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LOST AND FOUND

While not precisely 'lost,' the paper presented in this installment of Lost and Found appears to be little cited in the literature, and it certainly deserves wider scholarly recognition than it has received so far. Although the theoretical framework employed by the authors now seems somewhat dated, the interesting ethnographic data they present shed new light on significant but rather sparsely documented aspects of indigenous Kumeyaay medical beliefs and practices. The paper was originally published in the Psychoanalytic Quarterly [Vol. 5, pp. 195–225, 1936]; it has been reformatted slightly for presentation here.

Dreams and Dream Interpretation of the Diegueño Indians of Southern California

**GERTRUDE TOFFELMIER
AND KATHARINE LUOMALA**

INTRODUCTION

The dreams to be discussed in this paper and their tribal interpretation were collected from an intelligent, practicing witch doctor of the Diegueño Indian tribe, which lives south of San Diego on the northern border of Lower California.¹ To the witch doctor who was a *simup kwisiyai* (literally, a dream doctor) dreams were significant because of their diagnostic value in the cure of neuroses and functional mental disorders, which he recognized as such and treated in a manner suggestive of psychoanalytic methods. Certain dreams of incest and possession by a sexual spirit were not dealt with by the magical means usually found in primitive tribes but by an analysis of the dreams and the behavior of the patient, followed by mental and physical therapy. Our informant, Doctor X., had also seriously considered the advisability of using hypnotism and the narcotic, *toloache* (*Datura meteloides*),² in effecting a transference. He derived his recognized ability in the analysis and interpretation of dreams from the visions he had while in a narcosis after

taking the required *toloache* at the time of his induction into his profession, and he maintained his own power and the confidence of the members of his tribe through further successful prophetic dreams which concerned his own welfare and that of his clientele.

RELATION OF DIEGUEÑO DREAMS TO THOSE OF OTHER CULTURE AREAS

The importance among the Diegueño of dreams and visions for prophecy and the gaining of knowledge and power is also characteristic of most North American Indian tribes,³ although according to our knowledge the peculiar emphasis by the Diegueño upon the therapeutic role of dream interpretation is not paralleled elsewhere. We believe that this unique use of dreams has resulted from their attempt to solve neuroses and behavior problems which in other tribes either do not exist so painfully and in such a marked degree or have been resolved individually in other ways than through the confession of dreams to a trained witch doctor and his analysis of the conflict and its resolution. In central North America the culture areas known to anthropologists as the Plains, the Eastern Woodland (Atlantic Coast to the Great Lakes), the Northwest Coast, and Central California, form an extensive area in which individuals seek through a vision, or obtain unsought, a guardian spirit who grants them supernatural power and guidance in war, hunting and lovemaking, which constitute the major activities of life.⁴ It appears to us that the role of the guardian spirit complex is the psychological equivalent of the role of the Diegueño dream doctor complex, in that each, in its respective culture, is an instrument of aid to individuals facing crises and the problems of normal life. While in the Guardian spirit area each individual obtains aid and reassurance by appealing directly to his ghostly mentor, among the Diegueño it is only the witch doctor who can obtain supernatural power, the benefits of which he may extend to his patients who are usually suffering from certain mental disorders, clearly conceptualized by the Diegueño, and who may, in order to gain success in life, purchase from him various potions and talismans which he has endowed with power.

In Southern California and in the region about the lower Colorado River, tribes like the Yuma, Mohave, Chemehuevi, Walapai and Diegueño may be set off as constituting a special dream area because of the peculiar nature of the dreams and their place in the culture. Usually only witch doctors and shamans, and not every individual, have the dream experiences, and so supernatural power is desired largely for the purposes of professional witching and curing. Among the Mohave and Yuma knowledge was not obtained through learning but through the “dreaming” of a shaman while in his mother’s womb or in a shadowy, preexisting state of the world when he associated with the gods and culture heroes on the sacred mountain where he learned about the nature of the world and the culture of his tribe.⁵ In later life he can draw upon this prenatal fund of knowledge. Ceremonial song cycles, myths, rituals and cures originate in dreams whose manifest content and form are determined and censored according to the dream pattern of the tribe by the older witch doctors, who decide whether a dreamer is “good” or not and whether his dream is acceptable.

At the present time the Diegueño represent a transitional state between the guardian spirit area and the “knowledge dreaming” area of the lower Colorado River, although their closest affinities are naturally with the lower Colorado River tribes who are their neighbors. During a “dream” condition of forty-eight hours induced by the administration of *toloache*, the Diegueño doctor-initiate obtains an animal guardian spirit and receives songs, cures, knowledge, a sexual name and magical paraphernalia. He also has a conventionalized dream, known as ERuR in which he puts his arms around the world and “sees everything in it,” interpreted to mean that he encompasses all knowledge, just as a shaman of the neighboring Yuman tribe has a somewhat comparable dream of slipping out of his mother’s womb to go to the sacred mountain where he can view the whole world, thereby obtaining knowledge of the past and of the future. The guardian spirit of the Diegueño doctor is an animal—that of our informant was a mountain lion. If Doctor X.’s experience is typical, it would seem that a shift of function has occurred from the officially recognized guardian spirit, in this case the lion, to certain of the magical equipment, namely the rocks. As will be discussed in detail later, Doctor X. depends upon his five magic crystals for advice

and guidance in dream interpretation, the solving of personal difficulties and protection against attack from enemies. The lion seems to have no other role than that of guide on Doctor X.’s hunting trips and he never appeals to it as to a guardian spirit.

ETHNOGRAPHY OF THE DIEGUEÑO

A brief summary of the culture and habitat of the Diegueño Indians and the training of the dream doctor will provide the necessary background for and understanding of the dreams given by our informant. The Diegueño Indians, who form part of the group popularly known as the Mission Indians, ranged, before the arrival of white people, about seventy miles south of San Diego along the border of Baja California, and from the Pacific coast east into Imperial Valley.⁶ Their dependence upon deer, rabbits, quail and other wild game and the seasonal gathering of wild sage and acorns necessitated a semi-nomadic hunting life within this area. Their diet was supplemented by dried fish and grapes which they received from the Yuman tribe in exchange for pinole. They lived in non-totemic, patrilineal clans with the rule of exogamy applying to the clans of both parents. At present the Indians are gathered into five reservations where they depend upon government rations, hunting and gathering of wild food and a little farming for their livelihood. Venereal disease, smallpox, intermarriage with white, Mexican and Negro populations and a high infant mortality have reduced their numbers from the 3,000 of 25 years ago to about 220.

TRAINING AND QUALIFICATIONS OF THE DREAM DOCTOR

Formerly about one man out of every ten was a witch doctor. Although each doctor had a knowledge of general practice, there were specialists in herbs, dreams, snake bites, sucking and bone setting. Our informant claims to be the only true practitioner at the present time; that is, he is the only doctor who has derived his knowledge and power through the orthodox initiation into the *toloache* cult. Two or three other Indians on the reservation have purchased special cures and medicine bundles but their ability to diagnose and cure is limited, due to the lack of the formal, socially sanctioned training and initiation.

Unlike the Mohave shaman who is usually an abnormal individual who receives a call from the spirits which he cannot refuse, the Diegueño initiate is carefully selected by older doctors as to health, intelligence, good sense, energy and abundant sexuality. Boys between the ages of nine and fourteen who have attracted the attention of their elders because of their interest in magic and doctoring, precocity of dreaming and successful prophecies are encouraged to undertake the training to become a doctor. Our informant emphasized the necessity of possessing the above mentioned qualities of character, as he said a weakling and one with abnormal tendencies could not endure the ordeal of the training, the taking of *toloache* which marks the climax of the training and the boy's initiation as a full fledged doctor, and the arduous career of doctoring. To show the importance of youth, he related examples of the unsuccessful attempts of men older than fourteen to become doctors. A man of twenty-five was foolishly urged to become a doctor only because of his skill in ceremonial dancing. The strain caused his mind and health to collapse. Another older applicant developed a paralytic leg. Even some of the carefully chosen young candidates are finally eliminated, for some get too much or too little *toloache* and behave in a silly and undignified manner which forces their instructor to reject them.

The experience of our informant is typical of the training of novices. At the present time Doctor X., who is fifty-eight years of age, is a successful, practicing witch doctor. His personality and dreams will be discussed later. He was chosen at the age of nine by his mother's father, a dream and herb specialist, to become a dream doctor because of his frequent dreaming and his attempts at interpretation, his curiosity about his grandfather's magic and his proven skill and luck in hunting which in turn depended upon his observance of warnings and advice obtained through dreams. Had his prophetic dreams not been borne out, it is unlikely that he would have been chosen as a candidate. As Doctor X. stated, "Anyone can dream and pretend to prophesy, but the mark of a witch doctor is that he dreams true." For a year the novice was instructed in the diagnosis of disease, curing, dream interpretation, tribal and professional ethics, star lore, spirit communication, hunting secrets, witching songs and the preparation of magic for success in gambling and love. The instructor listened to the dreams of his disciple

and pointed out their meanings. It was not necessary, according to Doctor X., for him to tell his grandfather his dreams, because the old man "knew them already." A good doctor knows the dreams of his pupil before he is told. At the conclusion of training, both master and disciple underwent preliminary fasting. Then the initiate was isolated in a brush enclosure away from the village. At sundown the most important rite in his training took place—the administration of a dose of *toloache*. The use of *toloache* is exclusively in the hands of witch doctors who use it principally for initiating young doctors.⁷ The drinking of the drug at initiation is heavily weighted with importance in this tribe. The ritual drinking at sundown at the end of the year of training is the requisite for becoming a good dependable doctor. *Toloache*, according to Doctor X., not only gives a doctor new knowledge when he takes it, but also it gives him the ability throughout the remainder of his professional career to continue to learn new cures and to dream successfully. Our informant stated, "*Toloache* puts you into kind of a dream state of mind that stays with you for the rest of your life, and you never forget what you learned. It helps you to keep on learning too and gives you power in everything. Without it you aren't a real doctor."

A half hour after the initiate drank the *toloache* decoction, his teacher examined him on the knowledge he had acquired during the year of preparatory training. Doctor X. said the drink made him happy and sleepy and that as its effects increased he saw crowds of people about him, some of whom he knew, others were strangers who would figure in his later life. His teacher questioned him about the future of these people and the methods he would employ in diagnosing and treating them. During the narcosis of forty-eight hours he also dreamed of his animal guardian spirit, the mountain lion; the five magical pieces of quartz which would be an important part of his doctoring kit; his *toloache* name of sexual reference to be kept secret from all but fellow practitioners; and finally the *ERuR* dream of world knowledge. These specific *toloache* dreams are to be discussed under the heading, *Dreams of the Dream Doctor*. It is interesting to note at this point, however, that in discussing each of the above *toloache* dreams, our informant maintained that he did not know he was supposed to dream "these things" or that other doctors had dreams of similar form

and content. Thus when he dreamed of five crystals of much potency he did not know that a doctor used such rocks, and was "surprised" a month later when his teacher showed him a collection of rocks and told him to choose his own. He at once selected from them without hesitation the precise pieces he had dreamed about four weeks before. It is obvious that a certain pattern of dreaming is followed by every Diegueño doctor-initiate while under the influence of the drug, and also that the attitude of professed ignorance and surprise at dreaming the proper thing (standardized by his profession) is similarly a definite part of the pattern. The forty-eight hour narcosis is concluded by taboos of food and behavior which last a year and are for the purpose of insuring the health of the doctor for the rest of his life. A fiesta ends with the lifting of the taboos and the young man begins his career under the direction of his teacher. Doctor X. still receives, through the medium of dreams, advice from his grandfather who has been dead for many years.

CLASSIFICATION OF DREAMS BY THE DREAM DOCTOR

Doctor X. grouped all dreams into three major classifications: the meaningless, the standard, and the significant. (His terms were: the accident, the common and the important.) We shall discuss each of his dream classifications with special reference to the mental condition of the dreamers, their health, and their tribal status, which were significant factors to Doctor X. in understanding the dream as a clue to his patient's behavior. The meaningless or "accident" dreams are those of the average healthy woman and child and those due to passing physical complaints. The significant include the troublesome dreams of anyone in the tribe, which usually concern sex, spirits and prophecy, and the dreams of abnormal members of the tribe. A witch doctor's dreams are always significant. Standard or "common" dreams (often merely good and bad luck symbols) are those which require no professional interpretation because their meanings are obvious to everyone.

Meaningless or "Accident" Dreams

The majority of women's and children's dreams fall into this classification. Like most primitive peoples the

Diegueño believe that dreams caused by over- or under-eating, over- or under-sleeping, headache, stomach ache, or any physical pain have no significance unless dreamed by a *kwisiyai* (witch doctor). They are in the words of our informant "just accident" dreams. Women have more foolish dreams than men. They dream of love, of getting married, of their husbands and of whipping. (We could get no further information on the whipping dreams of women. The term may be a stereotyped one referring to the "Bad Songs" which are obscene, sexual songs that constitute a conventionalized way for women to deride members of certain rival clans.) Women are said not to dream much about cooking. Since no Diegueño woman is destined to undergo the *toloache* ceremony she can never have the special *toloache* dreams; and furthermore, her dreams are for the most part so trivial that no doctor will bother to interpret them for prophetic use unless she is an abnormal woman. A woman's dreams are valuable only when the *simup kwisiyai* (dream doctor) tries to gain some insight into the mental disorder from which his patient appears to be suffering.

Most children's dreams are also unimportant unless the boy child is a "born *kwisiyai*." Actually there is no such person as a "born *kwisiyai*," according to Doctor X. since all doctors derive their powers through learning from older doctors and the taking of *toloache*. But a child who is referred to as a "born *kwisiyai*" is one whose dreaming might be prophetic and therefore must not be disregarded. Like our informant's young son, such children have prophetic dreams which come true; they are interested in collecting miscellaneous trifles which they pretend are of magical worth; and they dream almost every night of future events and animals who give them advice. These children are eminently suited to become doctors, and older *kwisiyai* urge their parents to permit them to be trained.

Standard or "Common" Dreams

This classification includes dreams whose meaning, usually prophetic, is known to everyone in the tribe, and also any other dream whose affect does not ordinarily disturb the dreamer upon waking. A dream doctor is little concerned with them professionally, unless their effect on the dreamer is so great and troubling that he consults the *kwisiyai*. Doctor X. said that dreaming after midnight made the dreamer weak, but that dreams

from two to three o'clock in the morning were the most clearly defined and most likely to come true. The statement that dreaming after midnight makes the dreamer weak doubtless means that since the dreams at this time are thought to be more prophetic and noteworthy, their affect is correspondingly more marked. Six months or one year is the time limit allowed for dreams to come true. If one intends to tell the dream, popular belief decrees that it be told the first thing in the morning or not at all.

Death warnings in a dream are carried by a horned owl, or any animal, especially the coyote, running around the dreamer's house. The animal in the dream always has something peculiar about it, indicating that it is really a spirit in disguise or that it has been sent from the other world by a dead relative to warn the dreamer. To dream of a little baby or of a little sister when one has neither is a certain indication of the death of a relative. To dream of a particular relative dying is interpreted to mean that another relative will die. Bad luck dreams are those of dog or coyote bites. Very shortly a rattlesnake will bite the dreamer. When asked the meaning of some falling dreams, Doctor X. said that to dream of fingers falling foretold an accident; teeth falling meant a fall or injury; hair falling omened a fever. Good luck dreams are of the eagle, bees, honey, cutting up a large supply of meat, and making jerky. A dream of straight, clean arrows is a positive sign of good luck; black, crooked ones are an ill omen. To dream of snakes has a number of interpretations. It may mean that one will be bitten by a rattler. If both husband and wife dream of snakes, they will have many children. If a woman has a snake dream she is certain to have a baby. When a pregnant woman dreams of pimples on the forehead and cheek it signifies that her child will be a boy; her dream of patches like moth spots on the face foretells the birth of a girl. When a single man has frequent love dreams and recounts them, he is merely advised to get married. The love dreams of married men and women involving persons other than their spouses are of little importance. It is a popular belief that if a married man has recurrent love dreams about another woman than his wife, the latter will die within the year. When he meets the other woman, it is believed that she will know about his dreams and will have had similar ones about him even although there was no communication or understanding between

them. This seems to be a cultural patternization of dream wish-fulfillment.

Significant Dreams

Dreams of women, children and uninitiated men sometimes become so bothersome that the dreamer voluntarily consults a dream specialist for relief. Sometimes the worried dreamer will spend days brooding over his dreams without consulting the doctor and his conduct soon becomes so asocial and introverted as to force his close relatives to call in the dream doctor to diagnose the condition of the patient, analyze the dreams and prescribe therapeutic measures.

Spirit Dreams

Frequent dreaming about spirits, particularly those of a dead relative, requires treatment by a *kwisiyai*. Almost any competent witch doctor, regardless of his specialty, is able to treat persons who suffer from insistent spirit dreams. The *kwisiyai* knows that the spirit wants something he has left behind, usually an article that should have been included in the burning of property at a funeral, an important rite in the culture of the Diegueño. By communicating with a spirit in darkness the doctor learns what the departed person specifically wants and then tells the afflicted dreamer to burn the object.

Dreams of Persons with Mental Disorders

Most of a dream *kwisiyai*'s patients come to him for consultation because of recurrent love dreams with such grave affects that their whole round of existence is seriously disturbed. It is in the analysis and treatment of such dreams that the Diegueño dream specialists show their sharpest understanding of functional mental disorders. The disorders most commonly diagnosed are known as *kimilue* and *echul*, which the dream doctor regards as two phases of sexual hysteria. This hysteria is most easily cured in the early stage of *kimilue*, but if it progresses through the condition of *echul* without any corrective treatment, it may end in a complete insanity, known as *simiRai* in which the individual dissociates himself completely beyond recall from tribal life.

Kimilue. The *kimilue* patient loses all interest in daily life, has sexual dreams, sleeps late, either mopes or runs wild or both, suffers loss of appetite and is generally apathetic. Our informant translated *kimilue* as "boy

crazy” although he used the term with reference to both sexes. Usually boys and girls between the ages of twelve and fourteen are most liable to become *kimilue*. Old maids who have never known sexual satisfaction are also frequently subject to the disorder. When questioned about widows, Doctor X. declared that it was by no means an impossibility for them to become *kimilue* but that generally, “they are too old to care about it (sex) any more.” While no premium is attached to male or female virginity, *kimilue* boys and girls have bad reputations in their community and their chances of obtaining substantial hard-working mates are small. *Kimilue* children present serious problems to their parents, for it is said that no one wants a *kimilue* husband or wife. A successful treatment by a witch doctor might effect a change so that the youth could achieve a respectable marriage. Doctor X., as a professional man, considered a mild *kimilue* in a youth as a healthier symptom than complete indifference to the opposite sex. When the *kimilue* dreamer or patient consults the dream doctor, he is ashamed and reticent about relating the sexual dream or revealing the identity of the dream lover. The dreamer says, “*Nimaiyai esmuch*” (dreamt we’ve slept together). The dream is usually a complete sexual dream with seminal emission. Doctor X. continued to describe his first meeting with the patient: “After a while he stops being ashamed of me because he knows I know all about those things. A good *kwisiyai* knows all about the dream and who the person in it is without being told.” He considered that the narration of the dream experience by the dreamer had a salutary effect, and therefore he required his patient to discuss his dreams and conflict freely with him. For the successful cure of his *kimilue* patient, the *kwisiyai* recommends immediate marriage to anyone. The parents are advised to help select a suitable husband or wife for their child and are warned that the disease which is mild at first can and will become progressively worse unless taken in hand, and will develop into another sexual disorder known as *echul*.

Echul. When first describing *echul*, Doctor X. referred to it as epilepsy, adding that persons afflicted with the disease were “fitsy.” We have good reason to believe that it is not an epilepsy or an epileptic state but is rather a sexual hysteria, the manifestations of which are pronounced during late adolescence and become acute

during such crises in the life of an individual as divorce, separation, death of a mate, extreme grief. The term *echul* is the word for bullet hawk, a bird believed to be inherently dangerous. Its feathers are never kept around the house and it is avoided on all occasions since its mere presence is sufficient to produce dreaming of a very violent nature. The *echul* bird is popularly believed to take the form of a very beautiful person, male or female. A person known to be possessed by *echul* is referred to as “that bird’s spouse.” The symptoms are similar to those of *kimilue* but are much more exaggerated. The following is typical of the experience of a person afflicted with *echul*:

A young girl came to the dream doctor for treatment shortly after her engagement to be married had been broken. At first she dreamed constantly of her lover, took no interest in her household duties and behaved, according to the doctor, in a “fitsy” manner. The episode which brought her to the dream specialist was a fall from her horse during a fit. She rolled on the ground “as if a man was with her.” Her mother, weeping hysterically, seized a club with which to beat off the *echul* bird-lover who was thought to be with her, and inflicted severe wounds upon the girl. Doctor X.’s psychotherapy consisted of having her relate to him episodes in her love life and recent dreams. He advised a change of scene followed by marriage to anyone of the right clan. He also did some blood letting and recommended such nourishing foods as acorn gruel and pinole mush to build up her physical strength.

The danger of the *echul* dream lies in the fact that it is rarely entirely forgotten by the dreamer in spite of the attempts at cure. Doctor X. said, “The patient dreams about the man or woman just like he was sleeping with him. He hugs the pillow and everything and loves him and never forgets it. It’s like a *toloache* dream because it stays with him forever.” The following is a case of *echul* which our informant treated several years ago:

A young Spanish boy came to Doctor X. for treatment. He did not have fits, Doctor X. said, but foamed at the mouth. He asked the boy to tell him about his dreams and his troubles, which of course Doctor X., due to his *toloache* power and insight, already knew. The boy had been jilted by a girl in Los Angeles. He could not forget her. He broke windows in her house and then ran away to hide. He went to San Diego and later went to the reservation where he consulted Doctor X. While studying the boy’s dreams Doctor X. took a quart of blood from his left arm. The boy, he said, then lost half his weight. Then he began to build up his strength and advised him not to return to Los Angeles or the

vicinity of the girl's home. (This was a definite part of the cure.) The foaming at the mouth ceased and the boy regained his strength so that Doctor X. advised him to take a job in Imperial Valley. While there the boy was put in jail because of some passport difficulty. He had nothing to do in jail but dream of *echul* until he could not put the girl out of his mind day or night. He was sent to Los Angeles for trial. (Doctor X. believed that this was only an excuse on the boy's part to see the girl again, adding that the boy could not expect to be cured without following his instructions.) As soon as the boy reached Los Angeles he began to foam at the mouth again. By this time the girl had married another man. The boy could not stop dreaming of the girl and became *echul* for good.

Doctor X. described two other cases of *echul* which he could not cure because the patients had dreamed about *echul* too long before seeking aid from the dream doctor. He added, "Their brains got soft and they developed fits." In both cases the dreams of *echul* were preceded by permanent rebuffs from sweethearts. Marriage, which Doctor X. thought effected the most satisfactory cure for *echul*, was of no avail if the disorder had lasted too long.

An unmarried woman on the reservation suffering from *echul* was told to go to Yuma for a change. She returned to the reservation, was married in the church and showed temporary improvement but soon suffered a relapse. Doctor X. declared, "She married too late. She sat around and moped all day, didn't work, kept thinking about *echul* and became *echul* for good." He had advised her to marry anyone, for he knew that the lover who appeared in her dreams had no counterpart in real life and that her dreaming was an admission of sexual need.

It is interesting to observe that the dream doctors of the Diegueño had so clearly formulated the pattern of "love dreams" that once a doctor heard the key symptoms of a mental disorder, he proceeded to draw upon his experience as a practitioner in breaking down the initial resistance of his patient by stating at the outset of the treatment, "You can't be ashamed in front of me because I know all about your dreams," intimating that it was useless for the patient to conceal anything from a man trained in magic and dreams. He thus gained the confidence of his patient who narrated the details of his experience and dreams, the narration of which is so important in therapy. Then the dream doctor fitted the general pattern of the treatment to the individual needs of his patient.

When asked about the connection between *kimilue* and *echul*, our informant stated in very positive terms that "*kimilue* is the beginning of *echul*." When an untreated *kimilue* condition, an unhappy love affair, the separation of lovers through death or divorce, quarreling or jilting, or an equally unhappy condition of having no love affair or an obsessive fantasy love life, or contact with bullet hawk feathers, resulted in the development of such severe symptoms as erratic behavior, melancholia, fits, foaming at the mouth, the patient became known as "*echul*'s spouse." The *kwisiyai* fully realized that the disorder had a basis in a frustrated sexual life. Instead of magically exorcising the bullet hawk demon who possessed the patient, the dream doctor used a psychotherapeutic treatment, the fundamentals of which he had learned while being trained as a dream doctor. We could not obtain any information, historical or otherwise, as to why the bullet hawk *echul* should be considered the prototype of certain sexual obsessions and the possessing demon in the extreme form of the disorder, regardless of what the actual initial factors producing the obsessive dream might be. It is certain that the *echul* form of hysteria has been determined by mythological beliefs of the Diegueño regarding the bullet hawk, and is a conventionalized means, whether conscious or unconscious, of protest on the part of a maladjusted individual who has lost the ability to solve his emotional problems in the accepted tribal manner. The two forms of maladjustment, *kimilue* and *echul*, were very common in the time of Doctor X.'s grandfather before the arrival of the Spanish, and so are not attributable to the introduction of white culture. What part white culture may have had in increasing in number and aggravating these disorders we cannot determine at the present stage of our study of the Diegueño, but it is likely that wherever we meet with the breakdown of an indigenous culture more maladjusted individuals will be found. Anthropologists are beginning to realize more and more that cultures vary in the stability and harmony of their individuals, and that some cultures, without any foreign influence whatsoever, put more of an emotional strain upon their members than others.⁸

Echul and Incest. Doctor X. volunteered the information that *echul* can easily result from incest dreams, but he was vague and gave us only meager information on this point. Our conclusion was that in some way he identified both types of dreams as obsessive. There is an

interesting and curious reversal of Freudian psychology in Diegueño dream interpretation. According to Diegueño psychology the dream of incest is always the cause of the incestuous act: "People keep dreaming and dreaming at night of sleeping with their sisters or cousins and then they can't get it off their mind. They dream it and the first thing they know they're in bed with them. Their dream stays in their mind and then they go out and do it." After the patient has discussed his dreams with the dream *kwisiyai* the latter advises immediate separation of the incestuous couple. If the incestuous act is still only in the form of a dream, he recommends that the individual move to another area away from his near relatives. Should parents suspect that their children are having incest dreams, they too urge them to move away from the family, marry into the right clan and settle down. Although there is no punishment for an incest dream, the dreamer is always ashamed upon waking from his sleep. Again, it is the severity of the affect which impels the dreamer to consult a *kwisiyai*. Incest dreaming must be stopped because it invariably leads to the commission of the incestuous act, according to Diegueño psychology; and this, whether in the form of brother-sister or cousin incest is equally reprehensible. We have already mentioned that the Diegueño practice clan exogamy which continues even today, so that marriage within the clan is technically incestuous. But as among most primitive peoples, they certainly do distinguish between clan incest and true kin incest.

It is interesting to note that *tismuch* or hypnosis, which the doctor learns during his *toloache* initiation and uses subsequently in love magic, is not used in the treatment of *echul* or of incest dreams. It was believed by our informant to have no curative value since under hypnosis there would be no conscious narration of troublesome dreams by the dreamer and therefore no mental catharsis. Furthermore, under hypnosis as practiced by the Diegueño, the patient could not be questioned by the doctor because the hypnosis consists principally of fixing the eyes upon the subject so that he is drawn to look at the hypnotist. Doctor X. explained, "You can't use *tismuch* to cure *echul* or for dreaming about relatives sleeping together. You got to talk to them (patients) and medicine (herbs) won't cure either. You can't use *tismuch* to cure *echul* because then the patients wouldn't talk out anything and he wouldn't remember what he said."

Although Doctor X. had never attempted to treat *echul* by means of *toloache* he said that he had often intended to try it. "Give them *toloache* and then they will talk out their fits by questions and answers as in the *toloache* initiation. After that you got to build them up."

Dreams of Abnormal Persons

Twins (male or female), persons born with cauls (male or female) and women lacking menstrual periods are among the laity whose dreams are significant. Their dreams have definite prophetic value which no *kwisiyai* or relative of the dreamer can afford to disregard.

Dreams of Twins. Female twins are recognized by *kwisiyai* and the laity as highly reliable dreamers. But since no woman can ever become an ordained witch doctor she can use her powers of dream interpretation non-professionally only and not for a fee. Should she ever attempt to practice professionally, a strong male witch doctor would see to her swift poisoning. No female twin has ever been known to practice, not even the very capable *Kwita'an*, or "Little Annie," the twin sister of Doctor X.'s *toloache* instructor (his maternal grandfather's twin sister). According to our informant she knew as much as her brother, although being a woman she had not of course taken *toloache*. Frequently she accompanied him on calls and was even present at times when he treated gun shot wounds. Ordinarily the presence of a woman near a sick bed, especially in the case of a gun shot wound, is unthinkable. Little Annie was familiar with many cures, and as a twin sister learned many of her brother's secrets of dream interpretation. She knew that her brother would poison her if she dared to work alone. Besides possessing strong powers derived from her twinship, Doctor X. was certain that Little Annie lacked her menstrual periods, which gave her additional power. We do not think Doctor X. believed all female twins lacked menstrual periods but he did imply that they were sexually abnormal women, being either under- or over-sexed. Invariably, however, men considered female twins dangerous sexually and Doctor X. related anecdotes of adventures with twins at fiestas where men dared each other to approach them. Doctor X. was dared to dance with one of the twins whom he said "no one would touch with a forty foot pole." Male twins are always encouraged to take *toloache* because they possess natural powers which are then re-enforced

by the taking of the drug. Only one of the twins, the last born, is given *toloache*. Twins always have identical dreams at the same time and are similarly affected by their dreams. All that is learned in the dream state by one twin is communicated automatically to the other.

Dreams of Persons Born with Cauls. Whether male or female, such persons “dream to perfection,” and their dreams are of interest to the tribe in general and to *kwisiyai* in particular. Here again although a woman born with a caul is believed to possess unusual powers of dreaming and curing through dream interpretation, she would never dare to practice. But when referring to any woman of the tribe who had significant dreams, our informant would always add, “She must have been born with a veil on because it happened just the way her dream said it would.” He always paid attention to his wife’s dreams prophesying death because he suspected (due to the accuracy of her dreaming) that she was born with a caul.

Dreams of Women Without Menses. Men are too much afraid of such women to allow them to become doctors. They are keenly aware of their remarkable powers of dreaming, witching and curing. Little Annie was said to dream and interpret dreams as perfectly as her twin brother, not only because she was a twin but also because she was believed to have lacked menstrual periods. Doctor X. also said he would not be surprised if she had been born with a caul in addition to her other abnormalities. There was naturally no way of checking this information. Our informant told us that “menstruation was exactly why women could not take *toloache*.” From all accounts of Little Annie we concluded that she was a woman of weak sexuality rather than a lesbian. Although Doctor X. described her as a woman who spurned the society of men and took no interest in masculine attentions, he did not say that she craved the attentions and love of women. He did not refer to her as *epach synxahkai* or “half-man, half-woman,” a term which he reserved for true lesbians. Lesbians, of whom there seems to be an unusually great number at the present time as well as during the lifetime of the doctor’s grandfather, had no special dreaming ability. Our informant, who specialized in the cure of homosexuality, had found nothing noteworthy in their dreaming. They have ordinary love dreams about members of their own sex, but Doctor X. thought this perfectly natural. It should

be noted that while *kwisiyai* generally felt a professional and social interest in the treatment of lesbians, they disregarded homosexual men, even laughed at them. They were looked upon as weaker brothers, socially and sexually, and therefore we believe that a homosexual boy would not have been selected as a candidate for the *toloache* cult. A medicine name of the conventional type descriptive of great sexual powers would be thoroughly inappropriate for a homosexual man.

DREAMS OF THE DREAM DOCTOR

No dreams that a witch doctor has are unimportant. Even those occurring as a result of fever or stomach ache could become significant if the doctor would bother “to trace out their meaning.” Many of his dreams are prophetic—indicating good or bad fortune for the whole tribe, others concern his own future only. Doctor X. divided his own dreams into two groups: (1) those which he had during the narcosis of *toloache*, (2) all of the dreams he has had since his *toloache* initiation at the age of nine.

Specific Toloache Dreams

There are five standard, conventionalized dreams in the doctor-initiate’s dream complex which occur during the forty-eight hour *toloache* narcosis at the time of initiation.

Toloache Name Dream. The initiate’s dreams of his *toloache* or medicine name which he keeps for the remainder of his life is one of the most important events in the career of any witch doctor. Our informant stated that the name is always conferred in the following way: during some part of the initiation, while the candidate is still under the influence of the drug, his teacher asks him to select a name that he would like to carry with him always as a sort of descriptive badge of his real personality. The candidate is not supposed to be familiar with any *toloache* or medicine names since they are very secret and are never discussed except possibly at closed meetings of the witch doctors. The candidate begins to concentrate on the selection of a name and in the next dream which he has while in the brush enclosure, an appropriate name comes to him. He does not have to tell his instructor what name he chose in his dream for the latter “knows all about it.” After the dream of his own medicine name

the candidate also guesses his teacher's name. As we explained above, this pretending of ignorance as to the proper choice of name has been conventionalized in the culture. It required several weeks of work with our informant before he would reveal his *toloache* name and its significance. He said, "In *toloache* you get the worst names you can dream of but they're pretty true." After some hesitation he decided that it would be permissible for him to expose the name of his grandfather since the latter had been dead for a number of years and the name did not happen to be a particularly "bad" one. It was *simup kupkau* which means, "to meet dreams" or "you meet dreams." Doctor X.'s grandfather was constantly "meeting things in his dreams—women, deer." As he was a prolific dreamer the name suited him well. Then Doctor X. went further and told us that another *toloache* name, that of a deceased witch doctor, was *chiputch kupkau*, "you meet women's urine." This name he said also suited the bearer because he was a good hunter who traveled extensively and invariably came into contact with his *toloache* name. Another tribesman who had not taken *toloache* but who was well informed on herbs and cures wanted a medicine name and selected for himself a name "something like a *toloache* name." His selection was *xema xamuk*, or "three penis," which however, did not carry the full weight of a true medicine name in that it never was kept secret. For some reason this man had been overlooked as a *toloache* initiate although he was a "perfect dreamer," and Doctor X. added that we could verify the accuracy of his choice of name as he was still living on the reservation. After warming to the subject of medicine names our informant decided to reveal his own name, which is *sedan kupkau* or "you meet vagina," stating, "That's my medicine name but it suits me fine. I've been lucky at that." He then related a variety of experiences of his amorous success with Apache women while living in that country for two years.

ERuR Dream. A second dream had only by *kwisiyai* but not by all *kwisiyai* is the *ERuR* dream, literally, the circle dream. During the initiation the candidate may dream of putting his arms around the world with the fingers touching, a symbol of all-embracing knowledge. A doctor who has the complete *ERuR* dream in which the fingers touch (it was a typical boast of our informant that his hands even overlapped) will be powerful and successful throughout his life. The circle represents the

world full of animals and women. Doctors are permitted to discuss this dream with one another but Doctor X. believed that they very often pretended to have had the dream or an approximation to it. A doctor who feels his power and self-confidence failing goes into the hills to fast and concentrate on his magic rocks in the hope that the *ERuR* dream will come to him again to re-enforce his vigor. Twice in recent years our informant has sought the *ERuR* dream. This need for renewal of power may have been occasioned by his approaching old age and the insecurity of his professional status due to white culture. The realization of waning physical and spiritual vitality is especially disheartening to a *kwisiyai*, who because of his magic is expected to outlive his contemporaries.

Guardian Animal Dream. Doctor X. dreamed of the mountain lion whose function at the present time is mainly that of a guide on hunting trips. He believes that the lion would never permit him to die of thirst or exposure in the desert. It would appear in his path to lead him out of danger.

Cosmogonic Dream. During the narcosis the initiate dreams of *Synioxau*, "the hunter's grandmother" and the first woman in the world. She was present when the primal hunter gave the animals their characteristic markings and names. An attendant sings the songs narrating the cosmology and cosmogony of the tribe known only to witch doctors, thereby suggesting a dream of *Synioxau* to the candidate.

Magic Rocks Dream. The first occurrence of the dream of magic rocks, which is the most important of the *toloache* dreams, is at the ceremony. When his teacher gives him the rocks he has dreamed about, the young doctor uses them daily to understand subsequent dreams whose meaning would not be obvious even to *kwisiyai*. The role of these rocks in dream interpretation is examined in the section on Doctor X.'s individual dreams.

Individual Dreams of Doctor X.

We are presenting below certain dreams which Doctor X. considered noteworthy, recounted in detail and referred to frequently during the course of our field work. They had profoundly influenced his intellectual and emotional reactions and had, in some cases, determined his immediate actions. The dreams themselves had been attended by pronounced affect on waking and had been accompanied by such physical symptoms as nausea, head-

ache, numbness of a finger and forearm. We observed that this affect carried over into the narration of the dreams to us, revealed by his excitability in recounting them and in the frequency with which he repeated them. We were particularly interested in the sameness of expression used in each version. We feel that his close professional examination of them with a consequent stylization and organization accounted for the rarity of variation. He was proud of his ability to dream “true” in prophetic dreams and boasted of his success in the control of the events prophesied. Some recurrent dreams which he had undoubtedly been unable to solve to his satisfaction he would ponder on in our presence hoping to gain assistance in understanding their meaning.⁹

I dreamed that my rocks in the hills were changing position. I saw them moving out in the hills where I hide them because they are too dangerous to keep around the house. [End of dream.] I got up right away and went and looked. Sure enough they had changed position. I knew something was up. Maybe somebody was going to poison me. I took one rock home, put it under my head to dream on to get the straight of it. I knew I would have another dream. The same night I dreamed this: There were lots of people all under a brown paper covering, fighting and getting mussed up. Then they come out of the paper every which way. [End of dream.]

At a fiesta shortly after this pair of dreams Doctor X. was warned by his friends to leave the grounds because there was trouble ahead. Soon there was shooting and a scramble of people but he remained “to fight the whole bunch” since he knew from his dream that he would emerge unharmed. This is a typical paired prophetic dream concerning which Doctor X. would often state, “The dream told me just how to act.” The confusion of people in the above dream was interpreted literally and indicated a fiesta as the most likely occasion for the trouble.

Three nights ago my stones came to me in a dream and told me to be careful, there was going to be a shooting. The rocks were like some friends I knew but I couldn't see their faces clear and I couldn't hear plain what they was telling me. [End of dream.] Right after that I had another dream, that the trouble was going to be about government rations and in my dream somebody asked me to be deputy sheriff. I said no, I was afraid somebody would get killed. [End of dream.] Sure enough the next day they asked me to be deputy sheriff but my dream come back to me and I said no, I was too busy. Now tonight I hear that the man who went in my place was killed. It all happened just like in my dream.

The latter statement was often repeated by Doctor X. He cited many similar warning dreams explaining that his rocks would give the first note of warning in a preliminary dream which had to be followed by a second main, clarifying dream that night. Sometimes instead of dreaming of rocks changing position in the hills (preliminary dream of dream 1) he merely dreamed vaguely (preliminary dream of dream 2) of “trouble ahead” or of people whose faces he could not identify without a second clarifying dream.¹⁰

Such paired warning dreams occur not only to the dream doctors but to the general populace as well. Doctor X. stated that people other than *kwisiyai* did not, however, dream of rocks. Apparently the culture pattern of the Diegueño has limited dreams of magic rocks to witch doctors, so that theoretically the laity could not dream of them. In a death-warning paired dream, the non-professional man would not dream of rocks changing position but rather of some animal with peculiar markings who is assumed to represent a spirit in disguise from the other world and is trying to communicate some message to the living. This preliminary dream would then be followed by a main dream in which some tribal acquaintance or relative appears.

I dreamt of a badger. I was skinning it and found it very white and fat. It kind of looked like a coon. It had a long tail but I couldn't make out just what kind of animal it was. It was more like a badger though. [End of dream.]

Doctor X. said he felt very fine after the dream and knew that it omened good luck in hunting. A few days later he and a friend went hunting and Doctor X. shot a deer which he generously gave to his companion. “I knew it wasn't meant for me, because mine was supposed to be fatter, like in the dream. Late that afternoon I got my fat deer. Whenever I shoot a deer my dream comes back to me but not exactly. I always dream of another animal, not the one I'm going to shoot. That's pretty true; I've seen it time and again.”

I was very sick with pneumonia and was being doctored by a white doctor. I was sleeping on a cot by the fire and my sister was watching me. I didn't think much of white doctoring and stuffed the pills and dope he gave me in the cracks in the floor. Then I had this dream: I saw my dead grandfather, the one who gave me *toloache*, and I could see him talking to me. He told me how I would get well and what to do. He told me not to pay any attention to them white doctors and to

throw the pills away. He told me to tear the blanket into strips, lean over the fire, burn the strips and inhale the smoke. [End of dream.] I done this kind of half asleep and threw a scare into my sister who thought the house was burning up. Next morning I was well. My grandfather comes to me often. He advises me to this day and I tell him plenty too. He's the only relative I really dream about.

In recent years Doctor X.'s position in the tribe has been threatened by American laws regarding the practice of medicine, his own reluctant admission of the efficacy of treatment by white doctors, and by the fact that many of his former patients are now going to white doctors instead of to him. His insecurity and wounded ego are reflected in such a dream of conflict as Dream 4. With this dream he had associations which further indicate his attempts to reassert his ability so that his ego emerges victoriously. He stated that a few years ago he fell from his horse and hurt his back. His efforts to treat himself failed; brother doctors advised him to consult a white chiropractor in San Diego. This he did with happy results. He merely declared that "*toloache* gave me the power to pick out the right chiropractor from the ads in the newspaper." He overlooked any need for explaining the failure of his native power to cure himself.

Taking our clue from Doctor X.'s statement that his grandfather was the only relative he "really dreamed about," we asked him if he had ever seen other relatives in his dreams. He told us the following dream of his mother-in-law:

I dreamed I was in a crowd of people. There was a woman sort of standing off to one side, wearing a nice, black, dress. I couldn't quite make out her face but I knew it was my mother-in-law. [End of dream.] That's all I know.

With this dream he associated the fact that his mother-in-law had been one of the *kimilue* or "boy-crazy" women on the reservation. Doctor X. snickered shame-facedly as he related his dream and reminiscences about his mother-in-law's misconduct. We attribute his attitude of assumed indifference toward this dream and the associations provoked by it to three social factors of psychological import: his violation of the rule of clan exogamy which he committed when he married this woman's daughter who was of the same clan as himself; his mother-in-law's sexual laxity and his appreciation of her attractiveness; and the absence among the Diegueño of any mother-in-law

taboo, thus permitting easy and pleasant social intercourse between mother-in-law and son-in-law.

Someone told me I had a stroke and I went off to Mexico and met officers over there I knew. They drove off and looked at me when I said I didn't know where I was. They said, "You've been here a hundred times." "My horse is back there, lost," I said, "If I can find my horse I can get back there." "There are big blue mountains over there. Keep to the west," they said. [End of dream.] Then I woke up, consulted my rock, put it under my head and knew I would get the straight of the meaning in another dream. Then I dreamed that somebody would get lost and not get back. By God, my dreams come true. Next morning I was called by some officers to identify a dead Indian on the road in a wreck. Before the officers come in the morning I told my wife I was kind of worried that maybe one of our children might get lost or hurt. I knew somebody was lost.

Doctor X. considered this to be a direct, prophetic dream, yet he was not wholly satisfied with his own analysis and the subsequent events which would seem to have confirmed his analysis. He could not understand why he should dream that he himself should have a stroke or be lost in a country he knew so well. Both conditions were rare occurrences in his tribe, he said: "I dreamed I was bit on my middle finger of my left hand. It hurt me in the dream and when I got up my finger and arm was swollen for hours."

Shortly after this dream, Doctor X. said he was really bitten on the finger by a rattlesnake, when in spite of the dream warning he had gone hunting without his protective magic. His forearm and finger became painfully swollen as in the dream. This is a dream which he experiences frequently although in real life he has been bitten by a rattlesnake only once. He could offer no explanation of why he should continue to have the dream.

The following is another interesting recurrent dream which Doctor X. says he has had often during the past ten years, with minor variations.

My machine is parked next to a sandbank. I dropped my pliers near the door and had no light. I started to hunt around for the pliers in the dark. A coyote ran by. I grabbed for my six-shooter and couldn't find it. Then I found the gun and shot the coyote. [End of dream.] I always wake up when I am dreaming I'm just putting the meat in the car. When you dream that you want to shoot the animal but your gun won't go off, you might as well not go out hunting for a while because you'll sure have bad luck. You feel bad and sick after this dream if your gun jammed and you can't get the coyote.

Doctor X. volunteered the information that sometimes it is his bow and arrow rather than his six-shooter that fails him, and that years ago he used to dream of his horse rather than an automobile standing near a sandbank. Obviously the manifest content of the dream has varied with cultural change and innovation. Doctor X. worried about this dream and considered it to be one of the most reliable dreams of his experience for prophesying success or failure in hunting. Hunting is the major economic activity of the tribe and is intimately connected with the profession of doctoring; for a doctor is expected to excel in the art of hunting because of his magic charms, his prophetic dreaming, his knowledge of hypnotism (used to paralyze animals in their tracks) and hunting secrets, gained and intensified through the taking of *toloache*. As in the greater number of Diegueño dreams, a dream doctor interprets literally without looking for latent content and symbolism, but the fact of Doctor X.'s dissatisfaction with his interpretation of Dream 8 as merely one of prophecy of success or failure in hunting—a dissatisfaction revealed by the persistence of the affect arising from the dream and his searching examination and dissection of its contents—indicates that he sensed the presence of a deeper meaning veiled by the manifest content. According to him others might have a dream comparable to Dream 8, “but they don't worry about it like a *kwisiyai* (dream doctor) does.” This is a very significant statement because it again reflects the severe tests which have been set upon the witch doctor by cultural patterns. If we accept this dream as one of castration anxiety, we believe nevertheless that a witch doctor is more apt to have the dream and that it will be accompanied by more severe affect since the culture of the Diegueño has imposed the most exacting demands upon its witch doctors. In his sexual life as in all other phases of activity, a witch doctor must excel and remain potent. As stated earlier, all witch doctors are selected because of their abundant sexuality and personality. Doctor X. is such a doctor who, with the onset of old age, faces the loss of powers in hunting, curing and sexual life, and whose anxiety is reflected in his dreams.

SUMMARY AND CONCLUSIONS

Our study of the function of dreams among the Diegueño Indians furnishes us with an example of a primitive people

to whom dreams and their interpretation constitute a vital part of the culture pattern. The investigation of this phase of their culture has been assigned to rigidly trained dream doctors whose specialty it is to interpret dreams and to use them as a probe into the problems of their neurotic patients. Their interpretation extends beyond the ordinary prophetic or fortune-telling symbols (interpretation by opposition) met with among most savage peoples who are at all concerned with their dreams. The Diegueño recognize the existence of functional mental disorders and that when members of the tribe by their asocial behavior become a menace to themselves, their families and society, they require professional treatment in which their dreams are of importance in gaining insight into the neurotic condition. Dreams reveal to the dream doctor the patient's conflicts and desires, which are usually of a sexual nature. A system of therapy has been developed according to which sexual hysterias are classified and treated with due recognition of individual variation in symptom formation. It is a claim of the dream doctor that although he knows his patient's dreams before he hears them, due to his magic powers, therapeutic value lies in the narration of the dreams by the patient and in the free communication between doctor and patient.¹¹ These dreams are, for the most part, direct sexual dreams with little symbolism, so that the dream doctor interprets them literally according to his “love dream” classification. However, in the case of his own dreams our informant was not completely satisfied by his direct interpretation proceeding from the manifest content; he appeared to suspect the existence of a latent content which caused him uneasiness, but to which he had not, nevertheless, directed his conscious attention. Certain wish-fulfillment dreams, such as the dream of a wife's death, have been standardized and classified as common dreams whose meanings are patent to everyone. The *toloache* medicine name indicative of sexual prowess also appears to be a conventionalized wish-fulfillment dream limited to witch doctors. The hunting culture of the Diegueño and the modifications in the mode of life introduced by white culture are clearly reflected in the manifest content of the dream. We have seen from our examination of Doctor X.'s individual dreams that the affect of an anxiety dream varies with the tribal status of the dreamer and becomes exaggerated when the status, social or sexual, is menaced.

We feel that the type of material we have collected should be of value to psychologists and anthropologists interested in the role of dreaming in primitive cultures and the influence of culture patterns upon individual behavior and dreaming. It is only from a comparative study of several Indian tribes that we could feel justified in drawing far-reaching conclusions. At the present time the ethnographic data are inadequate but from recent tendencies in anthropological field work it is likely that it will yet be possible to make such a comparative study.¹²

NOTES

¹Both authors worked together in the field during the summer and early fall of 1934.

²*Toloache* is the Spanish term for *Datura meteloides*, also known as Jimson Weed, or Jamestown Weed. It is used with varying degrees of emphasis from northern South America to the San Joaquin Valley of California. Its use is the central feature of the Chungichnish cult of some southern California tribes. Along the lower Colorado River among the Yuma and Mohave, its use is casual—individuals take it as a medicine, or as a stimulant for dreaming and second sight, and also to obtain skill in their games of chance.

³It is not, however, characteristic of all primitive peoples. We have Malinowski's observation on the Trobriand Islanders, "that they apparently dream little, have little interest in their dreams, seldom relate them spontaneously, do not regard the ordinary dream as having any prophetic or other importance, and have no code of symbolic explanation whatever." See *Sex and Repression in Savage Society* by Bronislaw Malinowski, p. 92.

⁴Benedict, Ruth: The Concept of the Guardian Spirit in North America. *Memoirs of the American Anthropological Association* XXIX, 1923.

⁵Kroeber, A. L.: Handbook of the Indians of California. *Bureau of American Ethnology Bulletin* 73, 1925. Chapters 51, 52, 53.

⁶The language is Yuman.

⁷Occasionally it is taken as a medicine but is extremely dangerous unless accompanied by the proper magic formulae known only to the doctors who took it at initiation.

⁸Benedict, Ruth: *Patterns of Culture*. Cambridge: The Riverside Press, 1934.

⁹We had occasionally related our dreams to Doctor X. for his interpretation. One of our dreams which he considered a prophetic dream-warning was borne out when word was received of the grave illness of a relative. As a result he considered us "good" dreamers and regretted that we were women as otherwise we could have been suitable candidates for the *toloache* cult of dream doctoring.

¹⁰This phenomenon of homologous dreams has been discussed in *The Interpretation of Dreams by Freud*, trans. A. A. Brill, London, 1922, p. 309: "All the dreams which have been dreamed in the same night belong to the same whole when considered with respect to their content; their separation into several portions, their grouping and number, all these details are full of meaning and may be considered as information coming from the latent dream content. In the interpretation of dreams consisting of many principal sections, or of dreams belonging to the same night, one must not fail to think of the possibility that these different and succeeding dreams bring to expression the same feelings in different material. The one that comes first in time of these homologous dreams is usually the most disfigured and most bashful, while the succeeding is bolder and more distinct."

¹¹This free communication is especially important in the *toloache* ceremony itself when the initiate tells his dreams to his teacher. Failure on the part of one instructor to question thoroughly his disciple resulted in the latter's complete mental collapse.

¹²Such an attempt has recently been made in Jackson Stewart Lincoln's *Dreams in Primitive Culture*, London, 1936. — Ed. NOTE.

