words of Christ to doubting Thomas. St Thomas was admonished for wishing to see and touch the wounds of Christ and told, "Blessed are they that have not seen, and yet have believed".<sup>2</sup> It is touching on a vast debate, which will not be pursued here, other than to quote John Polkinghorne's succinct paragraph from his essay on creation and the structure of the physical world.

"God's activity in creation is not to be located with intervention in the world, either with or against the grain of physical law. Rather, it is to be found in those laws themselves, of which God is the guarantor. God is not a cause among causes but the sustainer and orderer of the world. Its regularities, discerned by science, are a pale reflection of God's faithfulness. To say that is not to assume a detached deistic role, so that once God had lit the blue touch paper of the big bang, the universe was left to get on with its own development. Such an understanding would attribute a false autonomy

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<sup>1</sup> Of the Greek words identified by Moule and quoted in Chapter 14 of this thesis, the one rarely used by the Gospel writers, *thaumasion*, would most accurately convey the meaning of miracle in this context.

<sup>2</sup> John Ch 20 v 29.

to nature and its laws. Those laws, and the universe that embodies them, are held solely by the Logos, the Word and Reason of God, eternally uttered."<sup>3</sup>

To comprehend the events surrounding stigmatisation, cases need to be examined from a number of perspectives. Earlier, the manner in which stories, myths and legends become associated with stigmata was examined in the context of the lives of contemporary stigmatics. From this examination there emerged an important contribution to the understanding of the reports of mystical phenomena and the role of embellishment. Further insights were also gained by examining the way in which people reporting such phenomena act *en masse* and how an individual's, or group's, willingness to accept the miraculous plays an important part in the development of stories of miracles. Furthermore it would appear that someone who believes in miracles is more likely to witness a miracle than someone who does not believe in them because that person is more prone to interpreting a normal, but unusual event, in terms of the miraculous and more likely to disregard contrary evidence for fear of undermining a participatory experience.

It is beyond the scope of this study, and not necessary to it, to examine whether any of the alleged instances of paranormal phenomena associated with stigmata can be attributable to forces beyond the normal. It is appropriate however to quote the theoretical chemist Charles Coulson at this stage. "When we come to the scientifically unknown, our correct policy is not to rejoice because we have found God; it is to become better scientists."<sup>4</sup>

There is still much to learn about the human mind and the human self. It has been postulated that all human beings might be linked, or have access to, a collective but unconscious pool of memory and emotion which is expressed in archetypal images and

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<sup>3</sup> John Polkinghorne essay in *Readings in Modern Theology* ed Robin Gill (London: SPCK 1995). p26

<sup>4</sup> *ibid* quoting CA Coulson *Science and Religion: a changing relationship* (Cambridge: Cambridge University Press 1955)

experiences. Is there in some way a shared memory from which the christian mystics, those pursuing the shamanic tradition and many other holy men and women in diverse cultures can draw? Are humans at times of great stress or heightened emotion, able to reach beyond their normal capacities and capabilities? Is it perhaps only in exceptional times, as CS Lewis suggested, or in the presence of exceptional people that the miraculous can occur, or does everyone have the capability within themselves to reach beyond the normal boundaries of existence? And does this occur within the material world or that of the imagination, dream, story-telling and myth?

These have not been questions which have been or are able to be addressed by medical scientists, although Margnelli was aware of them in conducting his experiments. Therefore the medical model can only give a partial understanding of the reality of stigmata.

Similarly the model which sets stigmatisation within the tradition of mysticism has its limitations if the contribution of medical science is excluded. Yet the study of stigmata must be included within the traditional claims of mystical phenomena in order to achieve an overview, for that study leads to addressing certain theological issues pertaining to stigmatisation.

In the case of stigmatics, hearing voices and seeing visions is a consistent and common feature and accompaniment to the physical display of stigmata. Frequently, stigmatics report that their stigmatisation is accompanied by their seeing vivid scenes of the passion of Christ. In some cases it is a vivid vision of the Virgin Mary, or of heaven, or of hell. Sometimes stigmatics have been able to draw pictures of what they have seen. While some reports of these visions or dreams have become exaggerated in their telling, there is no reason to suggest that the first-hand accounts of visions have not been told in good faith. Indeed the more one examines both the contemporary cases and those of history, the more it appears that the forms the visions take are similar and

consistent with each other. This could be used as evidence to suggest that the visions and the voices therefore come from one source, namely God. Yet that would be a view that would be difficult to sustain. Important details differ from case to case. If a vision of Christ crucified was indeed a vision that came from God and was an accurate reproduction of the events which occurred in Jerusalem around 33 AD, it might be assumed that the visions would be consistent with each other and the historical facts. However, while most stigmatics have reported a vision of Christ's hand wounds bearing nail marks in the palms, more recently wounds in the wrists have been seen. This is clearly an inconsistency. One version must be historically inaccurate. Nail prints in the palms was the old image of crucifixion and wrist injuries a more modern understanding of the nature of that form of execution. Indeed, it was only when it was realised that wrist wounds were more historically correct that these images began to appear. It can be argued that the voices which have been heard have brought messages which have frequently been surprisingly shallow. They have consisted of general admonitions to the world and calls for repentance and closeness to Christ, but few stigmatics have ever yet come forward with messages so pertinent and powerful that they are remembered for their messages and not their wounds.

It is known that the mind when in an altered state of consciousness to that of normal waking alertness is capable of visualisation, of creating images. It happens regularly to almost everyone as dreams. At this time the unconscious mind draws on common archetypes to reconcile or express emotions. Under hypnosis, "one of the recognised altered states of consciousness"<sup>5</sup>, it can be suggested to a willing and susceptible subject that he or she see almost anything suggested by the hypnotist. A trick used by stage hypnotists involves the subjects being persuaded that the hypnotist himself is invisible. When this happened and the hypnotist came on stage with, say, a broom and begins sweeping, the subjects react as if they were seeing a broom moving across the

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<sup>5</sup> M Margnelli interview with author and examined in *Gente di Dio*.

stage as if by itself, supported by no-one<sup>6</sup>. Some find this intriguing and begin to examine the broom, others appear alarmed by what they see. Hypnotists argue that no one can be controlled unwillingly and that the subject fully cooperates in creating convincing images with which to delude themselves. The implication of Margnelli's view<sup>7</sup> that stigmatic visionaries enter an altered state of consciousness is that they too willingly delude themselves with religious images in their minds' eye.

In the state of consciousness which exists between sleep and awareness it seems that confusions can arise with the images of the dream being superimposed upon the reality of the world. Therefore, it is not difficult to understand how a vision can occur. It is as if a person, although awake, is simultaneously dreaming and in doing so is drawing from the subconscious images which to him or her appear very real. Outsiders require secondary evidence from which to deduce that a vision is being witnessed by another. This is rarely available. Margnelli points to the case of the visions of Medjugorje where the children who go forward to see the Virgin Mary act in an unusual synchronised manner.<sup>8</sup> The crowds which gather every day to watch the children do not see their vision, but do not doubt the childrens' accounts, because the children are seen to react in unison. It is generally accepted by those in the crowd that some people are favoured and will see visions and others will not.

When the evidence of witnesses to religious phenomena is examined it needs to be kept in mind that the mind and the eye together can play some curious tricks. There are numerous reports of people witnessing events which they have incorrectly interpreted. Witnesses to crimes, when asked to recall what they have seen, often confuse and blend memories of more than one event into testimony of a single event, without intentionally wanting to mislead. Consequently they describe scenes which never

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<sup>6</sup> Witnessed by the author at a stage show in Glasgow 1978.

<sup>7</sup> M Margnelli interview with author and examined in *Gente di Dio*.

<sup>8</sup> M Margnelli interview with author.

existed. Furthermore many optical illusions have been developed deliberately to demonstrate how the eye can be confused.

Bearing these points in mind in examining even some of the more extraordinary stories (such as bi-location) it is possible take a dispassionate overview and, mindful of the principle of Occam's razor, forward natural explanations for alleged supernatural events. A person thinking of Padre Pio, or having some unconscious memory of the friar, might well conjure up an image of him at a time of need. Should this have happened at a time when Padre Pio was alive, the person seeing the image might well have interpreted what they had seen as an instance of bilocation. Padre Pio would be at San Giovanni Rotondo even though the vision, conjured up by the third party would be witnessed somewhere else. Also if people had come to see Padre Pio, and had themselves been in some form of distress, they might have found their own resolutions to their problems simply by being in the presence of the friar. In other words, people making their confessions to Padre Pio, would have resolved their problems in their own minds by focussing on them as they waited to see him. At the moment of meeting with him, a moment they had been eagerly awaiting with the highest of expectations, all would come clear. And because of the priest's reputation. they would attribute that clarity to an extraordinary insight of the priest.

This is not to belittle the role of Padre Pio, or claim in any way that what he was doing was not valid, but it is to root legend in reality. Once a reputation is inflated, justifiably or otherwise, there is a tendency for unusual events to be interpreted in extraordinary ways and for the more basic and simple explanations to be overlooked. Again, according to an individual's understanding of such matters, it would still be quite possible to say that this is the way God works on earth. He does not overrule his creative laws, but uses them to the full. Belief in this approach would be compatible with an acceptance of Hume's assertion that if a miracle is seen as a violation of the laws of nature and those laws are established by unalterable experience then "the proof



against a miracle, from the very nature of the fact is as entire as any argument....can possibly be imagined".<sup>9</sup> In these terms it can be argued that all events, even the mundane and trivial, and certainly the uplifting and miraculous, were pre-ordained, or programmed into the world at the point of creation. And this was done by the creator - God.

It is frequently the case that the legend has more power than the reality. The reality lasts for a short time. It is from memories of brief events that reports are made. Ultimately the truth comes to exist in the legends which have evolved from the reports of fallible recollection. The legends take shape in a form determined by what others want to believe. For example, it has been said many times of Padre Pio<sup>10</sup> that his body temperature rose to an abnormal and superhuman heat when he was struck by fever. This was consistent with stories believed of other mystics. The more obvious explanation that an inappropriate thermometer was used to take his temperature (an imprecise bath thermometer and not a clinical thermometer is one explanation) would in such circumstances have been willingly overlooked. His followers would have wished him to have exuded the *incendium amoris*. It would have fitted in with the whole pattern of the man being something out of the ordinary. In this context it should be pointed out that at times of high fever, many thousands of people have, at some time, had unusually raised body temperatures. Normally this is put down to a medical cause and there is no question of a mystical interpretation being involved. It is only when the person in question has attracted to themselves other curious tales that the raised temperature is seen to be significant.

In the absence of direct evidence linking stigmatisation with events which over-reach the normal parameters of observed nature, other explanations relating to accounts of supernatural events must be explored. It is in the telling and retelling of the stories of

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<sup>9</sup> D Hume, *An Enquiry concerning human understanding* as quoted by Beloff *Exploring the Paranormal* edited by G Zollschan, JSchumaker, G Walshe (Dorset: Prism Press 1989) pb p328.

<sup>10</sup> Cited in all popular biographies including Gallagher and Alessandro



these events, in their evolution into legends, that an answer may be found. Wiseman put it bluntly when challenged by devotees of several religious cults during a popular television debate. "Some miracles may be tricks, some may be natural events, but they are reported by people trying to believe. If you are persuaded that someone has magical abilities, it is easy to read meaning into anything he does. People can be fooled and can fool themselves and then they come back with stories and want to impress their friends. They exaggerate if the facts are not too impressive. It is part of being human."<sup>11</sup> Compounding this perceived human failing are the weaknesses of memory. Nickell described it as an imperfect faculty pointing out that memory traces can undergo distortion. With the passage of time, with the introduction of interfering factors, the memory traces seem sometimes to change or become transformed. "They cause us to have memories of things that never happened. Even in the most intelligent among us is memory thus malleable."<sup>12</sup>

To search for and find explanations for the stigmata and associated events which will satisfy the sceptics is not to dismiss mystical phenomena as the worthless province of the gullible. The stories of the extraordinary happenings, and the power of these stories to sustain and strengthen faith is what is important. In the same way that modern folk-tales of bogus social workers calling on unsuspecting parents to inspect their children<sup>13</sup> might express dormant anxieties about authority and produce fear in a community, so tales of extraordinary religious events can release dormant spirituality and produce christian revival. To say that religious folk-myths are products of human society is not to say that the tradition of faith from which they are drawn is invalid. Reports of the mystical phenomena associated with stigmatisation are the community's response to the entire religious experience. They are not evidence of God overriding the laws of nature. If that were the case it would raise a raft of questions concerning the purpose and nature

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<sup>11</sup> Robert Wiseman, psychologist, University of Hertfordshire, speaking on Zee TV 5 March 1998.

<sup>12</sup> Nickell p 13

<sup>13</sup> A oft repeated and reported urban legend of the 1990s.

of God, and whether he is a loving God which are ultimately unanswerable. What can be said with certainty about the episodes of stigmatisation examined is that the presence of a stigmatic in a community produces observable effects.

Witnesses may respond collectively or singularly. In the first instance the response may be quantified in terms of numbers of people who participate in the response or quantified in terms of economic activity generated by the presence of a stigmatic in a community. In the second instance the response is qualitative and needs to be described by the individual respondent. The cases of Christina Gallagher and Ethel Chapman may be used as examples to illustrate this.

Christina Gallagher attracts 10,000 pilgrims a year<sup>14</sup> to the House of Prayer at Achill, County Mayo. Traders welcome the associated business, even if the parish priest and diocese are concerned about the cultic potential of her mission. Anecdotal evidence gathered by the author from visitors to Achill indicates that Christina Gallagher brings peace and fulfilment to many who go there. The long-term effects of Christina Gallagher's ministry as a victim soul for Ireland are difficult to gauge. She is not a short-term religious wonder. The potential exists for her ministry to grow to be an Irish equivalent of that of Padre Pio. Achill might become a joint pilgrimage attraction along with Knock. They are both served by the international airport built to receive overseas devotees to Ireland's shrines. Christina Gallagher makes herself available to visitors as did Padre Pio. She leads prayers and when her wounds are active they may be glimpsed. She walks amongst the sick, touching each supplicant briefly and her matrix medals are taken away by the faithful as souvenirs. It is an interactive ministry. The people would not come if Christina Gallagher was not there. Christina Gallagher's stigmata and visions would be of substantially reduced value if they failed to attract attention. As the two elements of the Achill experience feed off each other, the movement grows. As at Ballinspittle, there is evidence of true prayerfulness amongst

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<sup>14</sup> Estimate of numbers by Nicholas Watt, *The Times* September 9 1996

the pilgrims who report joyously of the uplifting effects of their visits. They appear to enjoy a religious fulfilment and harbour no doubts. As in the case of the pilgrims involved in the all-night prayer vigil on the occasion of the stigmatisation of Christina Gallagher's feet, the precise cause of her bleeding did not concern them at the time, they were involved in the total experience.

Similarly, for David Lockyer the causal factors contributing to Ethel Chapman's bleeding was not his main interest, rather he focussed on the impression she made on him and his perception of his wider ministry.

Revd David Lockyer, as well as being the spiritual mentor to Ethel Chapman, was also in charge of a parish near to where she lived. It was based around a housing estate which had all the problems of unemployment and poverty of the time. Unemployment stood at 35%. He asked himself the question, why did God appear to ignore the suffering in his parish and yet decide to intervene in the world by implanting the stigmata on a disabled recluse? He believed the answer to the question lay in understanding that God did not ignore the suffering and had not intervened in his world to produce a sort of mystical conjuring trick.

As a result of knowing Ethel, David Lockyer wrote the following: "Being involved with Ethel and the stigmata, I have come across a basically simple soul who has suffered, who has been the victim of circumstances beyond her control and yet has been able to find a meaning and purpose to life and a depth of communion with the ground of her being.

"It hasn't answered all the problems, but it has redressed the balance. It has been a sign to me which has rooted me back to the centrality of the cross. Even if things are stacked against one, I had in Ethel an example of someone who was prepared to surrender her life entirely to the hands of God. I've gone to Ethel sometimes when I felt absolutely

low and said 'how are you today?' and I know full well she has been suffering either with her multiple sclerosis or her diabetes or her inner thoughts, and there's been that smile on her face, and she's said, 'Oh, you're suffering too, are you? I can see by your face, let's have a talk together'. And I've gone away, and she's done more for me than I've done for her".<sup>15</sup>

There is also the argument that even if all of Ethel's experiences (her stigmata, healing, premonition and odour of sanctity) can be explained in terms of the laws of nature, that does not dismiss their divine origin. It can be said that all natural laws are laws of, or are emanating from, God. The answer to the question, did Ethel's stigmata come from God? or to widen it out and ask, have any stigmata come from God? is one that no person can answer for another. The followers of St Francis, the family of Maria de Moerl, the physicians who examined Dorothy Kerin, the crowds who gathered at Padre Pio's masses will all have answered the question in their own ways.

How the question is answered depends entirely on the individual's perception of God. Is God the collective name given to the forces of nature, to everything in this world and beyond, even to those things beyond human comprehension? Is he<sup>16</sup> the awesome omnipotent power to be feared and obeyed? Is He the creator who put in place at the beginning the miracles to come? Or is He the loving father and personal saviour who can guide, direct and intervene in the lives of every person? Each individual must decide for him or herself which image best expresses his or her own personal relationship with, and understanding of, the same God. The answer each person finds, will provide a personal explanation for and comprehension of stigmata. The stigmatic, however guileless or manipulative a personality, can act as a catalyst for this search and in doing so, the wounds of Christ displayed on the stigmatic's body receive added validation. Through the wounds of the passion, any individual may be enabled, by

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<sup>15</sup> Lockyer personal memorandum

<sup>16</sup> The use of the masculine follows convention for reasons of convenience and does not imply that God has a gender.

seeking a direct or indirect relationship with the stigmatic, to find for themselves a deepening of faith, a vicarious experience of the mystical and a glimpse of the numinous.

## Appendix

An understanding of the enigmatic reference made by St Paul to stigmata may be advanced from certain aspects of this study.

The medieval stigmatics and their successors have generally met preconditions. Firstly, they have been of a personality type which has attracted, or initiated reports of the mystical, and secondly, they have tended to be people who were in some way in conflict with, or at odds with authority.

A number of incidents in St Paul's life suggest that he shared some of the characteristics of the later stigmatics. He had experienced a traumatic and life-changing vision followed by what the medical profession might today term, cataplectic blindness;<sup>1</sup> he heard voices;<sup>2</sup> he was associated with a number of 'miraculous' or 'supernatural' events;<sup>3</sup> he reported seeing a vision of Paradise<sup>4</sup> in which he described<sup>5</sup> being taken up into the third Heaven; while not exposed to graphic religious art, he had, in all probability, witnessed first-hand public executions by crucifixion; he was also, not being one of the original apostles, and initially distrusted by them, set apart from those to whom Christ had given his mandate.

It is of equal interest, given the reported histories of persistent ill-health associated with stigmatics, that St Paul wrote of a chronic condition, described as the "thorn in his flesh",<sup>6</sup> which he ascribed to satan. In one modern translation of this passage, St Paul's account is reminiscent of an episode of satanic attack as described by a later stigmatic such as Padre Pio: "I was given a sharp pain in my body which came as

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<sup>1</sup> Acts Ch 9 v 3-9, conversion on the Road to Damascus.

<sup>2</sup> Acts Ch 9 v II, instructions to visit Ananias.

<sup>3</sup> Acts Ch 14 v 3, signs and miracles at Iconium, to cite one reference by way of example.

<sup>4</sup> 2 Corinthians Ch 12 v 1-5.

<sup>5</sup> The description is given in the third person.

<sup>6</sup> 2 Corinthians Ch 12 v 7.

Satan's messenger to bruise me".<sup>7</sup> Many attempts have been made to explain the "Thorn in the Flesh" as a physical disorder: malaria, epilepsy and chronic ophthalmia have been suggested. Underhill<sup>8</sup> points out that St Paul links it directly to his mystical powers and she states the view that St Paul's ill-health is of the type "which dogs the possessors of great mystical genius".<sup>9</sup>

While it is attractive to speculate that the above references help substantiate the view that St Paul did carry the wounds of Christ, it must also be remembered that an important element required to produce stigmata, in the post-12th century sense of the word, was absent. There was no climate of personal dedication to the human body of Christ through a popular devotion to the passion. The memories of the human Christ were of his whole life and not just his painful end and St Paul had direct access to those who had first-hand recollections. The theological emphasis was on the risen Saviour and his return. Yet in her examination of St Paul and the mystic way, Underhill<sup>10</sup> freely employs the insights of medieval mystics such as the stigmatic Angela of Foligno to help explore and explain St Paul's mind.

The above does not prove that St Paul carried the wounds of Christ. On the other hand, if it ever were demonstrated by other means that St Paul was the first stigmatic, such proof would not invalidate the understanding of the phenomena being presented in this thesis.

Finally it needs to be noted that if St Paul had been the first to undergo religious stigmatisation, the weight of evidence suggests the marks would have been humanly and not divinely produced.

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<sup>7</sup> Ibid, New English Bible.

<sup>8</sup> Underhill *The Mystic Way*.

<sup>9</sup> Ibid.

<sup>10</sup> Ibid.

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