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Rocznik Teologiczny
LXII – z. 4/2020
s. 1263-1280
DOI: 10.36124/rt.2020.52

Trance and possession – a subject of interest in theology and psychiatry

Trans i opętanie – obiekt zainteresowania teologii i psychiatrii

Key words: trance, possession, dissociation, demonology, psychiatry, religion.

Słowa kluczowe: trans, opętanie, dysocjacja, demonologia, psychiatria, religia.

Abstract

Medical and theological sciences distinguish two types of phenomena: demonic possession and pathological possession. The Church strongly recommends that a person suspected of being under the influence of an “evil spirit” be thoroughly examined by doctors of various specialisations. The article aims to juxtapose the theological and psychiatric aspects of trance and possession, as well as to popularise knowledge and promote coordinated, holistic care of people with symptoms of possession. A comparative method was used to describe and explain the similarities and differences of the problem discussed. Dissociative disorders (trance and possession ICD-10 F44.3) and the theological category of the influence of the evil spirit constitute the core of the article.

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Streszczenie

Nauki medyczne i teologiczne rozróżniają dwa rodzaje zjawisk: opętanie demoniczne oraz opętanie patologiczne. Kościół stanowczo zaleca aby osoba z podejrzeniem wpływu złego ducha została gruntownie przebadana przez lekarzy różnych specjalności. Celem artykułu jest zestawienie aspektów teologicznych i psychiatrycznych transu i opętania, jak również popularyzacja wiedzy oraz promowanie skoordynowanej, holistycznej opieki nad osobami z objawami opętania. Wykorzystano metodę porównawczą przy opisie i wyjaśnianiu podobieństw oraz różnic omawianego problemu. Zaburzenia dysocjacyjne (trans i opętanie (ICD-10 F44.3) oraz kategoria teologiczna wpływu złego ducha stanowią trzon artykułu.

It is a great mistake of our time [...] that doctors separate the soul from the body.

Hippocrates

Background

Psychiatry and religion are somewhat related; they draw from common sources of human concerns. Their goal and mission is to care for the immanence of the human psychosomatic condition.

Health is the state of complete physical, mental and social well-being of a person — not only a complete absence of illness or disability³. Years after the publication of the basic definition of health, the WHO (World Health Organization) extended it with a further component: the ability to “lead an effective social and economic life” as well as the spiritual dimension (Chuengsatiansup 2003, 3-15). The issue of human psychosomatic well-being is a part of modern scientific analysis. It is the sphere of human spirituality that is the base, and sets the tone for, all emotional sensations, and shows a convergence with one’s cognitive functioning (Heszen-Niejodek and Gruszczyńska 2004, 15-31). Since the

³ Definition following the constitution of the World Health Organization (WHO) of 1946.

beginning, human psychosomatic health has been inextricably linked, resulting from the relationship of man with the Higher Being, with God.

The latest research shows that in order for psychiatric and psychotherapeutic treatment to be effective, it is necessary to adapt therapeutic processes to values, beliefs, religion, and human spirituality (Prusak 2016, 175-186) differential diagnosis, course, outcome and prognosis of mental disorders. Aim. The aim of this paper is to present the attitude of DSM towards religion and spirituality in the clinical context. Even though DSM is not in use in Poland, in contrast to ICD, it gives a different, not only psychopathological, look at religious or spiritual problems. Methods. The paper is based on in-depth analysis of V-code 62.89 ('Religious or spiritual problem').

Trance and possession (ICD-10 F44.3) is one of least often diagnosed disease units. There is no statistical data on the number of diagnoses F44.3. Often, diagnostic difficulties arise from a lack of knowledge about dissociative disorders and their diagnostic guidelines.

This article aims to try to answer the question of whether trance and possession as a nosological unit is the same as demonic possession. Is the phenomenon of demonic possession a psychological phenomenon or a type of psychosis or other disorder of the mental sphere? The article discusses theological and psychiatric aspects related to this debate.

Dissociative (conversion) disorders

The concept of dissociation appeared in the psychological nomenclature at the turn of the 19th and 20th centuries. Author Pierre Janet, who first used the concept of dissociation, tried to explain and classify the spectrum of symptoms of mental disorders then called 'hysteria' (histrionic/hysterical) disorders. Janet postulated that the cause of 'hysteria' is dissociation, that is to say, a translocation to the subconscious of emotions (usually negative) caused by trauma; displacement of self is also associated with the narrowing of consciousness, creating

a reduction in the rate of psychological phenomena that can be consolidated within it (Orlof et al. 2018, 228-233). The rise in popularity of alternative theories, such as psychoanalysis, caused Janet's concept of dissociation to remain unimportant for many years. After World War II, military doctors compiled data from the wartime period on battlefield medicine, and mental disorders resulting from participation in armed conflicts around the globe. The conflict in the 1970s (the war in the Indochina Peninsula) was of great importance for research on dissociation. The medical information collected from the victims of the Vietnam War chiefly brought forth many discussions about trauma, post-traumatic stress disorders, and dissociative disorder conversions. Over time, these conversations led to the development of dissociation as a school of thought, including within it, psychological dissociation (depersonalization⁴, derealization⁵, confusion of personality⁶, change of identity⁷, amnesia⁸) and somatoform (pseudoneurological symptoms) (Tomalski 2008, 35-43; Orlof et al. 2018, 228-233; Seligman, Walker, Rosenhan 2004, 251-263).

According to the ICD-10 classification⁹, dissociation is defined as a "complete or partial loss of proper integration between memories of the past, a sense of own identity, direct impressions, and own control of any bodily movements" (Pużyński and Wciórka 2000, 138). The patient separates from his memories, from his identity, as well as from his body and surroundings. Dissociative disorders includes conditions with disorders of consciousness (dissociative stupor), identity and identification disorders (multiple personality, trance and possession), deficiencies in

⁴ Depersonalization can consist of a detachment within the self, regarding one's mind or body, or being a detached observer of oneself.

⁵ Derealization – a sense of unreality of the world; does not apply to own person.

⁶ Personality confusion – when the patient is not sure of the identity.

⁷ Change of identity – the patient exhibits character traits, skills that have never been owned before and/or did not matter.

⁸ Amnesia – when some time is forgotten.

⁹ International Statistical Classification of Diseases and Health Problems (ICD-10).

memory, mainly autobiographical (amnesia and dissociative fugue), and movement and sensory disorders (Moyano et al. 2001, 559-569; Pużyński, Wciórka 2000, 137-139; Orlof et al. 2018, 228-233). Usually, symptoms of dissociation last up to several days, rarely any longer. Most often, their occurrence is associated with PTSD (post-traumatic stress disorder), or the occurrence of internal conflicts. Dissociative disorders also are seen in people with a history of suicidal attempts, in women who have had an abortion, and in patients with diseases related to gender identification. The experience of sexual harassment or physical and emotional negligence during childhood are also possible prerequisites for this type of disorder. Those conflicted by dissociation are those who seek to avoid feeling negative emotions that have arisen as a result of traumatizing events. Symptoms may be spontaneously stimulated, may be chronic, or may occur as a result of a trigger stimulus. Treatment is usually long and complicated and is often not especially useful. Psychotherapy and hypnosis are essential treatment tools (Tomalski 2008, 35-43; Orlof et al. 2018, 228-233; Brand, Myrick, Ducharme 2014, 167-173; Jedlecka 2018, 97-110). Objawy dysocjacyjne stanowią element obrazu klinicznego wielu zaburzeń psychicznych. W niniejszej pracy dokonano przeglądu klinicznych, fenomenologicznych i epidemiologicznych danych dotyczących zaburzenia, a także zaleceń co do diagnostyki oraz postępowania terapeutycznego u pacjentów z dysocjacyjnym zaburzeniem tożsamości. Dysocjacyjne zaburzenia osobowości (DID).

Psychiatric aspect of trance and possession (F44.3)

Trance and possession is a disorder whose characteristic feature is the periodic loss of self-identity or disturbed allopsychic orientation. Both awareness and attention narrow; the patient focuses on a maximum of two aspects of the environment in which he is located. A characteristic feature of this disorder is the presence of the limited and stereotypical character of movements, repetitive movement patterns or statements. A person functions as if he is influenced by another personality, force,

or deity. This form of disease includes only those forms of possession that are independent of self will, unwanted, and impede normal social functioning. Symptoms appear unrelated to religion and are not characteristic of culture-bound syndromes¹⁰. It is necessary to differentiate the trance-possession diagnosis from psychosis occurring in schizophrenia, as well as from other states of delusion and hallucination. It is also important to exclude other dissociative disorders, especially dissociative identity disorders. Diagnosis excludes the presence of epilepsy, e.g. temporal epilepsy or intoxication by way of psychoactive substances (Mosiołek 2016, 18-24; Somer et al. 2015, 58-73).

Possession is described as an individual or collective case of psychological state grounded upon a change in the sense of identity combined with the narrowing of consciousness. Possession is accompanied by a sense of attachment by metaphysical forces, like the devil or a spirit.

Trance disorders usually occur as a result of ritual action. Ritual trance is often found as an element in local cultures, often as the main point of a ritual ceremony and results in the possession of an individual by a ghost or deity (Mosiołek 2016, 18-24).

Views on the aetiology, diagnostic and therapeutic process of possession have changed over the years. The World Health Organization (WHO) in the International Statistical Classification of Diseases and Health Problems (ICD-10) assigned trance-obsessive symptoms to a nosological unit called: trance and possession (Trance and Possession Disorder – code F44.3), within Dissociative Disorders (ICD-10 F44; Pużyński, Wciórka 2000, 138). A prerequisite for diagnosis in trance-possession disorders is the autonomy from religion or from symptoms derived from religious services. (Mosiołek 2016, 136-139; Pużyński, Wciórka 2000, 18-24).

¹⁰ Culture-bound syndromes are specific mental disorders characteristic of a given cultural area, which do not meet western nosological norms such as Amok, Falling out, Hwa-Byung, Koro, Wendigo, Piblikto.

Trance and possession as religious aspects

The study of angels and the aetiology of evil

“In the beginning was the Word” (John 1:1) a fragment of the prologue to the Gospel of Saint John is a reference to the beginnings of the Old Testament, or rather the book of Genesis: “In the beginning, God created the heavens and the earth” (Genesis 1:1). In this way, the Evangelist John emphasizes that before anything, the word *logos* has always been in God, referencing his co-existence – *homoiousios*. So *logos* is not a creature because it has existed forever. *Logos* in the Hellenic tradition meant the boundlessness of omnipotence. The Judeo-Christian civilization has included in this philosophy the notion of *logos* to mean ‘God’s Mind’ (Sieg 2017, 143-188).

The first words opening the Holy Bible point to God’s creation of an invisible, spiritual world hidden to the human mind, as well as the world of animate and inanimate matter and all laws of physics. The phrase ‘created heaven’ refers to the whole spiritual world, heaven with its inhabitants – the angels. Angels as pure and disembodied intelligence play a ministerial role in the heavens. Angels, being in the direct presence of God, derive from his divine glory and share it with man (Alfiejew 2009, 63-65).

Even before the Creator made matter, and before the first photon of light appeared, the angels raised hymns in praise of God. Unfortunately, in the world of otherworldly intelligence, there was a significant split, and many angelic entities came to oppose God. This faction became the enemy of the Creator and all other entities. Of their own will, Satan and other ghosts decided to go into the darkness (Alfiejew 2009, 66-69).

The word ‘satan’ [שָׂטָן], derived from Hebrew, occurs in the Old Testament twenty-four times and is the root of the word Satan. Satan means the one who accuses, slanders; one who goes against another. The genesis of the meaning of the word is contained in the book of Job, where it always appears with a definite article, indicating the physical nature of evil. The synonym for Satan in the New Testament is the word *diabolos*

[διδάβουλος]. ‘Satan’ has become a fierce opponent of good. This slanderer, ‘prince of lies’ will do anything to destroy man’s faith and belief. The apostle Peter gives a warning (Watson 2017, 218):

Be alert and of sober mind. Your enemy, the devil, prowls around like a roaring lion looking for someone to devour. Resist him, standing firm in the faith, because you know that the family of believers throughout the world is undergoing the same kind of sufferings (1 Peter 5:8-9).

The impact of fallen angels on the human species

In pre-Christian times, the problem of evil was widely discussed. Plato, shaping the idea of good, made an introduction on the discourse on coexistence and the relationship between good and evil based on the ground of philosophy, from which the philosophy of religion is derived. Plato assumed the existence of real evil. The philosopher believed that evil should be understood as a destructive force whose aim is to destroy and destabilize the harmony-based order (Mendeluk 2018, 217-244).

The existence of personal right and wrong from the point of view of Christianity, as well as other great religions such as Islam or Judaism, requires a definition. The existence of physical evil has been justified. One should, therefore, understand the consequence of this fact. It can be considered that embodied evil has been present since the dawn of time and that, parallelly, evil spirits affect what is related to the material world and human beings. For a large part of society, the existence of evil is just as marginal as the presence of the laws of physics¹¹. Understanding the rank of the influence of evil spirits on the lives of each person is of fundamental importance (1 Peter 5:8-9 – cited above).

¹¹ Physics plays a vital role necessary for the development of science and technology, and has a considerable impact on our society. Physics forms the basis of all sciences, shapes our view of the world. Thanks to it we get to know nature, ranging from the scale of elementary particles to the scale of the Universe. The physics such as general relativity hidden under the cover of mathematical operations do not allow the average mortal to reveal his ecstatic beauty.

Christianity does not provide simple solutions. It does not provide a man with a life devoid of struggle, either physical or spiritual. On the contrary, Christian temporality is based on the perpetual struggle against evil. Every follower of Christ should always remember that, just as a wild animal hunts in search of prey, so too does Satan hunt to enslave as many souls as possible. All aspirations of the modern world, based on relativism and moral pluralism, place the individual above the values arising from natural law, the decalogue; man usurps the right to self-determination, excluding in this the divine order of things and the creator's omnipotence. New social realities allow man to forget about the hostile attitude of real evil towards humanity. All dialogue, tolerance and compromise are essential; without them, it would be challenging to create a civilisation. The fault lies in the fact that Western social thought makes the above-mentioned values their divinity; their values replace the concept of the influence of real evil. Fallen angels have more and more scope between human interaction. Today's materialistic and atheistic Western culture exists and is growing stronger, mainly due to the liberation of man from the burden of fear of demons. Should the light of God's glory be extinguished, the whole creation of human thought would fall into destruction, and they would experience great despair. Today, many signs point to the dominance of these dark and gloomy forces of evil, because it is in the secularised world that demonic cults are spreading (Scanlan and Cirner 2010, 157-158; Ratzinger 1986, 120-130).

Whatever some superficial theologians would say, the devil is for the Christian faith a mysterious, but a real, personal and not symbolic reality. Moreover, the devil is a real person ("Prince of this world", as the New Testament calls him, which often speaks about his existence), who, with sinister freedom, opposes God and rules over people, as we are taught by human history - this enormity of repetitive misfortunes cannot be explained by human activity alone. Man alone does not have enough strength to resist Satan. However, united in Jesus, we are sure that we will overcome him (Satan) (Ratzinger 1986, 120).

The apostle James writes:

...but each person is tempted when they are dragged away by their own evil desire and enticed. Then, after desire has conceived, it gives birth to sin; and sin, when it is full-grown, gives birth to death (James 1:14-15).

To tempt (pull) in the Greek *ekselko* [ἐξέλκω], means, in the human sense, to force to do. Even more dynamic is the verb *deleadzo* [δελεάζω], which translates as putting on a hook, baiting. These words symbolize Satan's ways of deception. The prince of darkness, Satan uses bait to draw man toward him. Like an experienced poacher, he camouflages the bait well, masking the consequences of taking the bait. Christian theologian and writer Vance Havner wrote:

Satan is a charlatan, mocker, demon, taking on the form of an angel of light. As is revealed to us in the parable of Jesus: the deceiver does not cultivate the land to harvest wheat, he sows a corncockle that resembles wheat so much that only a few can distinguish them (therefore the final separation was left to the angels) (Hester 1989, 40-41).

Our Creator has repeatedly warned us against the Prince of darkness. Among the main deceptions of modern times, we can distinguish those that directly harm morality, the family, and the Church. In particular, they are shamanic cults, sects, heresies, extreme leftist philosophies, false mysticism and secularization of the church (Watson 2017a, 289).

Possession and trance as a theological category

Possession is understood as a state based on the possession of psychosomatic behaviour. It consists of the periodic or permanent taking over of identity by another, most often, demonic personality, or a higher power of a negative nature. The overpowered person is entirely subordinated to an external metaphysical strength. Symptoms that accompany people under the influence of unclean demonic forces are, among others: the ability to generate more than human strength, glossolalia¹², and speaking

¹² In the theological sense, it means the ability to use foreign languages previously

in a voice (colour) different from the voice characteristic of a healthy person. Further signs are inadequate movements to the situation, as well as involuntary movements, and the impression of a change in appearance (body, face). Self-harm making movements against the basic range of motion or flexing in opposition to natural joints, producing grimaces, and displaying disgust for objects of worship or holy water may occur (Mosiołek 2016, 209-225).

Possession usually happens to people who are extremely demoralized. Man must reckon with the possibility of possession by an evil spirit when he is in a state of spiritual frailty after committing grave sins or when he intentionally opens himself to an evil spirit. Signing a pact with the devil (act of thought, will), practising magic, spiritism, and participation in other forms of occultism are gates through which evil has direct access to man. Religious literature also indicates the possibility of expiatory possession or, in other words, of “God’s permission”. This possession is not caused by the recipient but voluntarily accepted by the possessed person (Bylica 2009, 209-225).

It is very important to clarify the basic terms related to the impact of ‘evil’ on humans. In addition to possession in the strictest sense, there are:

the problem of bullying that we face when there are painful ailments of the body and/or soul caused by the influence of an evil spirit. Saints often suffer from bullying, tormented during earthly life: obsessions, which are states of influence by evil forces producing recurrent thoughts, bordering on mania, thoughts that cannot be overcome— an example are constant thoughts of suicide; demonic harassment, which is a type of spiritual disorder in which an evil spirit attacks houses, things, animals (Amorth, Musolesi 2008, 49-56).

Another important phenomenon is ecstasy, a form of mystical trance. The occurrence of ecstasy is not associated with the influence of an evil

spirit. Ecstasy is an unstable, temporal disconnected, dissociative state, lasting seconds or hours, a state beyond the body. Ecstasy may appear after careful spiritual preparation (fasting and prayer), or it may appear unexpectedly. Man remains himself and does not lose sense of place, he sees everything that surrounded him before the state of ecstasy, at the same time the whole in his environment seems to be different, changed. All this is accompanied by a sense of integration, fullness, peace, and sometimes saturation with religious reverence. There may appear a new understanding of oneself, the world, and one's place in it. Incidentally, it leads to a sense of desire to change one's life, to connect with God. The state of ecstasy can be accompanied by a reduction in anxiety (Mosiołek 2016, 18-24).

The Church has always reproved excessive gullibility in the matter of possession, strongly condemning all signs of possession as demonic. Anyone suspected of being under the influence of an evil spirit must be thoroughly examined by doctors of various specializations, mainly a psychiatrist and a neurologist. The symptomatology of possession is significant in its resemblance to psychopathologic characteristics of various mental disorders and diseases. Units to be excluded first are seizures, Tourette syndrome, schizophrenia, dissociative identity disorder, obsessive-compulsive disorder, and depression. When the above-mentioned medical problems occur, human behaviour can change radically, which may give rise to the suspicion of demonic possession (Radoń 2014, 105-123; Mosiołek 2016, 18-24).

The historian Sozomem claimed in the fifth century that to receive forgiveness and release, one must confess his sins. Only a sacramental absolution is an act that protects man from the influence of evil forces. Religious and spiritual psychiatrists are aware of the action of the sacraments, their power of total liberation from sins. A doctor may often recommend completing the treatment process at the Church's 'grace clinic'¹³ (Evdokimov 1986, 372).

¹³ Carl Gustav Jung: "The concept of the almighty Divine Being is either consciously

Evagrius the Solitary also known as Evagrius Ponticus, one of the Ascetics Fathers, describes the various types of demonic attacks and how to fight them. Against the demon that moves us away from prayer, the Church, and confuses the spiritual life, the Ascetics Father - Evagrius recommends the regular reading of the Scriptures in a contemplative way, as well as vigilance and prayer. Against the demon who makes us violent and impetuous, he recommends, above all, singing psalms, patience, and mercy. And when we are attacked by the demon acedia, Evagrius of Pontus recommends that we pray to God for the gift of tears and asceticism. By asceticism, he means being in a state of waiting for the Parousia, as if each day were to be the last day. Such an attitude destroys demons and at the same time opens to the gift of zeal, restraint from sin and give us full health (Orlof, Alifier 2018, 119-128; Evdokimov 1986, 371).

In the case of demonic possession, exorcism is an effective method of therapy. Prayers manifest their effectiveness not only when they are the only method of spiritual therapy, but, very interestingly, also when such forms of clinical therapeutic interventions like pharmacotherapy and/or psychotherapy fail (Ferracuti, Sacco, Lazzari 1996, 525-539). Exorcism is a form of mercy that helps the suffering (Radoń 2014, 105-123).

Polemics

Psychiatry and religion are somewhat related, derived from common ancestors and human concerns. The goal and mission of each is to care for the wholeness of the human psychosomatic condition. Four ultimate concerns such as death, isolation, sense of life, and freedom are particularly associated with our daily efforts and genuinely fit into thinking about our existence in the world that surrounds us. Believers

recognized everywhere, or at least subconsciously accepted (...) So I think it is wiser to recognize the concept of God consciously; otherwise, the god becomes something else - usually something wholly inappropriate and senseless. "Whoever is not grounded in God will not be able to face the physical and moral temptations of the world on his own." ("Główne źródło sensu życia." n.d.)

and non-believers know that one thing is certain – death. Therefore, of the four concerns, death is the most important. Death in human life is something of great significance (Yalom 2002, 301-323), which is why it became the basis of religion; awareness of passing is the starting point for linking psychiatry and psychology with religion. Death as the finale of human existence on earth is the determinant of the path we have travelled here, and the path inseparably determines the health of man as an individual and man as part of Earth's population. Furthermore, death is a transition from reality into non-existence, an infinite circuit by which man exits from where he came. In the book "Death and Life Eternal" (1977), Józef Ratzinger wrote: "Death is the gate in human life through which metaphysics enters" (Ratzinger 1977, 87). Moreover, this is not the only gate but the main gate. Every Christian should be aware of this.

Dissociative disorders – cleavages (which includes trance and possession) often result from fear of eternal matters. Above all, they are very often an attempt to defend the body and the psyche against the residual sin and any faults committed during earthly life. Relations between religion, psychiatry and psychopathology are analysed on many levels, both clinical and in research (Orlof, Alifier 2018, 119-128).

At certain stages of our history, there was no distinction between the priest and doctor, and in the genesis of diseases, both natural and supernatural causes were not excluded. We read in the books of the New Testament how Jesus healed through prayer and exorcism.

Conclusions

After a period of tension between psychiatry and religion, in connection with anthropological and psychiatric research, there has been a thaw in hostilities. According to the definition of health proposed by the WHO, it recommended to include a religious factor in the diagnostic and therapeutic process, not treating it as an executive pathogenic factor only.

According to the current classification of diseases ICD-10, (trance and possession F44.3) are classified as one of the possible manifestations of mental disorders. From the point of view of psychiatry, to recognize trance and possession, it is necessary to confirm that the infirmities presented by the patient are: undesirable or troublesome and that they do not appear in religious circumstances and are not culturally conditioned syndromes (Puźyński, Wciórka 2000, 138; Mosiołek 2016, 18-24).

Modern theology suggests starting interdisciplinary dialogue; the Church is aware of the presence of two phenomena that require differentiation: demonic possession and pathological possession. The disease of a spiritual nature is insensitive to the action of all methods of pharmacotherapy and psychological interactions and treatment. In an enigmatic way, the symptoms of possession may regress, until they completely disappear as a result of religious measures (prayer, participation in the sacraments, exorcism and fast; Soinski 2016, 185-229; Chryzostom 2001, 193).

Therefore, we are dealing with two different “possessions”. Failure to take account of their differences leads to a logical error in the form of equivocations¹⁴ (Bylica 2009, 209-225).

Dissociative disorders, which include trance and possession, are often undiagnosed or sometimes incorrectly diagnosed. There is a widespread belief among psychiatrists that they are sporadic. Psychiatrists, psychologists, and doctors of other specialities should be obliged to study the field psychopathology of dissociative disorders to coordinate a holistic diagnostic approach and individualized patient care. When practical, empirical teachings fail, the help of a clergyman, including an exorcist, may prove invaluable (Sar et al. 2018, 506-507).

“Thou believest that there is one God; thou doest well: the devils also believe, and tremble.”

James 2:19

¹⁴ Equivocation is one of the logical-linguistic errors of the current ambiguity group.

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CHRZEŚCIJAŃSKA AKADEMIA TEOLOGICZNA
w WARSZAWIE

Rok LXII

Zeszyt 4

ROCZNIK TEOLOGICZNY

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ISSN 0239-2550

Wydano nakładem

Wydawnictwa Naukowego ChAT

ul. Broniewskiego 48, 01-771 Warszawa, tel. +48 22 635-68-55

Objętość ark. wyd.: 19,3

Druk: druk-24h.com.pl

ul. Zwycięstwa 10, 15-703 Białystok

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