

Possession and exorcism in the Muslim migrant context

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Dmitriy Oparin 

Institute for Social Policy, Higher School of Economics,
Moscow, Russia;

Laboratory for Social and Anthropological Research, Tomsk
State University, Tomsk, Russia

Abstract

This paper is based on fieldwork carried out among Muslim migrants in Moscow. The research focuses on practices of ritual healing and expelling djinn in an urban post-secular environment and in the context of migration. Concerning the procedure of exorcism, both self-reflection and introspection of all the participants of the treatment are of interest to me – the mullah, his patients, their relatives and even critics of these Muslim practices. In this study, it is not my intention to delve too deeply into the analysis of what possession is or determine its causes, but rather to look at specific situations from my fieldwork through the lens of morality, authority and precarity, in order to attempt to present the experience of possession and my informants' struggle against it in all its richness and complexity.

Keywords

Migration, Central Asia, Moscow, Russia, possession, exorcism, Islamic healing

This paper focuses on the exorcism practices found among Moscow Muslims, chiefly among migrants from Central Asia. For the past two years, I have worked with several Central Asian mullahs and closely with two Tajik ones who specialize in expelling djinn and more broadly in healing through reading Qur'anic

Corresponding author:

Dmitriy Oparin, Institute for Social Policy, Higher School of Economics, Slavyanskaya ploshad', 4, building 2,
109074, Moscow, Russia.

Email: dimaoparin@hotmail.com

surahs (*al-ruqya al-shar'iyya – the shari'a cure*), as well as with some of their patients. Qur'an-based treatment practices are one of the most popular forms of Muslim medical and, in particular, psychological aid, both in the Western migrant environment (Eneborg, 2013: 1080) and among the inhabitants of Muslim countries (Maarouf, 2007: 1). The focus of this study does not extend to all manifestations of *ruqya sharia*, but only the treatment of possession – the expulsion of djinn from human being by means of the recitation of Qur'anic texts aloud – though I did during the fieldwork witness therapeutic Qur'an reading sessions after surgical operations or in connection with patients suffering difficulties at work, anxiety or confusion. I will therefore consider exorcism in the broad context of *ruqya sharia* – healing with the aid of the Qur'an.

In the journal *Ethnos*, Emma Cohen writes that 'possession is not a "thing" to be explained, but a complex series of patterns of thinking and behavior' (Cohen, 2008: 5). Not only is possession itself a highly capacious phenomenon, exorcism, as a method of fighting it, is likewise a complex system of ideas and practices. I do not consider an exorcism session solely as a matter of ritual. I approach such acts as an integral part of a large-scale process of personal re-islamization (or rather individual religious and general existential reflection), whose actors include the afflicted and the mullah as well as the patient's relatives, his/her friends and the relevant Muslim environment, not to mention God and djinn. Over the course of my field research and work with the literature, it became clear to me that to restrict myself to a conceptual approach would prevent me from looking at this multiple-component and multiple-actor practice in all its fullness and internal contradictions. I thus propose to approach exorcism through the prism of several concepts – morality, authority and precarity. It is important here not to be held hostage by the dichotomies that inevitably arise during any anthropological study of contemporary Islamic practices. Observing the existential and ideological complexity of Muslim exorcism is an opportunity to reformulate such dichotomies as traditional/modern, Islam/*shirk*, superstitious/scientific, religious/everyday and sacred/secular.

In his monograph *The Ethical Condition*, Michael Lambek put forward the concept of underdeterminism, which has it that human behaviour is not fully determined by cultural, religious or any other abstract factors, and that the notions and practices of informants cannot be explained only within these or other concepts. This idea took shape for the scholar precisely during his research into possession:

The underdetermined quality of human action became especially salient for me as I thought about spirit possession and saw how inadequate it was to reduce it to a variety of casual and motivational factors that entirely failed to do justice to the complexity of the genre, the unique combination of passion and action, or the integrity and creativity of the spirit mediums. (Lambek, 2015: XVI)

The need for anthropologists to focus on the individual and existential experience of their informants, on the uniqueness and uncertainty of a particular event or phenomenon, was raised by Michael Jackson and Albert Piette:

<...>a refusal to reduce lived reality to culturally or socially constructed representations, and a determination to explore the variability, mutability, and indeterminacy of that lived reality as it makes its appearance in real time, in specific moments, in actual situations <...>. (Jackson and Piette, 2017: 3–4)

In this case, existential anthropology, with the attention it pays to personal experience and the conceptualization of precarity and inexplicability, seems to me a most appropriate theoretical basis (Jackson and Piette, 2017: 9).

Many studies on the anthropology of Islam have focused on the individual and the everyday, setting their aim as capturing a contradiction-filled reality while not distorting our perception of it by resorting to either dichotomies or unnecessary labels. In their preface to the collection of papers *Ordinary Lives and Grand Schemes*, Samuli Schielke and Liza Debevec write that in the study of different religious practices, it is vital to pay attention to the ‘actual lived experiences [practice – author’s note] and their existential significance for the people involved’ (Schielke and Debevec, 2012: 2). I consider various practices in local religious and migration contexts through the prism of the concept of *everyday lived Islam*. This is broad-based and highly convenient, as it provides a basis for anthropological research beyond established religious institutions and outside the framework of religious determinism. Examining Islam in the context of the ordinary life routine of believers, the localization of Muslim phenomena outside the traditional Muslim field (Kloos and Beekers, 2018: 5) enables researchers to more thoroughly understand the identity of contemporary Muslims, to trace the religious dynamics in the life histories of individuals and to attempt to get away from normative prescription in the field of research into a living and flexible religion. This concept returns agency to ordinary Muslims (Mahmood, 2005; Sunier, 2014: 114), ‘legitimizes’ doubts, frustrations and seeming incompatibilities in the field of research into the individual and the religious, and emphasizes the anthropologist’s focus on ‘previously invisible or overlooked dimensions of religious life’ (Woodhead, 2013: 15).

The focus of this study is on how the possessed perceive their condition, how the mullahs and patients interpret the causes of it and their methods for getting rid of unclean spirits. I am interested in how the informants themselves explain their possession, how their religious interpretation of their misfortune correlates with their often positivist position and scientific medical ideas, and in which Muslim, social, economic, cultural and legal contexts mullahs and their clients exist. I am interested in the figure of the mullah, sources of his authority within the context of healing, his sacral and social capitals and how he empowers his patients while curing them.

Methodology

For the past two years, I have worked closely with two Tajik mullahs. The first, Akhmet, was born in 1977 in Dushanbe, Tajikistan. After nine years of general education, he left to study carpentry, and in 1994 he came to Moscow, where he worked first at a bakery and then on a construction site. He spent from six to eight months in Russia every year. Since the early 2010s, he has moved into the retail of Muslim fragrances, cumin and olive oil. His main source of income at present is the sale of dates, cumin and extracts of the *kyst al-hindi* plant to individuals and shops, as well as reading the Qur'an to people experiencing problems, chiefly that of possession by djinn. In 2007, Akhmet met his future teacher (*ustadh*), who was then working as a taxi driver in Moscow and holding sessions of Muslim exorcism. He taught Akhmet to read the Qur'an and introduced him to the practice of expelling djinn. A few years later, Akhmet made his first hajj. It was in Mecca and Medina that he made friends with local mullahs practicing *ruqya sharia*. Since then, Akhmet began to regularly visit Moscow Muslims and help them deal with cases of possession. Recently, in January 2019, the mullah made a small hajj (*umrah*). When we met in February, Akhmet discussed the details of the exorcism practices he had recently picked up in Arabia – for example he now reads the Qur'an while blowing onto the possessed, under their shirt over their chest and into their eyes. Akhmet spends most of his time in two locations – at the Historical Mosque, which he had started attending as soon as he arrived in Moscow, and in a Tajik halal café in the south-eastern part of the city. Over the many years that Akhmet has spent in Moscow he has managed to build up an impressive amount of social capital. Almost all of his patients come to him via word of mouth. He has become one of the most famous Tajik exorcists in Moscow.

Akhmet conducts his sessions either at the clients' home or in patients' parked cars. He prefers not to read to people from the Qur'an in the mosque for two main reasons. Firstly, Akhmet is wary of conflict with the imams, administration and security guards of the Historical Mosque. It should be noted that Central Asian mullahs regard the 'official' imams with a certain degree of distrust, while the latter forbid the performance of rituals on the territory of the mosques (Oparin, 2017). Secondly, Akhmet views the mosque as the space where he prays, communicates with his friends and is refreshed. He does not like constantly having to answer questions or give religious advice to members of the congregation. We often discussed Akhmet's professional strategies – he has, at various times, thought about opening a halal shop, getting a job at a farm in the Greater Moscow region and becoming an imam. However, whatever Akhmet might end up earning in his professional life, he has no intention of giving up his exorcist practices, as, in his words, he has never regarded them as work, but perceives them rather as a kind of religious duty.

Islam (the name has been changed) was born in 1979 in Kulob, Tajikistan, in an Arabo-Persian family of hereditary *hafiz* (those who know the Qur'an by heart). In 2000, he arrived in the Greater Moscow town of Dubna, where he studied

programming. Islam is now working in the wholesale retail of cumin and Muslim fragrances, supplying these goods to private clients, as well as conducting exorcism sessions. He lives outside Moscow and regularly visits the prayer hall in neighbouring town Balashikha, where he has established good relations with the local imam, who turns to him if anyone in the congregation complains of possession. Despite his extensive knowledge of Islam and many years of experience in exorcism, Islam is currently studying at the Moscow Islamic Institute. Akhmet has also several times expressed a desire to enter this institution. 'Informal' mullahs desire to protect themselves from unwelcome questions on behalf of the law enforcement agencies, and they wish to legalize their religious practices in the Moscow Muslim environment, thereby removing any legal uncertainty in conditions where the state and general public are suspicious of any non-institutionalized Islamic activity.

I met much more often with Akhmet than with Islam. I conducted unstructured, in-depth interviews with him at a café at the Historical Mosque, at a Tajik halal cafe in the south-east of Moscow, and in a car while driving to see patients. I often recorded our conversations on a dictaphone. Akhmet was against me filming video footage of his exorcism sessions, though he did not object to my using the dictaphone. It is my belief that research in the field of anthropology of religion necessitates frequent meetings with informants over a long period of time. In the paper *Tactical and Strategic Religion*, Linda Woodhead points out the significance of a 'long-term relationship between researcher and researched which involves sharing everyday life' (Woodhead, 2013: 13). Visits to patients for holding rituals were far from always the particular reason for our meetings. I accompanied the mullah when he was delivering goods, advised him when his eldest son was entering university in Penza, we went to the market together, spent a lot of time with Akhmet's friends and sometimes just met for tea and *plov* in a tea house. We discussed family and financial issues, politics and culture. It was important for me to understand the context in which the mullah's religious activities take place.

However, the exorcism sessions remained the key events in my fieldwork. I would pick up the mullah from the mosque, his house or a café and drive him to the house of his patient. On the way, we discussed the specifics of the afflicted individual's case and I learned how the mullah had come to meet him or her. The sessions took place in the communal apartments of migrants and in the individual apartments of better-off clients, as well as in patients' parked cars and on construction sites. I regularly provided my own car as the venue for an exorcism session. Often patients were accompanied by their relatives or friends. Akhmet and Islam introduced me as their friend, which removed any distrust the patients may have felt towards my presence. Conversations with relatives and the patients themselves took place after a Qur'an reading. We would discuss the patient's illness, people told their own stories of possession and the mullah and relatives gave comments. Sometimes I only talked with the relatives if the patient was unable to keep up the conversation. My sincere participation in the afflicted person's misfortune, my proximity to the mullah and knowledge of Islam were all factors that inspired confidence. After the session, the mullah and I got into the car and

discussed the features of a particular possession at length. We could typically visit up to three patients in a single day, holding our meetings on an almost weekly basis.

I met many of the patients one-to-one over the course of several days. Longitudinal research not only provides an opportunity to establish a trusting relationship with one's informants, but it also enables the dynamics of the illness and the attitude of patients to their possession to be followed over time. For example, it was only during our third meeting that a young Chechen suffering from a djinn admitted that he did not believe the mullahs, was traumatized by the disdain with which his relatives relate to him and had begun visiting a psychic medium and reading more about the pre-Islamic beliefs of the Vainakh peoples.

In addition to the mullahs and their patients, I also met with Moscow and Greater Moscow imams, two Muslim psychologists, Muslim intellectuals, and teachers from the Moscow Islamic Institute. It should be noted that some of the imams with whom I spoke talked about their own change in attitude about possession – moving from skepticism to full recognition. These interviews contributed to the formation of a broad-based insight into the practices of Muslim exorcism in Moscow and their local religious context.

Who are djinn and how is possession diagnosed?

Djinn are spirits, one of the three categories of rational beings created by Allah (the other two being angels and human beings). Djinn are noted for their dexterity, strength and cunning, and cannot be deceived. On the contrary, they themselves are masters of deception. They live in places unfavoured by humans – in rubbish dumps, in mud and in abandoned houses. The world of the djinn exists in parallel with the world of men, which it resembles in its pluralism. There are Muslim djinn who, according to the claims of the mullahs, are bound to live according to Sharia law, and thus can be made to realize the perniciousness of their penetration into a human being, prompting them to abandon the possessed – i.e. obey the mullah who expels them. However, there are many infidels among the djinn too, who the mullahs are obliged to remonstrate with, urging them to accept monotheism, and making them believe in Allah. Djinn who have been converted in this way must also leave the human body. Djinn can be male or female, elderly or childlike, can belong to different ethnicities and speak different languages.

Djinn are invisible, but possession is often accompanied by visions that come to a sick person during exorcism sessions, as well as in dreams or in a semi-awake state. One Moscow Tajik, tormented by possession, had a dream about a dog, a pig and a bull. All the animals were black. When the informant told me this dream in the presence of the mullah, the latter noted that black is a sign of the djinn. After the informant had asked the mullah to read from the Qur'an, he again began to dream of these animals, this time bound up in ropes. Gradually, the dream changed. The mullah asked the patient to read the *Al-Kursi* ayat (considered the most effective ayat against djinn in the *Bakara* Surah) 70 times a day. Two weeks

later, the patient's dream had changed to feature a very scrawny bull, which was struck by a spear that flew towards it every time it heard the *Al-Kursi* ayat. In the end, the dog and the pig disappeared from the dream, and only the bull remained, lying exhausted in a muddy puddle from which it struggled to climb out. One woman told me that when the mullah first read the Qur'an to her, she saw a woman with three young children and an elderly man. She decided that 'a whole family is probably sitting there'. The second time, the woman in the vision was shouting and swearing, 'like how a witch behaves,' according to the description of the patient. But as time passed, this dream woman became more submissive, asked not to be beaten or attacked, and promised to leave. From this metamorphosis, the patient concluded that her djinn were Muslims, as they were intent on leaving her. A few weeks later, the woman and the children left the vision of the possessed via a bridge leading into the distance, and only the old man remained:

And I felt a glistening breeze, a lightness. There where I have the suture (from an operation, the patient is struggling with cancer for which she has undergone surgery – author's note). It was as if the man was left behind the scar, still sitting there. He seemed as if he wanted to leave, saying 'let me go', but he wasn't an angry old man, not aggressive. Djinn can be different. These ones were Muslims, probably (female, 50 years old).

Both informants who spoke about their visions were struggling against possession manifested in the form of disease. The woman had cancer, and the man was suffering from gastroenterological problems. Both visited doctors and had been examined in hospitals, but at the same time they invited the mullah to see them. They had visualized their physical ailment, demonizing it. In these visions, the unfamiliar and painful took on animal and human form – something aggressive, evil and elemental. However, each session of exorcism saw these creatures progressively weakened, eventually to depart and disappear completely. This was how liberation from djinn was perceived through their eyes. One of my informants told me that he considered his possession to have begun on a summer day when he was seven years old. Then, during sunny weather, a cloud suddenly appeared and passed through his body, laying the basis for a djinn's habitation therein.

A djinn can move into a person in various different circumstances. Most stories I heard involved the informant becoming possessed after a severe fright. A fear attack knocked the person off balance and made it possible for a djinn to gain entrance. A djinn can move in at moments of anger, intense fury or even extreme joy. However, radical emotions are not the only things that can provoke the entrance of a djinn. A djinn can also take possession of a person through witchcraft (*sihir*).

Based on my fieldwork, I can single out several personal states that can prompt an informant to consider himself possessed or having fallen victim to the evil eye (one of the causes of possession). In the first case, the person is worried, he is confused, he has experienced a series of failures at work and in his personal life. He

cannot find the cause behind this sudden unexpected unleashing of chaos. In the second case, thoughts of djinn are suggested by some physical condition. Going to a doctor or several doctors fails to solve a person health problem and they turn to a mullah, who pronounces a verdict of possession. Trouble at work, a mental crisis, problems in one's personal life, or a non-diagnosable or prolonged illness – all these disasters can coincide. In the third case, the person knows that he has been bewitched and immediately turns to a mullah for help. Finally, there are those informants who are experiencing difficulties in the field of religion. A djinn has been preventing them from reading *namaz* and from visiting the mosque, they felt sick just listening to Qur'an readings.

The most obvious method for determining whether a person is possessed or not is to read from the Qur'an. A mullah reads one of the ayats aloud, and if the patient begins to behave inappropriately, shouting, pushing the mullah away, moaning, growling, fighting back or trying to flee, then this reaction indicates possession. The words a patient shouts or utters during an exorcism session are attributed by the mullah as coming from a djinn.

The fundamental idea to which the mullahs drew the attention of both myself and their patients is the dogma that everything in this world happens according to the Divine will. Possession is a test sent by God, and deliverance from djinn is in His hands. At the very beginning of our collaboration, Akhmet told me during the first interview that '*You mustn't say I heal you. It is Allah who heals; all is done according to the will of Allah.*'

The variety of approaches to exorcism and possession and reformulation of the dichotomies in the present Moscow Muslim space

Each of the mullahs I worked with prioritized the Qur'an in his exorcism practices. I noted a degree of pluralism in healing practices, occasionally contradictory, between the methods of different mullahs. However, all my healer informants were united in emphasizing that their practices are in direct opposition to shamanism and witchcraft, or rather their own ideas of shamanism and witchcraft. Stefania Pandolfo in her *Knot of the Soul* emphasizes the elusiveness of the difference between 'false' and Islamic cures, this being a difference that '*needs to be continuously reaffirmed and rearticulated both in practice and discourse*' (Pandolfo, 2018: 299).

Moscow mullahs legitimize their activities and assert their expertise through focusing patients on the Islamic nature of their practices, which centre on the Qur'an and whose success depends solely on the will of God. Many researchers have written about the contemporary avowed 'cleansing' of healing practices from 'paganism' and shamanism in the Muslim regions (Eneborg, 2013; Garrone, 2013; Rasanayagam, 2006: 385, 388). The border between *shirk* and Islam was an absolutely clear one for all my mullah informants. It was just that each of them interpreted things their own way. Some believed it was forbidden to talk with

the djinn, who in no case should be engaged with in secular dialogue; djinn can only be admonished and addressed using the text of the Qur'an.¹ Others, on the contrary, held conversations with the djinn in my presence. Some mullahs rejected the use of talismans (*tumour*), but made use of such widespread practices as *tashtob* – whereby the mullah writes an ayat on a piece of paper, drops this into a glass of water, and the patient then drinks the water in which this fragment of sacred text has dissolved. Some mullahs criticized others for beating patients or even using a knife to frighten or cause pain to a djinn.

Of particular interest are the stances the imams at the Moscow and wider Moscow region mosques take with regard to the practices of exorcism and the general relationship between djinn and mankind. There is no single position ascribed to by the imams, and, judging from my interviews, their attitude to possession can change depending on their own experiences and practices of interaction with their congregations. One of the imams at the Moscow Cathedral Mosque characterized his attitude towards the expulsion of djinn as extremely negative. He even cast doubt on the possibility of djinn being able to move into a person's body at all. The imam of a mosque in the Moscow region town of Balashikha was likewise skeptical about any complaints of possession he heard from his parishioners: 'People just want an easy solution to their moral and personal problems, obtained through exorcism. In reality, they have no *shaytans* in them whatsoever.'

Nevertheless, this imam always gives the telephone number of a Tajik mullah to those who still insist on being possessed and are asking for a spiritual authority to intervene. Particularly interesting is the position expressed by another young imam of the Moscow Cathedral Mosque. He, like the rest, is skeptical regarding complaints of possession. This imam explains people's anxiety in terms of their mania for watching videos on YouTube, their religious illiteracy and spiritual weakness. The imam claims that his parishioners turn to him almost daily with such matters:

I was skeptical too, to be honest. I thought it was just tall tales, that there was no such thing. But when you are reading the Qur'an in real life and somebody goes into this state of – I don't know what to call it – inappropriate behavior, when they start shouting and making noise: 'Stop reading!' they cry, and use obscene words, and some even display gag reflexes. And djinn make contact with you, talking in inhuman voices. It is hardly possible to go on not believing after that.

Despite his references to the stance of the authoritative contemporary Muslim scholar Yusuf al-Qaradawi, who holds that a djinn cannot move into a human being, but can only inspire him with harmful thoughts, this imam, having personally encountered cases of possession, now has no doubt of its existence:

That djinn move into people – yes, I didn't believe that. It isn't written in the Qur'an. I tell you – I wasn't interested in such things at all. But when I actually encountered this here in Moscow, I changed my opinion.

This imam even began to keep a journal in which he recorded all the cases of possession he encountered, describing the actions and words of the possessed person in detail, as well as his tactics for getting rid of the djinn. Another imam, of a mosque in Podolsk, a town outside Moscow, began making a map of the neighbourhood to show places where, according to his research, there were many djinn – learning from parishioners who complained about possession where they lived and most often worked, and plotting these locations in order to identify dangerous areas.

Thus, we may speak not only about the pluralism of techniques of exorcism, or about the blurring of the boundaries between *shirk* and ‘correct’ Islam, but also about the lack of unity among the various Muslim authorities (both the official imams and Central Asian mullahs) regarding the existence of possession in general, as well as the fragmentation of their knowledge. Each actor in this heterogeneous Muslim space is striving to legitimize his activities by defining them as exclusively Muslim and devoid, not only of any shamanistic features, but even of any regional or cultural specificities.

In his study of *ruqya sharia* practices in East London, Yusuf Muslim Eneborg explains the popularity and ramification of such a phenomenon as healing with Qur’anic texts in terms of the globalizing trends and attitudes present in Muslim society, especially among Muslims living in the West (Eneborg, 2013, 2014). The practices of *ruqya sharia* are becoming institutionalized (centres have appeared that specialize in expelling djinn and Muslim psychiatry) and commercialized (a wide range of nutritional supplements, tablets and varieties of tea can be found in every Moscow mosque that not only help people cope with their physical ailments, but which are specifically recommended by mullahs in cases of possession) both in Russia and in Western Europe. The expulsion of djinn and *ruqya sharia* as a whole are portrayed by the mullahs not as magical practices, but as universal Muslim strategies that are supported by biomedicine. The mullahs legitimize these practices not as a preserved manifestation of a regional tradition, but as strategies, devoid of any ethnic or historical connotations.

Akhmet never presented his ideas or methods as being Central Asian or Tajik. His conversations with both myself and his patients were always framed as part of the universalist Muslim discourse. I went with him to expel djinn not only from Tajiks, but also from Kyrgyz, Dagestanis, Uzbeks and Chechens. Akhmet himself had been on Hajj several times, and had visited Chechnya, Belgium and Turkey, where he always took the opportunity to meet with local experts on *ruqya sharia*. His Muslim worldview and his healing methods go beyond local traditions; he positions himself first and foremost as a Muslim, and refers in his conversation to the experience of religious authorities from various different regions of the world.

A significant proportion of the patients I met were suffering from physical ailments that had been diagnosed (or not in some cases) by medical doctors. Some had turned to the mullah in despair when their medication or other medical interventions had failed to help. Others were struggling simultaneously in different

ways to deal with their situation – consulting with physicians in hospitals and meeting with mullahs. Many anthropologists working with possession have noted that neither the religious healers nor their patients see any contradiction between scientific medicine and *ruqya sharia* (Eneborg, 2013: 1082; Johnsdotter et al., 2011: 746; Rozario, 2009: 185). ‘Hybrid’ explanations of disease, as Eneborg calls them, and, accordingly, hybrid methods of tackling it are accepted by the mullahs and practiced by patients. In conversations with patients, I noticed that the medical is not something they oppose to the religious in describing their suffering, but that one flows into the other. Tachycardia is associated with the joyous frenzy of a djinn, djinn emerge from behind postoperative sutures in the visions that occurring during exorcism sessions, and the black mucus expelled during vomiting has demonic connotations. Akhmet explained that the psychotropic pills that doctors prescribe, e.g. phenazepam, are designed to soothe the brain of a person in whom there stirs a djinn. But only reading and listening to the Qur’an can neutralize the source of neurosis.

Recently, Akhmet introduced me to an elderly Tajik doctor named Rakhmatullo, who had graduated from a Dushanbe Medical School in Soviet times and came to Moscow several months ago to establish his private medical practice there. Rakhmatullo bases his medical ideas on the unity of mind and body. He believes that a djinn ‘enters through an energy breach’ and chooses a certain organ for its ‘dwelling place’. If the djinn settles in the head, the person begins to suffer epilepsy or migraines, diabetes mellitus if it occupies the pancreas and infertility in the case of the sexual organs. The djinn launches a disease mechanism that two figures alone can cope with – the physician who focuses on the body and the mullah who specializes in exorcism. That is why he offered a partnership to Akhmet – working together to take a comprehensive approach to patients’ illnesses. However, Akhmet is still skeptical and does not trust the medical expertise of this doctor.

When talking about possession, the mullahs and their patients use medical terms (*diagnosis, symptoms, the nervous system*) and make technological comparisons. From an interview with one possessed Tajik:

You see, I have a chronic condition. If a djinni has only just taken up residence, it is possible to expel it, but if it has been living there for 10-15 years, it will have totally occupied all the old DNA. It will be difficult. Because he’s sitting there very comfortably. Maybe with all his family sitting there too. So he won’t leave without a struggle. This is what the mullah explained to me.

It is worth noting that this fairly well-to-do Moscow Tajik, a Russian citizen, has a daughter who graduated from a medical institute. She takes her father to the doctors, but makes no objection to his meetings with the mullah, albeit without clearly expressing her opinion on the possibility or impossibility of possession.

Morality and authority

Possession, as Santi Rozario writes, is never morally neutral (Rozario, 2009: 188). Josep Lluís Mateo Dieste has echoed the same thought (Dieste, 2015: 56). The mullahs I worked with adhere to a fairly simple and understandable logic. Muslims who lead a God-fearing way of life, read *namaz* regularly and keep fasts, avoiding *haram*, build up a kind of armour against the accidental invasion of djinn, as well as against *sihr* and *nazar* from other human beings. A practicing and observant Muslim never finds himself in places inhabited by djinn, and djinn avoid moral and disciplined believers.

If, however, a djinn does take possession of an individual, the mullahs then propose the following strategy to combat this – intensification of religiosity and strengthening of religious discipline, as manifested primarily in frequent listening to Qur'an readings and attendance of mosques, not simply by observing the five daily *namaz*, but accompanying this with the reading of additional prayers. Possession thus becomes a turning point on the path to individual re-islamization. It should be noted from the outset here that, in this case, I am not considering the concept of re-islamization as a synonym for *conversion*, but rather as religious intensification, perhaps situational, in the individual; a Muslim's rethinking of his/her everyday religious life. The majority of the patients I met expressed frustration about what they saw as their insufficiently pious former life, citing past indiscipline in observing the pillars of Islam. From an interview with one of Akhmet's patients who was struggling with both possession and cancer:

Before the age of 50 years, I lived as if I were blind, and then my eyes were opened wide. And I asked if I could be given a chance [by Allah – author's note]. I believe that I had committed many sins. I began looking at the world differently, I read the book.

She reproaches herself for her past sins, and hopes to be healed from illness and delivered from djinn. In her account, these misfortunes are constantly merged into a single evil that has settled in her body. The feeling of sinfulness became a drive prompting her into a fierce spiritual struggle. The desire to get rid of her disease and possession has been translated into real religious exaltation. Thijl Sunier writes about moral error as a constructive, and not harmful, factor that influences the formation of one's religiosity. This is why reflection on past sins turns out to be so important in combating possession.

Sin and negligence became a crucial element in their [his informants' – author's note] narrative because it made their return to Islam all the more explicit and outlined and made them able to understand the real meaning of Islam. (Sunier, 2018: 111)

Re-islamization often takes hysterical forms, as people see an intensification of religious practices as the only solution. From an interview with a middle-aged

Uzbek from Moscow who refused to accept his homosexuality, which he associates with a djinn who entered into him at the age of seven:

I have learnt about 250 ayats from the Qur'an. I read to myself for 2-3 hours and then I either lose consciousness, or I choke and can't go on reading. I have no inner freedom at all. I feel more fear for Allah and little love. Such thoughts come into my mind as if He had created me just to mock me. This damned thing is devouring me from the inside out.

In the constantly created everyday religious life of the majority of my informants, there is an awareness of the religious norms and discipline, or at least reflection on the pious way of life, that could and often does contradict actual practice. The practice is constantly striving for the perceived norm, and everyday life is arranged according to the norm – a norm that the possessed themselves construct based on their individual religious experience and building on the authority of the mullahs and the relevant Muslim environment. The patients that I met far from always follow the prescriptions of the mullahs. They recognize their 'sinfulness', but they cannot do anything about it and are accordingly aware, even in my presence and the presence of the mullah, of their religious weakness. One of the last interviews I made in this study was with a thirty-year-old Tajik taxi driver who had come to the mosque for Akhmet to read the Qur'an to him. Ravshan admitted that he leads a 'non-Muslim' way of life, constantly hooking up with different women, and is, in his own words, a 'sinner' and 'does not fight against his desires'. He had decided to meet with the mullah because a female friend of his last girlfriend had, as he put it, 'bewitched' him. After this alleged curse, Ravshan felt a burning sensation in his chest and a pain in his arm. Worried that a djinn had been sent into him, he went to see his acquaintance, a mullah at the Historical Mosque. As Nadia Fadil and Mayanthi Fernando write:

The efficacy of norms is not only determined by their realization but also by conscious and unconscious discursive and affective attachments to them, irrespective of one's 'actual' practices. (Fadil and Fernando, 2015: 70)

Despite the fragmentary and situational nature of Ravshan's religious practices, Islam constitutes a definite part of his world perception, being among the tools at his disposal to help cope with certain life problems. Non-practicing and non-observant Muslims are found to varying degrees within the Muslim field, and are characterized by a religious consciousness that intensifies at moments of fear or uncertainty – in this case, when faced with witchcraft and possible possession.

Individual re-islamization in the process of combating possession may be regarded as religious agency on the part of the patients. Their healing depends on the will of Allah, though a God-fearing way of life – a key condition for deliverance from djinn – is a prerequisite for God to grant release to a suffering person. One of the imams at the Cathedral Mosque formulated the agency of the

individual in the context of his/her cure and relations with God thus: ‘Allah will not change a person’s condition until they themselves change. A person must display initiative, diligence, effort, and change their ways, and then the Almighty will help him, but if he does nothing there can be no change.’ And the mullah proves to be a key actor here. As Michael Jackson and Albert Piette write: ‘To submit to a higher power is not, therefore, to forfeit one’s own agency but to recover it through a relationship with something beyond oneself, be this a supportive friend, a divinity, a diviner, or a material object’ (Jackson and Piette, 2017: 12). The mullah can be regarded as a religious authority granting agency to the patient. A task of the healer, as Stefanie Pandolfo writes, is ‘to help the afflicted to extract themselves from the state through prayer, through the remembrance of God (*dhikr*), and through a life lived according to the law, on the path of God’ (Pandolfo, 2018: 267). In long conversations with patients and their relatives, the mullah acts as a kind of guide and coach for spiritual improvement. From time to time he repeats the traditional dogmas of Islam, pointing to the primacy of the Qur’an and the omnipotence of Allah, but he always leaves the main role in healing to the patient – i.e. constructing their daily life according to the norms (from the five daily *namaz* to regular taking of cumin or olive oil) and spiritual self-improvement.

However, the role of the mullahs is not limited only to enhancing the religiosity of their patients. The cast of the exorcism, in addition to the mullah and possessed, also includes the djinn themselves. Over a period of two years Akhmet repeatedly mentioned the famous story of Imam Ahmad, who had managed to expel the djinn from a little girl without even seeing her. He simply asked a go-between to show his sandals to the djinn and tell them that Imam Ahmad had orders them to depart. The djinn obeyed unconditionally, as Ahmad was distinguished by his piety and humility before God. An exorcist, according to Akhmet, must be pious and pure. Another mullah spoke of the need to perform nocturnal *namaz* and devote considerable time to reading the Qur’an. Djinn, in their opinion, sense the power of the healer’s faith (*iman*), and heed his call to leave a patient’s body. I have never seen Akhmet irritated, he never raises his voice or loses his temper. He always pays attention to the space around him, and expresses annoyance when forced to be present in an unclean place. As such, Akhmet refused to conduct the exorcism ritual on a construction site a second time. I several times witnessed the mullah refusing to conduct a *nikah* (marriage ceremony) without the presence (at least over the telephone) of the father or brother of the bride. As he explained, any error or deviation from the norms in the religious field could prevent him from being able to continue practicing *ruqya sharia* in general and exorcism in particular. Maintaining his religious purity also featured as one of the main reasons for his constant talk about a desire to take a second wife. His first wife lives in Tajikistan and only comes to Moscow once every six months for the three-month period permitted by Russian migration laws. Akhmet is moving out of his communal apartment to rent a one-room apartment, especially in order to be able to spend more time with his wife. Lack of regular physical contact with a woman gives rise

to sinful thoughts, which also prove to be a hindrance to his religious healing practices. The impressive social capital that Akhmet has built up in Moscow over the long years of his migration is closely connected with the sacral capital he is constantly amassing – something of key significance not only regarding his interactions with patients, but also with djinn. I once asked Akhmet what the reason was for his being so in demand in the sphere of Muslim healing. He replied that he had a talent. I then pointed out that many can read the Qur'an, but Akhmet explained that his talent lies not in giving a beautiful and correct reading of the Qur'anic texts, but in his *courage* when dealing with djinn.

The expulsion of djinn and, correspondingly, interaction with them, begins before the meeting with the possessed. Each time, Akhmet would begin reading surahs in the elevator or staircase leading to his patient's home, building up protection around himself against any unclean presence. During the session, which began for me and for him on the way to the patient's house and only ended afterwards in the car, on the mullah's performance of a silent regenerating dhikr, there not only occurred a personal re-islamization of the person possessed, but also an islamization of the whole environment and the whole situation. The mullah engaged in soul-saving conversations with the relatives and, of course, with the afflicted himself, and also admonished the djinn. Before commencing with the Qur'an reading, Akhmet asked for water to be brought, along with foodstuffs that would also be 'consecrated' during the performance of the surahs. The stronger the respect for the mullah, and the more clearly his authority and piety were realized, the clearer the patient's and his relatives' belief in a positive outcome of the session, and the more confidently the possessed person then went on to order his everyday religious life according to the norms indicated by the mullah.

Precarity and self-care

In an article on possession, Emma Cohen wrote that 'previous medicalist theories of possession and trance phenomena were not only largely culture-blind; they were also mind-blind' (Cohen, 2008: 6). She believed that the prevailing tendency was to explain possession and exorcism in terms of the detached categories of an external positivist observer. I believe that a similarly superficial approach to possession is likewise present in studies that focus exclusively on the social context of this phenomenon. Explaining the causes of possession in a medical framework and explaining the popularity of exorcism through, for example, inequalities faced by Muslim migrants in healthcare or the inaccessibility of medical services to groups that are discriminated against (Khalifa et al., 2011: 69) greatly simplifies the ambiguity and multifaceted nature of this phenomenon. In Russia, even local citizens often find it difficult to get high-quality medical care, and psychology and psychiatry remain stigmatized areas of medicine for many Russians. Possession turns out to be such a multifaceted and individualized phenomenon that one should approach its description simultaneously from several sides.

Different people experience possession in different ways, with different consequences and different manifestations. Their suffering is far from always limited to the physical kind or to their individual psychological instability and inability to comply with the prescriptions of Islam. One of my informants lost his business (he had run several outlets for the sale of vegetables and fruits in Moscow), and at the same time his health began to deteriorate rapidly. Another constantly argued with his wife, who had stayed behind in Tajikistan, and suffered from migraines, bad moods and weakness. Women who cannot find marriage partners approach the mullahs, and Akhmet recently read the Qur'an to a Tajik woman who had failed to find work for eight months and was constantly quarrelling with her husband. Problems in the family, at work and with health very often come along one after another. Sometimes there is no definite medical diagnosis, despite the fact that people have been to hospital.

A state of desperation and uncertainty, and a whole variety of problems, push people into searching for a way out of a difficult situation with the help of a mullah. Previously existing problems are often exacerbated by the uncertainties of migration. Some exorcism researchers in the West have written that migration can indirectly provoke possession (Dieste, 2015: 47). To some extent, I can agree with such statements. It is obvious that migration destabilizes an individual's daily life. Some informants were fearful of deportation, and experienced difficult living conditions, distance from family and an abundance of temptations in the big city and thus suffered from religious self-flagellation, from the perceived absence of their own Muslim discipline.

Possession, the demand for exorcism and the entire mullah–patient relationship can be approached through the prism suggested by Galina Lindquist (2006), which is that the charismatic and authoritative healer (a religious leader) defines the whole complex of suffering and distress of the individual, makes diagnoses and offers a clear and legitimate method (in this case with a Muslim emphasis) to deal with problems. Exorcism can be regarded as a certain kind of psychotherapy. The mullah gives calm and shows perspective, restores the symbolic order of the afflicted. He destroys uncertainty, which is the dominant state for a significant number of patients. Some told me that they would be happy to invite the mullah every day, and others said that they felt better for a week after an exorcism session, the djinn going into hiding and only becoming active again a week later. Possession was demonstrated not only to be an impetus for individual re-islamization, where the struggle against a djinn saw patients reorder their daily routine according to Muslim rules, but also became the basis for a general reordering of their personal life and work.

David Kloos and Daan Beekers write that 'religiosity cannot be detached from its broader context of multifaceted and often unpredictable everyday lives' (Kloos and Beekers, 2018: 5). But religiosity can bring order to a fragmented and chaotic everyday life, introducing certainty and giving perspective. Taking her cue from the medieval theologian Ibn Qayyim, Stefania Pandolfo views the practice of *ruqya sharia* as establishing, with God's blessing, a connection between two souls – the

pure and pious soul of the mullah and the rushing and sick soul of the afflicted (Pandolfo, 2018: 268). I regard exorcism sessions as ‘patching up’ the connection between God and the afflicted individual by means of the knowledge, talent and skill of the mullah. As previously noted, many patients experience problems connected with the religious sphere – due to their possession, hearing the *adhan*, attending a mosque or reading the Qur’an causes them physical pain. On the other hand, many patients find themselves in difficult family situations caused by migration or illness, or both. Thus, a mullah often helps turn around a patient’s forms of social interaction, as well as fixing their connection with God.

Akhmet often met with opposition from those patients who assumed they were possessed but were found to be ‘healthy’ from a religious point of view. He told of how he had had patients who complained, for example, that they had been bewitched and that their work life was suffering. But it turned out that there was no djinn there:

He said ‘Read the Ya Sin surah.’ I said ‘No.’ If I’d told him he had a thousand djinn and needed to have Qur’an readings a thousand times a day, while paying me money, he would’ve been happy to, and agreed to everything.

Sometimes people come to Akhmet for Qur’an readings as a preventive measure. For example, I accompanied him to the largest grocery wholesale market in the south of Moscow to do a reading for a trader who was doing well in business and did not want his competitors or envious people to give him the evil eye.

Uncertainty and the unknown also have a place in the thinking of the mullahs. They read, watch videos, learn new things and seek help from other religious authorities. A mullah never knows how a djinn might behave, and is always in a state of anticipation regarding attacks from evil spirits. That is why, for example, Akhmet reads dhikr before and after a session in order to protect himself, is mindful of his purity and reaches out to communicate with other specialists in order to better understand the world of djinn and the methods for dealing with them.

Conclusion

One of my very first interviews was with a Tajik taxi driver suffering from possession. I sat with him in his parked car after the mullah had gone into a nearby tea house:

When there are a lot of people present on a holiday, he [the djinn – author’s note] doesn’t let me sit side by side with people who have a good iman. He doesn’t let me sit next to them, and he suffocates me. This has been going since childhood. I’ve thought about everything, and I realized that this is something from my childhood. It can kill me. Fate decreed I would download ruqya, and start listening to it. In Moscow, I don’t go to the mosque. They have raids now. Everyone they catch gets deported.

The police don't pay attention to documents. 400 people have already been deported. I'm the only one in the family who is working and I singlehandedly support my wife, children and parents. If I am deported, it will be grim.

In just a few seconds in one very short fragment of the interview, this taxi driver mentioned the djinn that prevents him from living a normal life, not letting him sit with decent and God-fearing people, and instances illustrating the tightening of migration control in Russia. For myself, as for most people in Russia, neither djinn nor the migration services pose any threat, nor do they have any influence on my everyday life. But my informant had set out his whole life in that moment as depending on the djinn and the increasing strictness of migration controls. His own health and the well-being of his family were directly related to these factors. In order to understand and describe such a phenomenon as possession theoretical tools of an ontological approach could be useful. Johan Rasanayagam, who has researched possession in post-Soviet Uzbekistan, wrote:

If we want to explore the processes by which people develop self-representations as good Muslims in the context of healing, we need to move beyond an analysis of 'rational strategies' and follow Jennifer Nourse (1996) in taking seriously the cosmologies present in healing practices. (Rasanayagam, 2006: 379)

I look at djinn as real social actors who interfere with the relationships of my informants and prevent them from mingling with religious people, impacting their everyday life and indirectly changing or correcting their religious beliefs and practices.

However, it would be an erroneous simplification to assume that it is only the Muslim ontology that constructs the notions of those I spoke with, or of Muslims in general. Islam is not the sole moral compass of believers, and their subjectivity is not shaped by their religious principles alone (Billaud, 2016: 505; Fadil and Fernando, 2015: 60). Samuli Shielke writes:

In Egypt today, health, sickness and healing in particular are the site of lively ontological pluralism. People searching for healing in times of illness make use of co-existing yet different ontologies: the molecular ontology of biomedical therapies, which people I know in Egypt tend to trust more than some people in my social circles in Western Europe; the divine ontology of God's power over life, healing and death, which motivates patients and their families to pray, sacrifice, call others to pray, consult spiritual healers and act out the virtues of patience and contentedness with the will of God; and the ontology of humoral medicine in the tradition of Hellenic and Islamic techniques of healing. (Shielke, 2019: 11)

In my research, I have attempted to demonstrate the ontological pluralism of informants who found themselves in difficult life situations and reformatted their religious (and other) ideas and practices following a crisis experience.

People have a broad arsenal of actualized ontologies, norms, ideas and tactics at their disposal when it comes to overcoming a crisis. These ontologies, theoretically, may be mutually contradictory in each individual case, while not excluding each other in the individual context, and all of them combine to form a comprehensive toolkit for orientating oneself in a crisis situation. I have made no attempt to explain possession, but aimed rather to examine this highly complex phenomenon from different angles – which is precisely how the patients themselves look at their illness – and through different eyes. Possession has become a part of the everyday life of each of my informants, and the ailment is sometimes personified, and often has its own biography. I was interested in the fluidity of informants' ideas about their possession and the dynamics of the methods they employed to deal with it. By this, I mean not so much the temporal dynamics as the plasticity and subjectivity of individual perceptions, which contain within them a whole spectrum of ontologies.

This pluralism is also observed among the mullahs. On the one hand, each of them feels his specialization to be an obligation, a duty to God and to his brothers in faith. On the other hand, each one also has some other source of income and sincerely admits to feeling burdened by this 'talent' for expelling djinn. A healer gains a considerable authority among his patients (whether actually afflicted or just those in need of 'Qur'anic therapy'). This authority is rooted in the mullah's social capital (mullahs are recognized within the local Muslim environment, respected and demanded in many crisis situations) and in his sacral capital, which is gained through religious self-improvement and maintenance of individual purity based among other things on avoidance of *haram* and *shirk*. A mullah thereby becomes a guide, provoking ethical discourse, emphasizing the importance of a pious way of life and teaching the ethics of Islam. This authority is shaped and maintained in the context of migration, the political and economic vulnerability of the majority of the actors in *ruqya sharia*, precarity, and a lack of religious and more generally social guidance in the context of dispersed and often ruptured or reformulated social relations and family ties. As such, one of the main points to be noted here is the fact that it is not so much that possession is provoked by the precarity of migration, but that the healer's authority is formed in the context of precarity of migration, an authority that is a product of instability. A mullah's authority, talent and piety thus prove to be among the tools with which migrants deal with risks, stress and chaos, tools that empower patients and reformulate their everyday life and religious perceptions and practices.

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ORCID iD

Dmitriy Oparin  <https://orcid.org/0000-0002-1895-5564>

Note

1. Mullah Islam, for example, explained to me how pointless it is to talk with the djinn as follows: ‘It is better not to engage in dialogue with the djinn, they will deceive you. They are advanced. They were around before we were. It’s like this, for example, we have the iPhone 8, but they have the iPhone 15. We have petrol-powered cars, and their cars are already flying through the air.’

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