

The religious delusion and the “multiple realities” perspective

Mircea Lăzărescu¹, Jenica Blajovan², Marinela Hurmuz³



Rezumat: Puține studii clinice și psihopatologice s-au efectuat cu privire la delirul mistic, deoarece s-a considerat (probabil) că se supune mai dificil metodologiilor de cercetare cognitiviste. El devine interesant din perspectiva doctrinei “realităților multiple” propuse de Gallagher (realități ficționale ale literaturii, teatrului, lumilor virtuale pe calculator) cu care ne confruntăm zilnic. Cazuistica cu delir mistic evidențiază un proces patologic de depersonalizare/trans-personalizare, în sensul unui rol aparte într-o “lume specială” simplificată și distorsionată. Cercetarea trece în revistă 12 cazuri cu delir mistic din Registrul de Cazuri pentru Psihoze Timișoara, aducând în discuție rolul narativității și a identificării cu personaje de narațiune profană, istorică și mitică în constituirea delirului. Comentariul sugerează dezvoltarea cercetărilor fenomenologice existențialiste în domeniul delirului, din perspectiva doctrinei realităților multiple.

Cuvinte cheie: delir, delir mistic, realități multiple, psihopatologie

Abstract: The religious delusion has not been the focus of many clinical and psychopathological studies. A possible reason could be that it cannot be easily assessed through the cognitivist research methodologies. An interesting approach is the one of the “multiple realities” (the fictional realities of literature, theatre, virtual computer world etc.), an idea recently developed by Gallagher. The cases of religious delusion are characterized by a psychopathologic process of depersonalization/trans-personalization, by entering a particular role in a “special mystical world”; a simplified and distorted one. The paper discusses 12 cases of religious delusion from the Case Register for Psychosis Timisoara. It focuses on the role of narrative and the process of identification with characters from the mythical narrations in delusion. It suggests the development of phenomenological-existentialist research in the domain of delusion from the multiple realities perspective.

Key words: delusion, religious delusion, multiple realities, psychopathology

Delusion and the hypothesis of the multiple realities

Jasper’s classical definition of delusion (1) considers it a judgement (idea, thought, theme) held with an extraordinary conviction, with an incomparable subjective certainty, which is impervious to other experiences or to compelling counter-arguments and which has an impossible content.

Understanding delusion as an abnormal belief is maintaining this problem in the field of cognitive disorders, as it used to be in the 19th century (2). The recently growing interest of cognitivist psychopathology in understanding delusion as an abnormal belief led to the development of partially validated theories, such as the “bottom-up”, “top-down” or the deficit in abandoning a false ideamodels (3,4). The interpretation of delusion as a false belief was challenged by several arguments (5,6).

A recent approach, developed by Gallagher (7), suggests the interpretation of delusion from the perspective of “multiple realities” (MR). This idea is based on the fact that a person is not only living in the physical reality, but also in other more or less fictional realities, which are part of his everyday life and which he can access for short periods of time. For example, watching a theatre play, reading a novel, playing a computer game. The scenarios of the fictional realities are characterized by a different spatial, temporal and causal structure than the daily events. When entering these realities, the subject partially extracts himself from the everyday situations and becomes part of different events, being able to identify himself with the fictional heroes of those worlds. Later, he is able to re-engage in his current life. Gallagher writes:

Besides the “world where we work, earn our salary, socialize, enjoy family life, and so forth, there are also multiple other realities that take us away from everyday reality. If, for example, I read a novel, or go to the theatre or the cinema, or play a video game, I spend a couple of hours escaping into a different sort of reality which opens up in the pages, on the stage, or on the screen. In such realities, I may not have a role to play as myself, and I may identify with one or more of the characters presented in these different

media. In dreams or even daydreams or various fantasies, I may more actively play a part as myself, or as a modified variation of myself, but not one that I usually play in my everyday reality”.

Developing Gallagher’s idea, we suggest that delusion can be interpreted as a “fall” of the subject in an aberrant role of a fictional scenario. He is not able to return to his basic condition; he identifies himself with a fictional hero and he thinks and acts by the logics of the fictional world, different from the everyday life. This idea, which has not been systematically developed so far, can be correlated with the existent studies regarding the narrative psychology of the person, developed by Tomkins, Hermans, McAdams (8, Note 1). The issue of the MR is still under discussion. Important references to this theme can be found in the writings of Mircea Eliade (9, 10 Note 2). Eliade discusses the difference between the sacral and profane time. He believes that the fictional realities can be placed near to the special area of the anthropological temporality, exemplified by the mythical and sacral narration. The sacral “world” is a “reality” for people who believe in God and it deserves special attention. This type of reality is not mentioned in Gallagher’s examples.

The religious delusion and its particularities

From this perspective, the religious delusion is of particular interest. It can be considered one of the three main delusional themes, the other two referring to the social interpersonal relationships (paranoid, erotomaniac delusion, delusion of jealousy, of surveillance) and the person’s attitude towards his identity and state of being (preoccupation for disease, for the body image, positive or negative abilities, invention, particular filiation, new identity). The religious delusion is only vaguely mentioned in the manuals of diagnosis and it is less studied than the other types of delusions (11,12, 13). Sims (14) discussed the religious delusion from a psychopathological point of view. This theme has been less common during the 20th century in western civilization (15). The religious delusion can be found in most of the psychotic disorders, especially in schizophrenia (16,17,18,19,20,21), delusional persistent disorder and bipolar disorder. It is more frequently expressed through a special mission given to the patient by God for fighting the evil or saving the world. It is sometimes accompanied by his identification with one of the divine figures. The presence of the devil can be experienced as body possession or through thought and behaviour influence (22).

A special feature of the religious delusion is the fact that it refers to a supernatural reality, which is organized in a mythical, narrative way, and it is traditionally, socially and culturally admitted as a “special reality”. The sacral figure is accepted by the official institutions and by current community practices. The sacral universe is an undoubted reality for the normal believer, which is parallel with the physical and social everyday reality. It is a far away, transcendent reality. The access to this reality is possible through individual and collective prayers. The characters of this world are omnipotent in relation to humans and they have access to one’s intimate life.

In Christianity, the main characters are God, Jesus Christ, the Holy Spirit, and Virgin Mary, who have family-like relationships. In addition, there is the Devil. The main event is the Death and Resurrection of Jesus. The most important themes are fighting against the devil, saving humankind, the End of the World. God takes care of man; he protects him and can send him special messages and missions. The religious delusion is, by definition, a relational one, expressing the subject’s relation to the supernatural, omnipotent characters. The profane relational delusion in the paranoid disorder refers to hostility, surveillance, cheating etc., exceptions being only the erotomaniac delusion and the undefined origin. As a whole, the social relationships develop on an intimate-public diagram. Concerning the sacral, mythical characters, they are, by definition, in a faraway place and they can only be approached indirectly. In delusion, they get closer to the subject and they can directly act upon him.

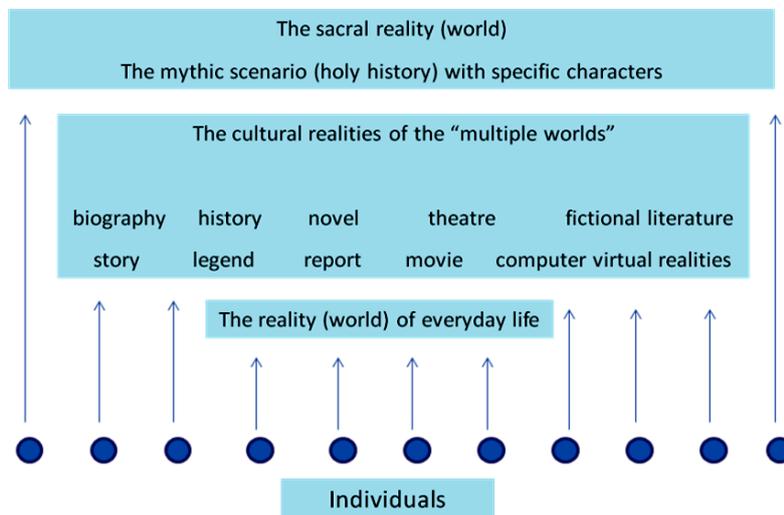
The sacral mythical scenario, the multiple realities (MR) theme and delusion

The multiple realities hypothesis refers, in Gallagher’s description, to the cultural narrative universe of the theatre, literature, novels, virtual reality. The mythical reality is not mentioned.

The characters of the narrative worlds – theatre, literature, history, biography – are placed in an intermediate position in relation to the physical social reality of the everyday life. Generally, they are part of the profane reality and they are not characterized by omnipotence, like the characters of the sacral world. In these “multiple cultural worlds”, we can identify some areas that are closer to the supernatural reality (e.g. witches, aliens) and other closer to the common existence (historical characters, biographical

heroes). The sacral instance is traditionally an inception, a “world-creating” reality. This is the reason why the religious delusion is a special delusional theme, which might have a psycho-anthropological value that can clarify some aspects of this psychopathologic syndrome.

Fig. 1 The realities (worlds) the subject has at his disposal



The subjective psyche of individuals, embodied and involved in the inter-subjective life, is able to process the information of these realities by using their brains

In delusion, as well as in other psychopathological states, the psyche’s structures un-differentiate themselves, affecting the specific anthropologic spatiality, temporality, causality and the identity structure of the subject. Temporality is centred by the present time, which lies between the remembered past and projected future. Spatiality refers to the anthropological distance on the intimate-public axis and to the objective closeness. Causality implies the origin and occurrence of a phenomenon and the way of action, including thinking and language. The subject’s identity has a complex structure. It includes his social identity (name, identity card, marital and professional status, biography), his subjective belonging to the self, the differentiation from others and the environment and the sense of agency and ownership of his experiences. Moreover, it implies the global feeling of self-identity. The impairment in all these areas needs to be explored in delusion.

Material and method

The paper analyses 12 cases of religious delusion. They are part of the Case Register for Psychosis Timisoara. The register includes a total number of 1618 new cases of psychosis during the period 1985-2004, out of which 728 cases are still under observation. This sample has been analysed with different aims until present. During their evolution, 225 cases presented religious delusion.

The purpose of the study is to analyse and understand the religious delusion from the MR perspective. The paper does not discuss the statistical clinical and evolutionary characteristics, but the phenomenological aspects of the 12 cases. The subjects present religious delusion characterized by grandiosity ideas of special mission given by God or identification with mythical and sacral characters. We try to analyse the depersonalization/trans-personalization process of delusion. This process transforms the subject in a special character – a character of the sacral reality, if we consider the particular atmosphere of the religious delusion - but also in other historical or fictional characters, in cases concerning other types of delusions.

Case studies

Case 1. A 41-year-old woman developed a psychotic symptomatology with manic disinhibition and delusion of divine mission: “She is chosen by God and she has the mission to fight the devil”. God talks to her every day. “The Holy Spirit is talking through me”. God has chosen her to be a prophet, because she is

“clean, she does not lie, she has not committed adultery and she has, on the back of her hand, a sign indicating the place of the nail from Jesus’ crucifixion...” “She has a bitter taste in her mouth from the wormwood Jesus had to drink and her body smells like incense”. God protects her and influences her, she has thoughts, which are “given by God”, “her thoughts can be read with God’s help”. She feels she is being followed by people, because “people are devils”, she realized that and she feels “a cold shiver in her back head”.

The delusion of divine mission is correlated with the identification with Jesus; her mission is similar to the one of a prophet. Her intimacy with divinity expresses through thought broadcasting and influence. The religious scenario expands to her relationships with other people, which are “devils”. In most of religious delusion cases, there are particular aspects of Schneider’s first rank symptoms. This deserves a special discussion, the current analysis referring to the identity-relational problem. Her special mission and identification with Jesus places the patient in the supernatural world. She feels protected by God, in the same way a child is protected by his parent against other people’s harm. This closeness and familial intimacy gives a natural explanation to thought broadcasting and insertion, if we consider the fact that every parent can know and influence his child’s thoughts.

Case 2. A 42-year-old woman develops a religious delusion... “she feels that God is inside her and He speaks through her mouth...she has to pray for the whole world”...she feels that she is charmed by her neighbours and mother-in-law, who want to harm her and she feels the para-psychological influences... “Jesus speaks through her voice...she can do anything”.

Even if the identification with God and the special mission are present, people are also part of her scenario. However, they are also “contaminated” by the supernatural world, which the patient has entered, because they are able of doing charms. The identification with a divine character is suggested by the fact that Jesus borrows her speech and assures her omnipotence.

Case 3. A 44-year-old man has a slow onset of psychosis, during a 2-year period, presenting a delusion of grandiosity: he feels that God has sent him on earth, he feels Jesus in his body and he has the mission to save the world from disasters. He has special powers, which he uses for people’s benefit; he is a visionary, everything he thinks happens. That is why he avoids reading negative articles in the media or thinking about them. When he walks on the street, people want to touch him in order to steal his energy, because he has supernatural powers; the people follow him on the street. He is also monitored through the radio and TV. When he had crossed the country border, a storm started: “it was a divine sign which has warned him not to leave the country”. When he looks at the moon or at the Bible, he sees God, the angels and all the saints.

Delusion of special abilities correlates with the special mission and identification with Jesus. His extraordinary capacities are not oriented towards fighting the devil, but they can influence human nature and behaviours. He has “common” supernatural capacities for someone who is part of the “divine world”. People follow him on the streets and through the radio. The subject lives in a supernatural universe, where he is in an intimate relationship with the biblical characters. But this is something usual for someone who is at the same level with Jesus, whom he feels inside his body.

Case 4. A 22-year-old man believes that he is the Son of God and he has to give people presents, like bread, fish, etc. He considers himself the chief of the Foreign Legion and he owns the files of the Timisoara Revolution. He will play in a porn movie...he will buy the Psychiatric Clinic where he is admitted and he will give the clinic his name. He preaches the voice of God and he will go to Heaven because his soul is clean and he has no sins.

The attribute of being the Son of God is combined, in an imaginary and meta-representational way, with other megalomaniac social and political roles. By entering the delusional world, the subject can become a “character” in fictional scenarios. The religious scenario and the role of the Son of God are in the main place. However, the subject can also develop other roles and scenarios, closer to the world he is living in. Thus, the identity role of the Son of God may associate with other identities which can develop in a narrative fictional scenario.

Case 5. A 44-year-old man, during a 3 month onset of psychosis, perceives and interprets different signs which tell him that he has to become a believer... he is sure than the end of the world will be in 7 months, that God sends signs which only a few persons can understand. While waiting the end of the world, he refuses food and he only drinks water from a fountain in front of a church, which he has dreamed and has been guided to. God sends him, he understood from the signs that he will be crucified in the front of the Cathedral in Timisoara, he is guided by the divine power and he can hear his own thoughts. God shows him in his dreams persons who need him to cure them and he shows us two persons, which he has already cured through the power of his hands and faith.

The new identity of the subject, the "God's chosen one", allows him to understand the hidden signs showing the end of the world. The identity transformation goes even further, towards an "imitation Christi", crucified in the front of the Cathedral in his hometown. Schneider's first rank symptoms develop in this fictional atmosphere.

Case 6. A 32-year-old man develops a delusion of jealousy, he feels followed and watched on the street, and then he believes that he is charmed. Later, a religious grandiosity delusion develops: "I am the light of the world, I was sent on earth by God. At Easter, everybody can take light from my angel halo...I am a very important person, everybody has heard about me". "Satan takes the neighbours' image in order to monitor me; I don't know with whom I am talking to any more".

The grandiosity expresses itself in a metaphoric speech ("I am the world's light"). The paranoid delusion is correlated with jealousy, sensitivity, charming and demonic delusions.

Case 7. A 41-year-old woman has a first-episode psychosis with paranoid delusion, symptoms of thought broadcasting and auditory hallucinations. In the second episode, a grandiosity religious delusion emerges: "I am equal to God". The paranoid symptoms are less expressed.

The relationship with divinity is not necessarily one of subordination, mission or identification; the main aspect is that the patient is part of the same world as God. He has the same position, he is his equal. In most cases, the identity scenario is explicitly expressed.

Case 8. A 35-year-old woman presents paranoid delusional episodes (2001, 2002)- delusions of persecution, poisoning, but also religious delusion: "she feels a power descending upon her while she is praying". At the second admission in the hospital, she says, "Jesus lives through me, I am Virgin Mary" and she calls her husband Joseph or Abraham.

Case 9. A 54-year-old woman develops a grandiosity religious delusion, declaring, "I am God", in the same time with a paranoid delusion: she believes that she is followed by the police and securityservices that her grandmother was substituted with a spy and she reports her to the police. She believes that the president and the head of the church are her children.

The identity aspect does not only refer to the patient's person, but also to the substitution of her grandmother. The delusion develops as a narrative scenario, which includes real, important characters, who become her children.

Case 10. A 19-year-old man has a psychotic episode with religious grandiosity: "he is an important person, because the Holy Spirit has descended upon him", "he will save the country form a disaster", "people watch him in a particular way because of his importance". "In the city, there is a witch who surveys him and knows his thoughts", "everybody can read his thoughts through the radio and TV". Additionally, "he can influence the Romanian football team by only pronouncing the word "attacker". "The devils' army has 999 million members, and if we turn the number upside down, it becomes 666-the devil's number". He does not get out of the house "because in the kingdom there is only modern science, there are no flowers or trees". "As a child, an army of devils wanted to harm him, they pushed him in the devil thesaurus, he hurt his head and he has been feeling bad ever since". "The devil controls his thoughts; the whole town, the whole country knows his thoughts". "He is an important person, an Emperor or a Commander;his mother got pregnant with the Emperor, in the same way as Virgin Mary had and this is the way he was born". "The Emperor will send a ship to take him home...or to the Kingdom or to Heaven, he does not know exactly where"... "he fought the devils and he won"... "he became free".

The religious and grandiosity delusions develop in a narrative form, with fairytale elements. His father is an emperor and he was born in the same way Jesus was born. The transposing of one's identity in the fictional narrative constructs a narrative character who detaches from the bodily self in the present person.

Case 11. A 33-year-old man develops grandiosity religious ideas, having a bizarre behaviour. He is sure that he has a new identity, inspired by the historical literature. "He is the good soul of Napoleon, whose uniform he will wear, and he will speak on his behalf. His soul has more covers, he is a genius, he is the people's man, a saint, and his mission is to unify the catholic and orthodox churches, so that the people will pray to the East..." He refuses to eat and he forces his family to do the same "in order to purify themselves and become superior beings"... He is suspicious, nervous and he walks out in a careless outfit". During another admission, he feels he is chosen by God, having the mission to bring peace and wellbeing on earth...he has special relationships with the supernatural forces...he is chosen by God to rule the world at the end of it...he is in an inner continuous fight in his relationships with God, Lucifer, the demons and the angels.

When psychosis manifests throughout the grandiosity delusion, the patient's identity is modified, sometimes embracing the soul of a historical character; but, essentially, his identity is placed in a supernatural existence, in a relationship with divine characters. He is not only imagining them; they are part of the world the patient is living in.

Case 12. A 22-year-old man develops psychotic symptomatology: at a certain moment, he sees Jesus waving; he was dressed in white and blue and, from that moment on, these colours gain a special meaning for him... Everything that happens is related to him and his intentions...There are references to his life on TV, because his thoughts and intentions are known and someone – probably the director of the movie inspired by his life – influences his behaviour and thought... He believes that his body is "signed", at the level of his heart and hand, probably by God... His mother is not his real mother, but a woman who lives with him in the same house. Nor his father is the real one; his father is God or the director of the movie "Sunset Beach"; he is the main character of this series. He is smarter than the others around him and nobody can understand him.

The patient has an indirect relationship with Jesus, who only appears as an illusion of a person in the context of a delusional perception, which leads to delusion. In this state, his identity changes: his parents are not the real ones, he is probably the Son of God, but he could also be the son of a movie director, in which he believes he is the main character. The delusion partially develops through a fictional, but worldly identity, as a movie hero.

Discussion

The religious delusion is often centred by the theme of grandiosity, including a special mission received by God for fighting the evil, defeating the devil or saving the world. Sometimes, this special mission can derive from the feeling of having an extraordinary capacity and omnipotence. In most of the clinical cases, the grandiosity in the religious delusion is rarely accompanied by other manic biopsychological symptoms: the acceleration of psycho-motility with hyperactivity, logorrheic, insomnia, agitation, sexual disinhibition etc. It is correlated with the superior level of the supernatural world.

The subject feels that he enters and becomes part of this world through his identity and mission. Thus, he identifies himself with a special role. God can talk to the subject, can give him a special mission or He can send him divine signs. Often, a process of identification takes place, the subject feels that "he is the Son of God". Therefore, he receives a divine position. The subject can declare: "I am Jesus Christ", "I am Virgin Mary", "I am God". The identity transposition places the subject into the role of a divine character. A patient says: "I sometimes feel I am God and other times the Devil". It is a process of transpersonalization that makes the subject part of the supernatural universe. Traditionally, the notion of "demonic possession" is also used. It is not only correlated with delusion, but also with the dissociative and trance states. In the religious delusion, we can talk about "possession by divine figures" – God, Jesus, Virgin Mary, the Holy Spirit". However, this supernatural possession takes place in the context of intimacy with the sacral world. The religious delusion highlights the "trans-personalization" lived by the

subject when he enters the delusional world. He becomes a “different character” who is involved in the scenarios of “a different world”.

Another important aspect is the fictional narrative characteristic of the religious experiences. The subject enters a fictional world, a world of narrative, history and stories. Mircea Eliade (10) considered that each sacral mythology is a narration, a “sacral story” with characters and events. In the religious delusion, the sacral characters “fall” in a familiar, everyday lifestyle and relationships; hence, the divine myth becomes similar to the narrations of the everyday life, which particularly characterizes the “multiple realities” of culture and history. Not only Don Quijote can identify himself with different heroes. From this point of view, Eliade considers that “the time of the profane narration of the novels” derives from the “special time” of the sacral narration.

Therefore, delusion can be interpreted as the falling of the subject in a narrative scenario in which he identifies himself with a fictional aberrant role; and not only an impairment of the cognitive processes of interpretation. He cannot leave the delusional fiction – in the way a person can abandon a prayer, a lecture or a theatre play. The deluded person is deeply convinced of his false idea, similarly to the conviction of a believer in divinity.

Unlikelreligious delusion, the paranoid delusion or the monothematic systematized one – hypochondriac, dismorphophobic, jealousy, erotomaniac, relational delusion – do not suggest, at first sight, the self-identification with a role or a character from a narrative fictional scenario. However, we can also talk about roles in these cases. The patient focuses his existence on a role derived from the social roles discussed by Pearson’s sociology. From this traditional sociological perspective, the social roles do not only refer to the social statuses: gender roles, age roles (child, adolescent, adult, old man), professional and marital roles (engaged, married, divorced, widow). The sociologic doctrine also accepts transitory roles, such as the role of a sick, cheated, surveyed, persecuted person, the last one being real in the totalitarian regimes.

Most of the monothematic delusions can be interpreted as an identity disorder in which the subject “falls” into the identification with this kind of roles. Nevertheless, in these cases, the process of depersonalization/trans-personalization and the fictional feature of these scenarios are not obvious. Concerning the paranoid delusion in the schizophrenic form, the fictional scenario of the delusional universe sometimes becomes more obvious. For example, when the subject feels that aliens control him. Still, in the case of schizophrenia, the depersonalization phenomenon has special characteristics, with the loss of self-borders and the fragmentation of the self, this aspect makes the process of trans-personalization difficult. The person having schizophrenia frequently feels like an abstract character; or, as suggested by Stanghellini, a spirit without a body, a simple “entity”, impersonally monitored and controlled (23).

The religious delusion gives us an important suggestion regarding the trans-personalization process in the psychopathology of delusion. The subject enters a role in an aberrant fictional scenario. These aspects can lead to important analyses in the psychopathology of delusion, especially because, at this level, we can discuss the differences and correlations between faith and belief.

Conclusion

The approach of religious delusion from the perspective of Gallagher’s “multiple realities” suggests a process of depersonalization/trans-personalization, which leads to the subject’s identification with a role in an aberrant scenario, in a fictional world. The fictional aspect that characterizes the sacral universe in delusion is the consequence of a deficit and psychic de-differentiation induced by psychosis. If we interpret the cases of religious delusion from this perspective, we need to pay attention to the “multiple realities” –fictional realities closely connected to the everyday life, such as the reality of the theatre, novels or virtual computer world. By describing delusion as the fall of the subject in an aberrant role, the existentialist-phenomenological theme of “being in the world” is reviewed. Heidegger approached this concept in his book “Being and Time” and it has inspired the phenomenological psychopathology, especially Binswager’s approach in the field of delusion (24). When discussing the “multiple realities”, Gallagher explicitly highlights this concept. It is an idea that has always been expressed during time by Kraus’ phenomenological-anthropological analyses (25).

Note 1

The narrative psychology of the person considers the self as being involved in different narrations: one's own narration about himself in various situations; but also other's narrations of himself. The narrative self expresses by reference to the lived episodes of different durations and has its fundamentals on the identity structure of the person. From Dennett's perspective, this structure is the centre of the lived and narrated experiences. Tomkins suggested that the person could be interpreted through the role he plays in different scenarios, which he develops for different situational problems. Hermans discussed the existence of several simultaneous "voices" of the subject. These psycho-sociological interpretations of the person develop an older idea of James (1890) regarding the multiplicity of the subject's selves. This view (of a subject playing roles in different scenarios) is in concordance with Gallagher's perspective of "multiple worlds".

Note 2

Mircea Eliade developed the idea of the difference between the sacral and profane time. The mythic history that forms the base of a religious belief is considered to take place in a faraway time, in the sacral time of the beginnings and creation. During the religious rituals, people leave the profane time of work and everyday preoccupations and enter the mythic time of the origins. After that, they spend a short time of celebration, which is also different from the profane time.

The religious ceremony can be considered the prototype of all human celebrations. Eliade suggests that there is a third type of time related to the time of the myth – the time in which the persons recall the historical events and stories that funded the culture and society they live in; and the time of the fictional narrations experienced while reading or listening to a story or novel. This reference to the mythic-narrative time is comprehensively connected to the doctrine of the multiple worlds/realities.

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