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Folk Medicine Practitioners¹

This article is part of a broader, ten-year research of folk medicine in Croatia. The research collected data about various practices, beliefs and attitudes towards sickness and health, as well as the role played by folk medicine practitioners in the environment where they live and practice. Data obtained through field work were compared to relevant ethnological and anthropological literature and medical accounts. The article encompasses the period from the late nineteenth century to the present and attempts to establish what functions were fulfilled by folk medicine practitioners, how these functions changed in time and how the present use of folk medicine has different economic, ideological and social implications not only for individuals, but also for the society as a whole.

Key words: folk medicine, alternative medicine, healers

Introduction

Medical issues can be approached in different ways. The history of medicine up to the twentieth century was written by medical doctors, who focused on the role of medicine in the development of humanity. In the last decades, this subject began to be elaborated also by experts from other fields of science: anthropologists, philosophers and historians, who have assumed a more culturological approach to medicine, treating various medical systems as cultural constructions.²

¹ The text is a partly abbreviated article published in: *Sociologija sela* 165-166(3-4)/2004

² Since every culture also creates a theory system enabling the understanding of illness, anthropologists have advocated that the term medicine is also applied to healing practices in non-Western cultures, which were usually studied as part of the research of beliefs and magic.

Since the 1960s, research of the medicinal understanding of non-Western cultures has provided a special contribution to the development of the anthropological and ethnological thought. Anthropologically oriented research has perceived medicinal systems as semantic systems, starting from the assumption that the definition of illness is a cultural category and an integral part of the general system of symbolic values. This is why the understanding of illness can help us understand the semantic system of other cultures, since all cultures imply a certain classification of illness, its symptoms and treatment. The conviction that healing methods in non-Western cultures have their own rationality rooted in a world view different from ours and that such treatment can be also functional and efficient is a significant contribution of medical anthropology.³ (Levi-Strauss, 1989:165-183; Otto, 1993:25-36).

The research of folk medicine of European peoples developed along a different course. The terms *folk medicine*, *popular medicine*, *rural medicine*, *traditional medicine*, *natural medicine* etc. are often used as synonyms today. The lack of homogenous terminology can be ascribed to numerous different approaches to the research of folk medicine, as well as varying traditions in certain countries. In this article, the term folk medicine is used, since it has already gained a certain historical and social meaning through research activities.

In the late nineteenth century, when ethnology was beginning to become established as a scientific discipline, folk culture was mainly researched in relation to the elite culture. Folk culture primarily implied rural culture typical of the peasant population in the pre-industrial time.⁴ The expression forms in folk culture were compared with analogous forms in "upper-class culture". The comparative category of folk medicine became the *scholarly*, *scientific*, *orthodox*, *conventional or*, as it is mainly termed today, the *official medicine*.⁵

The difference between official and folk medicine lies in the education, knowledge and social status of folk medicines practitioners as well as their patients. There are, of course, individuals who pursue medical practices and originate from the folk, but this does not necessarily mean that they practice folk medicine. Healing methods

³ This attitude has also given rise to moral doubts. Many practices, which are useless or even harmful from the viewpoint of Western culture, have been rationalized as something that is «different». As opposed to medical experts, who plead for humanitarian aid and the prevention of illness in developing countries, anthropologists have voiced doubts whether to interfere with the perception of illness of other cultures or simply observe and study their culture.

⁴ Modern ethnology and anthropology deal not only with rural culture, but with all lower social strata, i.e. unofficial forms of culture.

⁵ «Official medicine is based on the perception of the body and its functions as maintained by the Western societies. We are talking about notions of illness and health which are politically and culturally accepted in a certain environment by an institutionalized medical system, accepted by the state administration and included in the official educational and medical care system of a certain country. Official medicine has accepted only therapeutic practices the efficiency of which can be ascertained by clinical experiment. Such treatments are based on scientific, rational premises or hypotheses.» (Rozman, Godec according to Židov, 2000:140).

deriving from personal beliefs and individual practices cannot be regarded as folk medicine. The term folk medicine implied forms of healing, i.e. notions of illness and health which are based on folk traditions and which are collective, i.e. typical of the entire community in a certain period of time.

On the other hand, what we call unofficial medicine today is a rather vague term. The most commonly used synonyms of this term are alternative and complementary medicine, unconventional medicine, unorthodox medicine, holistic medicine.⁶ The most conventional term used in Croatia is alternative medicine, denoting a separate medicinal system incorporating various preventive, diagnostic, therapeutic and rehabilitation methods. Some of these techniques have been earlier rejected by scholarly medicine, while some methods are considered characteristic of other societies and cultures. The most frequently used term in Western countries is complementary medicine,⁷ which implies a connection with the official health care system as a complement to existing official treatments.

The basic treatment methods in folk medicine were herbal healing, magic healing and healing methods based on religious beliefs, which are at the same time methods applied by contemporary alternative medicine. Many magic practices and beliefs once belonging to practices of folk medicine are today termed esoteric and treated as part of alternative medicine.

Authors dealing with the subject of official and unofficial medicine do not have a uniform approach to the contemporary perception of folk medicine. While some consider the alternative medicine a modern form of folk medicine, others emphasize that the present context in which alternative medicine is used, although it incorporates folk medicine methods as well, is considerably different than the one of the nineteenth and early twentieth centuries, indicating that the contemporary use of folk medicine has different ideological, economic and social implications (Židov, 2000: 51). I am also inclined to subscribe to the later point of view.

Subject, method and objective of the research

This article is a part of a broader research of folk medicine in Croatia, in the form it has been practiced from the late nineteenth century to date.⁸ The objective of the

⁶ The terms for unofficial medicine have changed in the course of the twentieth century: from medical quackery (at the beginning of the century (medical quackery was mainly understood to denote folk medicine practices), over alternative medicine in the 1970s to complementary medicine in the 1990s, illustrating in a certain way the process of increased public acceptance and recognition of unofficial medicine.

⁷ In May 1997, the European Parliament adopted the Resolution on Unofficial Medicine, which recommends that the basics of unofficial medicine become part of the formal medical education and supports further research in that direction (Buklijaš, 1999:1).

⁸ The major part of data about folk medicine presented in the text was collected in the period between 2000 and 2001, while I was preparing the exhibition *Folk Medicine* together with my colleague, Mirjana

research was to collect data on various perceptions of illness and various treatment practices and related beliefs in rural and urban environments in Croatia. Special attention was dedicated in this article to folk medicine practitioners and their role in the environment where they live and work. I wanted to find out what patients use the services of folk medicine practitioners today and why. The article attempts to define their functions and how these functions changed in time. Since the context of folk medicine has considerably changed today and the offer of alternative ways of treatment is much broader than a century ago, I tried to research the traditions that existed in our country in the past and are still present today, both in rural and urban areas.⁹

Data collected during field research have been compared to and complemented with earlier material from the same area at the turn of the nineteenth to the twentieth century. This material has been published mainly in Anthologies of Folk Life and Customs of South Slavs.¹⁰ The Anthologies contain a large body of data about healing, especially in monograph presentations of places like Otok near Vinkovci, Vrtnik on the island of Krk, Samobor, Prigorje, Poljica and Bukovica, with accounts of certain illnesses and various methods of their treatment. These monographs provide a very realistic picture of daily life, including also illnesses, with particularly valuable data including attitudes about folk medicine practitioners.

In addition, the Anthologies contain some Croatian folk medicine books¹¹ from the eighteenth and nineteenth century, which represent important documents for the research of the continuity of certain phenomena. Even though orality was considered an important demarcation criteria between the scientific and folk medicine,¹² folk medicine books as well as folk publications and calendars prove that folk medicine

Randić. At that time, we conducted research in the regions of Lika, Slavonija, Podravina, Medimurje, Istra, Posavina and the cities of Zagreb, Samobor, Zadar and their surroundings. But I researched folk medicine also during team museum research activities (Žumberak 1995/1996, Pisarovina 1997, Gorski kotar 2003, Ivanić Grad and surroundings 2003/2004). Part of this research has been presented through the exhibition "Folk Medicine", the exhibition catalogue and the film about people who treat illnesses using techniques and methods of folk medicine. The whole collected material is archived at the Documentation Department of the Ethnographic Museum in Zagreb.

⁹ We became aware especially in the research of folk medicine how difficult it is to research folk culture as a separate phenomenon. The attitudes, practices and beliefs related to health and sickness typical for the lower classes can also be shared by the upper classes.

¹⁰ The *Anthologies* were issued by the Yugoslav Academy of Arts and Sciences and were first published at the turn of the nineteenth into the twentieth century, a time when the notion about ethnography or ethnology as a separate scientific discipline began to ripen and the Academy stimulated the research of folk life in all its forms. In 1898, the second issue of the *Anthology* featured an instruction about the data collection method titled *The Basis for the Collection and Study of Material about Folk Life* by Antun Radić. Valuable ethnographic material was collected based on Radić's questionnaire.

¹¹ Folk medicine books (*lječaruše*) are collections of recipes and instructions for the treatment of sick people and animals. They were mainly written by priests as members of the best educated class, who frequently included folk medicine practices as well.

¹² It should also be stressed that the tradition which existed in the past was never passed on from generation to generation unchanged. Every transfer meant that some new elements, often from the official

in the past, just like folk medicine in the present, consisted not only of old traditions passed on from generation to generation, but also of elements transmitted through books. These publications represent, as maintained by numerous authors, the transition from folk medicine to scientific medicine (Thaller, 1938:38; Šušnić-Filker, 1992:306).

In the course of the twentieth century, Croatian ethnologists predominantly dealt with folk medicine in a parenthetic way, so that articles about that subject largely contain descriptive material. In the research conducted in Croatia, folk medicine was generally perceived as a set of unusual recipes and superstitions rather than a coherent system. Although other phenomena of ethnologic relevance were interpreted in the light of various theories characteristic of the development of the ethnological thought in the twentieth century, there were no such works focusing on the domain of medicine. However, it needs to be mentioned that within the scope of researching customs, beliefs, magic and oral literature, data relevant for folk medicine were interpreted as well, although the research focused on other subjects (Bošković-Stulli, 1975:205-231; Čulinović-Konstantinović, 1988:95-103; Čulinović-Konstantinović, 1989; Bošković-Stulli, 1991:124-160; Belaj, 1992:215-219). Recently, two more books of great relevance for the study of the magical and religious segment of folk medicine were published (Čiča, 2001; Španiček, 2002).

One part of the used material refers to texts written by medical doctors. In Croatia, folk medicine has been mainly researched by doctors and pharmacists, which explains why the classifications of illnesses and treatments in folk tradition were patterned after the official medicine of the time. This resulted in the separation of the rational aspect of healing from the irrational one. Scientific medicine and pharmacy were naturally more interested in the rational factor because its effects or the effectiveness of certain remedies were measurable. Consequently, research conducted with this goal neglected, as a rule, symbolic elements such as gestures (the sign of the cross or pentagram), the relevance of colours or the symbolism of numbers. Ethnologists and folklorists, on the other hand, have passed over the rational character of healing in favour of magic and the interpretation of such phenomena as surviving traces of a cult. Therefore it must be noted that the rational and irrational are inseparable in folk medicine and lose their meaning when investigated separately.¹³

Numerous authors of monographs tried to present the rural life and customs as positively as possible and thus avoided to write about hygiene, sexual life, alcoholism or

medicine of the time, were added, and that something was modified or omitted. There was always a communication between the elite and non-elite culture. Comparisons of written popular texts about healing people and animals, school medicine texts and records of oral tradition from the domain of folk medicine show that the oral and written traditions were intertwined (Loux, 1993:306).

¹³ Folk medicine has nowadays been widely defended from the positions of official medicine, so that the official medical conceptions about the efficiency of certain folk remedies are used to give a new relevance and content to folk medicine.

other negative phenomena. Accounts of medical doctors, especially the illustrations, therefore provide very important comparative material.

The major part of the used material was published in the 1930s in the medical magazine *Liječnički vjesnik*. Mention should be also made of films and photographs made in Croatian villages of the same period by the *Andrija Štampar* School of Public Health. The basic activity of the School was the research and education of the folk (as it was called at the time), which was a great contribution to the adoption of the modern view of health and illness. The School also initiated a number of educative actions with the purpose of improving the hygiene and health standard of the population (Brenko, Dugac, Randić, 2001:191-211).

Data collection methods

During field research, we mainly used the usual ethnographic and anthropologic techniques, such as interviews with informants, observation of behaviour and participation, as well as the survey of ethnographic and other data and recordings. In the course of the research, we talked to roughly hundred individuals including twenty folk medicine practitioners who still use traditional techniques and procedures.

In the beginning of the research, we created a questionnaire. Besides standard general data about the informant, the questions were related to the knowledge of certain healing methods in folk medicine, the knowledge of medicinal herbs and other remedies, magic and religious practices and beliefs, hygiene, sexual life, birth giving, child care and raising, the treatment of old and sick people, the relationship to official medicine, etc. Interviews with informants were mainly cassette-taped, but in cases where the presence of a cassette recorder made the informers feel uneasy, we wrote the answers down in a notebook. Naturally, it was impossible to put all questions provided by the questionnaire to every informant. This depended primarily on the available time and the mental and physical state of the informant. We noticed that women were generally readier to talk, which is why interviews with them lasted longer than the ones with men. Talking about important moments in life – birth, marriage and death – women communicated not only emotions, but also thoughts and conclusions they arrived at in the course of their life. Talking about wedding, birth and death, they actually related their life, giving account of numerous other data and attitudes as well, which were very important for the interpretation of the material. Interviews with men primarily focused on their occupation and their knowledge related to it. Although the objective of the research was to encompass all age groups, this was not possible due to demographic peculiarities of individual regions. Sometimes we talked with several informants at a time, which proved to be a very good approach, because they stimulated and complemented each other. When talking to older people, a successful method was to talk in the presence of younger generations, who were already familiar with their life stories and reminded them of moments re-

levant for the subject, so that the informers also talked about things they refused to discuss or could not remember at the beginning. The informants felt more relaxed in the company of familiar persons. However, when the interviews were about intimate issues, such as women's experiences related to sexual life, pregnancy, birth and abortion, we always talked in private with the informants, because they did not want to discuss some aspects of their intimate life in front of the closest relatives. Moreover, it was first necessary to establish a relationship of trust, which was possible only after several consecutive visits.

A similar problem emerged also with questions related to magical healing procedures. At the first meeting, the informants would usually tell us that they no longer believed in it or that they heard about a neighbour who went to have spells removed, but that they knew nothing about it. However, once we got closer acquainted with the informants, we would learn the "real truth" and hear stories about various events interpreted as events of magical nature. Informants also often showed us diverse objects they carried on them to ward off evil forces, either given by folk medicine practitioners practicing magical healing or religious objects obtained at pilgrimages. Folk medicine practitioners practicing magic healing are very reluctant to talk. Centuries of negative attitude harboured by the Church and official medicine towards these activities have resulted in a deeply-rooted fear that it is something sinful, forbidden or primitive. On the other hand, if revealed or spoken out loud, magic formulas would lose their therapeutic power.

For the purposes of the exhibition, it was necessary to make as much photo and video records as possible. This also represented a problem, because some folk medicine practitioners refused to appear in public for fear of consequences, since their practice was illegal. They consented only when we convinced them that their face will not be shown and that their voice will be modulated. It should be stressed that for some informants the appearance in front of the camera was decisive to agree to an interview at all. Besides that, we had to obtain the patient's approval for recording as well. Sometimes we underwent therapy ourselves. Great help was also provided by the Museum collaborators, who found the informants and prepared them for our coming.

Description of material

According to a saying recorded on several instances in the Dinaric region, "a 30-year old who does not know how to cure himself, is not worth living." But in healing, like in all other professions, there were individuals who stood out by their talent, propensity to healing and the wish to help people with their acquired or inherited knowledge. The interviewed folk medicine practitioners represented a diversified group in terms of methods, their status in the local community and the way they were perceived by their environment. There were an equal number of women and men among them. They were all family people belonging to the middle-age or old age group.

The youngest folk medicine practitioner was born in 1967. Most of them began their public activity at the end of adolescence, with the exception of one informant who started practicing as early as at the age of five, when she was instructed by an older villager how to use the water prayer, i.e. a magic healing formula against spells.¹⁴

None of the questioned informants has a prospective successor at the time.¹⁵ As long as the person is actively practising healing, especially magic healing, they are not initiating anybody to healing practices because it is believed that the formula will lose its power if someone else knows it. The knowledge of the work techniques is customarily kept in the family and passed on to the younger generations only at the life end of the oldest ones, which is also typical for shaman healing methods. This explains why such knowledge was generally passed on to grandchildren rather than children, in order to avoid the revealing of formulas and the competition. According to earlier information, women usually pass on their knowledge to the most competent daughter-in-law if none of the daughters has an interest in healing. Besides that, the daughter-in-law would succeed the mother-in-law because she would stay in the house after marriage, while the daughters would marry away from home. Five of the interviewed informants learned the healing skills from their mothers. Only one of them took over her late husband's practice, which deviates from the common norms, since it was a barber-surgeon's practice, a traditionally male occupation in our country. Although this skill was transferred by men to sons or nephews, only three of the respondents were introduced by their fathers to the practice. One of them acquired the skill working with a neighbour, while in one case the healer was, because of his special interest in various forms of traditional healing, instructed by his grandmother about healing by herbal or animal remedies and magic procedures.

Two practitioners felt the need to help their fellow men following a kind of conversion experienced after visiting Medugorje, a place of pilgrimage in Herzegovina, in one case and the appearance of the Mother of God in the dream in the other case. Only one person, *krsnik*¹⁶ by birth, was predestined for this occupation. By their function, *krsnici* came close to other folk medicine practitioners, although they were endowed with different mystic qualities.

¹⁴ Having said the formula aloud in the camera, the informant lost the power to use it for healing. However, she did not regret it, because she believed that she had helped enough in the course of her life. Recalling the times when she was most actively practising healing, she said it was worst when there was a good movie on TV and she had to stop watching because someone asked her to say the prayer on his or her behalf. (TZ, 2001).

¹⁵ A folk medicine practitioner's daughter, who resets dislocations and massages, works as a physiotherapist. According to the informants, she enjoys a reputation of a professional and educated person, but also as the daughter of the mentioned folk medicine practitioner, so that people turn to her with great confidence.

¹⁶ Because of the differentiation between *krsnik* and *štriga* (witch) in the regions of Istria and Primorje, it was crucial to determine how somebody was born. A person born in a white sheath (remains of the amnio-

Only one of the folk medicine practitioners we met during research practiced healing professionally. To others, it was a secondary occupation to the usual peasant work. One respondent worked in the nearby factory, while another folk medicine practitioner was a municipal clerk. None of the informants had any formal medical occupation. Most of them went only to primary school. Two of them absolved a veterinarian course and acquired some knowledge about human anatomy as well from books. They knew how to reset a dislocated joint or a broken bone. Some of them have a very limited knowledge, which they do not even intend to broaden, and are specialized only for certain methods and techniques. These are mainly practitioners with a rather local relevance. Only three of them can be said to enjoy a regional reputation. They practice healing mostly out of their wish to help and the feeling that they are capable enough to do so based on inherited and acquired knowledge.

The interviewed folk medicine practitioners do not have a uniform attitude towards official medicine. Some of them are aware of their capabilities and limitations and do not perceive official medical doctors as competition, while others believe that the official medicine is powerless in difficult cases and try to mystify their powers. A great number of them has stressed that even doctors from nearby medical institutions sometimes ask for their help. One practitioner even received an official award for her merits: a plaque of the Pitomača municipality. Folk medicine practitioners like to tell how they helped people who had received completely wrong treatment from doctors for years or how their intervention saved people who were about to have their arms or legs amputated (TZ, 1996-2004).

Regardless of how they acquired their knowledge, folk medicine practitioners can be subdivided into several categories.

Ways of healing

In our country, there are historic records of prices charged by people practicing folk surgery. Such techniques include resetting of broken bones, healing wounds, barber-surgery and there are also literary records of removing cataracts, trephination, extracting calculus, etc. (Bazala, 1943:122-123). Surgeries were mainly performed by men. They were very highly praised and it was stressed that their skill during the Turk wars was not one bit inferior to the skill of officially trained doctors (Grmek, 1958:581). By the nineteenth century, surgeries such as blood-letting and blood-sta-

tic sac) was called *krsnik*, as opposed to babies born in a black or red envelope, which would be called *štriga* or *štrigon*. Special powers of children born this way are known and recorded elsewhere in the world as well. Somewhere such birth is a good omen, while elsewhere it is a bad omen. The birth of such children was publicly announced. When they reach a certain age, they were called to join their sect according to set ritual. The *krsniks* were a sort of local protectors and their healing role was of particular importance. They were believed to have stronger powers than *štrige* (Bošković-Stulli, 1975:224).

unching were the exclusive domain of individuals without academic education called *barbiri* or *chirurgi* (Hajduk, 1973:2).¹⁷ They fell into the category of professionals and were close to the medical doctors' profession by their honour and status, which is why they also enjoyed a greater reputation than other folk medicine practitioners. Numerous successful treatments made people ask for their help with great confidence. Barber-surgeons were also the only ones who had their tariffs and charged money for their services. In the 1930s, the *Andrija Štampar* School of Public Health initiated a number of propaganda actions against medical quackery, considering it especially harmful for the rural population. However, their criticism targeted less this type of folk healers than the poor hygiene conditions under which such surgeries were performed (Vrus, 1940:604). At the beginning of our research, we were convinced that barber-surgeons no longer existed, but we discovered to our great surprise that there are still people even in the area of Zagreb and Samobor who practice barber-surgery and have regular customers (TZ, 2001).

People who reset dislocations and fractures, so-called "bone-setters" (*kostolomci, ramnači*) are still held in high esteem. It is amazing with what skill and courage they start resetting, for instance, a dislocated collar bone or hip joint in newborns (TZ, 2001). This category includes practitioners who straighten the backbone, set the stomach and perform various massages as well. Such treatments are nowadays employed mainly by women. In medical literature, they are referred to as empirics; however, we noticed in our research that their treatments also include some other methods related to irrational ways of healing. Among our respondents, two practitioners belonging to this group enjoy the highest reputation: Sofija Sesvečan of Pitomača and Pere Bajčić of Brusići (the island of Krk).

Before they start healing, folk medicine practitioners always invoke God's help and recommend their patients to pray to the Mother of God or a patron saint. The positive outcome of the healing depends in a way on God's will, i.e. the patient's faith. When the healing lasts for a longer period, both practitioners also ask their patients to observe the church commandments. Sofija Sesvečan tried to present her moral and religious views in writing. During our stay on the location, she showed us the manuscript of her biography titled "The Great Heart of Grandma Soka", which was just prepared for print and which illustrates her belief that the turning away from God, the disregard for God's commandments and church authorities leads to moral decay, sin and punishment in the form of illness. The book starts with the sentence: "In our house, God always came first." Both practitioners erected chapels as sign of gratitude to God.

The special confidence enjoyed by Pere Bajčić can be explained not only by the fact that he comes from a family of generations of successful medical practitioners, but

¹⁷ It is interesting that surgeons are today at the top of the medical hierarchy.

also by his being a *krsnik*¹⁸ by birth, which has increased his power in the perception of the people. People turn to him also when they have marital problems, in which case he performs a sort of marriage counselling. One of the usual questions he asks the partners is whether they attend Sunday mass. People from all over the island described him as an honest, good and above all modest man. It is interesting that people still bring the sick person's clothes for him to pray over them, because they consider his prayer to be "more powerful" than the priest's. In folk belief, priests can influence illnesses and evil forces that cause them with the powers endowed to them by their calling and status (Filipović-Fabijanić, 1968:68). This is why the patient's clothes were brought to priests to pray over it (Ivanišević, 1904:34).¹⁹

Herbal healing is also on the verge between the rational and the irrational. Herbalists can work with herbs in a very empiric manner, and at the same time believe in magical principles. Herbal healing has almost regularly implied supernatural powers of certain herbs as well as persons who know them. In the past, herbal healing was predominantly a female occupation.²⁰ Data from the 1930s include accounts of herbalists, men whose reputation and fame have outgrown the boundaries of local communities. Sadik Sadiković is the most popular among them. Due to the very strong campaign against medical quackery, quite negative articles about him were published in the medical press at that time. Individual herbalists were known far and wide as specialists for certain illnesses, using recipes that were kept and improved in their families for generations, such as jaundice tea or ointments against various skin diseases. To make the therapy as efficient as possible, some herbalists cast spells on the herbs administered to patients or pronounced magic formulas while cleaning the wounds. (Filipović-Fabijanić, 1968:68).

Although the most frequent association when it comes to folk medicine is herbal healing, during the field research 1995-2004, not a single folk medicine practitioner we encountered in the villages fell into that category. While phitotherapy of all branches of alternative medicine has received the widest support of patients in the cities and

¹⁸ How important the function of a *krsnik* was considered to be is illustrated by the following example: "During World War I, there appeared in Sušak a doctor with the surname Kresnik; people flocked from all over, waited in rows for days and nights just to be treated by him because he was a *krsnik* and a real doctor at the same time." (Bošković-Stulli, 1975:212-213).

¹⁹ A similar custom was recorded in the villages of the Dinaric region in the mid-twentieth century, where the sick person's clothes were brought to the blacksmith. The special power of the man who shapes metal in fire like in a magic ritual provided sufficient basis for the belief that such man has supernatural powers and can therefore heal as well (Čulinović-Konstatinović, 1989:77).

²⁰ The Statutes of Dalmatia from the early thirteenth century called medicine practitioners *herbarii*, which first denoted herbalists, and later sorcerers. The use of the term *herbaria* for sorcery proves that the perception of sorcery of the time relied on the belief in the mysterious powers of people dealing with herbal healing. With the development of academic medicine, our medicine-men (*vrač*) used less empiric techniques and more sorcery. It took two centuries for the expressions *vrač* or *herbarius* to lose the meaning of 'medical doctor' and start meaning 'sorcerer'. In the late 14th century, the practices performed by *vrač*i started being regarded as female occupation, based primarily on witchcraft or magic (Ferri, 1954:140-141).

partly also of representatives of official medicine, herbal healers were to be found in rural areas only in the memories of informants. On the other hand, we met people who were not representatives of the folk tradition in the prior sense, but can nevertheless be regarded as part of that tradition in a certain way. Their work is to be mentioned because they are much respected in their environment and their advice is highly valued. They are people who gained their knowledge of medicinal herbs from books. The most frequently mentioned books in this context are “Folk Health” by Sadik Sadiković, “The Golden Book of Medicinal Herbs” by Zlatan Gurski, “Healing with Medicinal Herbal Teas” by Jovan Tucakov, “Natural Healing with Herbal and Other Remedies” by Nikola Gelenčir, “The Handbook of Collecting Medicinal Herbs” by Simon Ašić and others.

The most numerous and active category of folk medicine practitioners is the one including people who regard themselves as mediators between the sick people on the one hand and the demons causing illnesses on the other hand. They are still present in almost every village, although they and their surroundings rarely admit their practices right away. All interviewed folk medicine practitioners healing with magic procedures are church-goers, some of them even expressly devout. One practitioner was told by Holy Mary in a dream how to cure warts. It is a well-known magical pattern of this area that apple is used to cure warts during the phases of the moon.²¹ A practitioner removing spells by the positive energy stimulated by a dowsing rod has become aware of his capabilities during a pilgrimage to Međugorje. The relationship between magic and religion will be further discussed below. This category also includes specialists, like the ones healing snake bites, *poganica* (an eye disease) or various skin diseases, with magic formulas. But it is important for the success of the therapy to explain the social function of folk medicine practitioners.

The social role of folk medicine practitioners

Classical works of literature, such as Castaneda’s “Teachings of Don Juan”, have shown that exceptional insights and understanding of cosmology, magic, beliefs, ethnobotany and ethnopscyhology of a community can be gained by intensive cooperation with only one informant. Such particularly talented individual carries within himself the whole picture of a world that is only partly perceived and can be only fragmentary communicated by others (Supek, 1976:58). In rural environments, folk doctors fulfilled many other roles besides the healing over the past centuries. Their practice and skills were differently regarded. Some were jeered at, some were feared and

²¹ A used piece of apple must be thrown away over the head (to the bush or into a ditch) and one should not look where it falls. By analogy, as the apple decomposes, it is expected that the warts will vanish as well (TZ, 2000).

some were very sought-after and esteemed. To gain reputation, it was necessary that the community gets first convinced in the efficiency of a folk practitioner's work. The social standing thus acquired could be preserved primarily by helping fellow villagers. Describing the life conditions in the region of Prigorje in the early twentieth century, Rožić mentions folk medicine practitioners as well and says: "If a man is not otherwise honest, he is not really respected, and nobody thinks that resetting the stomach or a hand is a great skill" ("Oko ni drugač pošten čovek, unda takav čovek baš ni preštivan, i niče ne drži da je to kunšt želudac ali ruku naravnati.") (Rožić, 1903:256). Healing implied a better knowledge of people and nature and required greater intelligence and astuteness of the practitioner. The fear of supernatural powers of such persons persisted under the influence of deeply-rooted fears of witches in the past as well as the obscurity of their actions. Research conducted in the mid-twentieth century showed that such people managed with less land and cattle to have an equal life standard as others, even though they were considered as poor because they owned no considerable property. However, they were more respected than other poor peasants, and the men were also semi-professional craftsmen, more talented than others for various repairs, advisors for cattle breeding and treatment, experts for medicinal herbs and more skilled in animal slaughtering and meat preparation (Čulinović-Konstantinović, 1989:80). They were often also initiators of various activities in the village, good musicians, skilled masons (TZ, 1995-2004). Besides knowledge of herbs and magic procedures, women were competent landladies, cattle-breeders and farmers, better cooks than others, and were therefore often invited as main chefs at weddings and other ceremonies. They assisted at childbirth even beyond the village, cared for sick people, cured children's diseases, organized village festivities, made efforts to preserve village customs and ceremonies and were better acquainted with norms of social behaviour (Čulinović-Konstantinović, 1989:80).

They were, in brief, relatives, neighbours, capable men and women from the community who used their skills to help the sick. Based on interviews with folk medicine practitioners and their families, we concluded that they perceived the medical practice as a sort of duty and obligation towards their fellow men, which was not just a matter of choice, but a kind of mission. A great number of folk medicine practitioners stood out in their community by their strong individuality, but it was their deep roots in the cultural tradition that enabled them to practice (Španiček, 2002: 278). No folk medicine practitioner would send away someone who came to ask for help. Pero Bajčić, the famous bonesetter of the island of Krk, is ready to provide his services at any time of day or night, so that people come even to the field he works on to have their dislocations and fractures set (TZ, 2001). Many folk medicine practitioners are ready to visit a seriously ill person themselves. As described by Rožić, if someone needs help, they just say: "Send for Facanka (or however one is called) to come and cure my stomach or to set my foot. Whenever one asks afterwards, how much do I owe you, she says 'What would you owe me: neighbours and friends should help each other where they can' ('Pošalji po Facanku (kak se već ka zove), da mi želudac naravna' – ali: 'da mi negu naravna'. Kad gdoj pokle pita, kaj sam dužan, unda veli:

'A kaj bi mi bili dužni: sused susedu, pretel pretelu mora pomoći, gde mare'.“ (Rožić, 1903:256).²²

Local healers were usually already acquainted with the family situation of the sick person. People had contact with them regardless whether they needed their medical assistance or not. Since they shared the same social environment, they used the same language in communication with the patients. None of them asked for rewards for their trouble, but it is understandable that the service should be repaid in a certain way. Healers who take money rewards never set a price, but accept rewards according to the patient's capabilities. However, it is also implicit that the reward amount grows according to the reputation of the folk healer (TZ, 1996-2004).

Of course, there were also commercially oriented healers who travelled from fair to fair offering their medical services, mostly travelling barber-surgeons. They compensate for the lack of title by external symbols (a white overcoat, an authoritative and arrogant attitude) supposed to inspire confidence in patients based on the perception of doctors as experts (Rorbye, 1982:58). With the intention to look like doctors as much as possible, some folk medicine practitioners exaggerate what is associative of the stereotypical perception of doctors.²³

One of the important holistic concepts is the unity of place and time. Places of birth, dying, illness, celebration, work or rest are not separated. In extended families, people acquired knowledge in relation to the body and illness since early childhood. This is where all their, especially women's activities took place.²⁴ Illness was always considered an abnormal event, something disruptive in the natural course of life. This is why the primary role of therapy was to find the meaning and explanation to

²² The most frequent terms for folk medicine practitioners regarding methods they apply were: *babe* (grandmothers, old, women, hags), *babice*, *babe vračare*, *vračiteli*, *vračitelke* (sorceresses, sorcerers), *coprnjice* and *coprnjaki* (witches, wizards), *štrige* and *štigoni*, *krsnici*, *vidari* and *vidarice*, *biljari* and *biljarice*, *travari* (herbalists and herbwomen), *ramnači*, *kostolomci* (bonesetters), *barbiri* (blood-letters), etc. During our field research we never encountered a folk medicine practitioner being called by a term suggesting his or her healing practices, except a barber-surgeon whose relatives explained that the word *barbir* was even added to his name on the notice of death because he was known by this name in the entire region (TZ, 2001).

²³ Although they do not have a formal medical education, some folk medicine practitioners demand prior to determining a therapy that the patient brings medical findings and diagnoses of official medical doctors and keep special files of their patients. During research, we also heard about a priest who heals people with brandies including various mixtures of medicinal herbs. When he sees his patients, he regularly puts on a white overcoat (TZ, 2001).

²⁴ Anthropologists and ethnologists mainly dealt with the role of healers, neglecting the everyday, primarily women's domestic medicine. In traditional environments, older women who gained sufficient knowledge and experience over time were considered as the most competent for curing illnesses. The role of the woman as the transmitter of experience is frequently also reflected on the symbolic level. It is interesting that in some cases women can start practicing folk medicine only after "they bid farewell to everything", i.e. after the menopause, because only a "pure" woman can mediate between the sick people and the demons of illness which need to be expelled or the saints who are expected to assist in the curing illness (Filipović-Fabijanić, 1968:67).

an illness, which implied at the same time the restoration of harmony and balance. The patient's participation was based on confidence, which was indispensable to restore health. Placing the healing ritual in the setting of everyday life, the body is returned to the family context, to a coherent world of childhood, which brings about, if not healing, at least a sense of relief. Therefore, healing cannot be explained merely as ceremony, because the content of the belief was less important than the social role exercised by the healer (Brenko, Dugac, Randić, 2001:35).

But if the social role of the healer is to provide relief and meaning to the illness, does this mean that the folk medicine practitioners are efficient only within the context of a certain culture of community? Can they heal modern illnesses as well?

Even though therapeutic elements vary from culture to culture, there are nevertheless some constants. The significance attributed to blood, the influence of the Moon on the human body, the principle of analogy and the opposition of cold and warm reappear as constants in many cultures, even though in different ways (Loux, 1993: 671). Folk medicine has efficient remedies confirmed not only empirically but also clinically. This applies also to certain techniques such as rubbing and blood-letting. Folk medicine gained many insights and positive experiences in healing much earlier than scientific medicine. Folk medicine practitioners arrived at a range of correct assumptions, for instance, that a fall or heavy blow to the head required trepanation, that putrid parts of bones and flesh must be removed, that fractured bones must be immobilized with a firm bandage, that wounds must be cleaned, that eye cataracts must be removed and bladder stones extruded. However, such operations were practically performed without the requisite knowledge of causes of illness, especially about antiseptic measures and infections, which is something that even scientific medicine discovered relatively late. On the other hand, the method they used with some psychological illnesses had real and lasting results. Folk medicine practitioners have made excellent use of psychotherapy,²⁵ which is partly based also on the belief that "what people believe will help them" (Filipović-Fabijanić, 1968:69).

But the major point of distinction between folk medicine and scientific medicine is the factor of social reintegration, emphasized also by anthropologists as the most efficient method. In the course of folk medicine research, we met relatives of a man currently living in Sweden and suffering from the post-traumatic stress syndrome (PTSP). As stated by his relatives, no therapy he received there helped and his state

²⁵ Sadik Sadiković, a famous folk medicine practitioner, had a very successful method of healing depression. The therapy was based on a suggestion by which he tried to divert the patients from focusing on their disorder. For example: "get up at dawn, while dew is on the grass, catch or kill nine magpies and eat one of them, roasted under a baking lid, every day" (*"ustani zorom, dok je rosa na travi, uhvati ili ubij devet švraka i pojedij svaki dan po jednu pečenu pod saksiju..."*) (Dujmi, 1940:8). This recipe faces the patients with a problem the solution of which requires an effort: getting up early, making sure that the dew is on the grass, catching the magpies, which is all not so simple. In this way, the patients' attention is slowly diverted from their troubles and the therapy yielded very good results (Dujmi, 1940:8).

improved only when he started drinking a tea prepared for him by a herbalist from the region of his origin (TZ, 2002).

Magic and religion

The interplay of magic and Christian beliefs is typical of the folk devotion still practised across Croatia. Both magic and religion presuppose the existence of supernatural beings. One of the basic differences between magic and religion is the one reflected in the attitude towards the supernatural. Magic implies an active relationship with the supernatural world in the sense that man can influence it with magic methods and cause desired changes. The medicine-man, as the mediator between the natural and the supernatural world believes to have the power over the supernatural and natural forces and believes in the certain outcome of his methods if they are performed correctly. Magic action is therefore based on the choice of the right formula and the valid performance of the technique, which will inevitably lead to success. As opposed to magic methods, religious ceremonies stress human helplessness. Believers turn to God for help and he decides which prayer will be fulfilled and which will not (Rosman, Rubel, 2001:212).

Since its early days, Christianity tried to distance itself from folk magic practices and beliefs, referring to the Bible which provides the strictest punishment for sorcerers and sorceresses.

In the late Middle Ages, sorcery was declared a heresy and between the thirteenth and the fifteenth century sorcerers endured the same treatment as heretics. The persecutions continued in the next centuries as massive witch hunts based on the international theological understanding of sorcery. The thus created theological pattern of witchcraft, with evidence established through tortures, caused village magicians to be accused as evil sorceresses with all stereotyped attributes (devil worshippers, members of organized sects making deals with the devil, making orgies at secret meetings and doing harm). In Croatia, witch hunts peaked in the seventeenth century and ceased only as late as in the eighteenth century (Bayer, 1954:211).

In Slavic languages, *vračati* meant both healing and performing magic, so that the magician was at the same time doctor and sorcerer. The widespread folk perception of the division into white and black magic, i.e. the helpful and the harmful one, was levelled by the official religion under the motto “who can heal, can harm as well“, as expressed by a witness at a trial in Modena in 1499 (Burke, 1991:92). According to folklore records from the nineteenth and twentieth centuries, a person was sometimes believed to have learned his or her skill from fairies. It is said that sorcerers and sorceresses have fairies and elves as blood-brothers and blood-sisters, who taught them how to cure illnesses; witches were, on the other hand, on the devil’s side – they cast spells and sell their souls to the devil (Bošković-Stulli, 1991:131).

In the Anthologies of Folk Life and Customs of South Slavs, it has been mentioned on several instances how priests have scolded both the ones removing spells and the ones seeking their help: “Priests often reprimand from the pulpit the ones who believe in magic, it is a sin: they refused to give communion and absolve from sin some old women who removed spells until they gave up such practices. Not many of us will call a magician today to cure illnesses and say prayers; people prefer to visit the priest and have a written prayer amulet made...”²⁶ (Ivanišević, 1905:295).

The results of such centennial diabolisation of folk medicine practitioners are still visible. During research, we recorded several statements of practitioners that their healing skills are god-given, as if they wanted to distance themselves in advance from magic practices as the devil’s work and emphasize that God, rather than them, should be thanked for the healing (TZ, 2000-2001). The Church still expresses repulsion and fear from folk magic.

In the course of history, many critics of the Catholic Church have shown that it also accepted magic in practice. For centuries, the Church vainly tried to stamp out the rooted folk belief that illnesses caused by magic or witchcraft can be only successfully treated by anti-sorcery, offering instead “holy medicine”: prayer, pledges, interventions and powers of saints, fasting or exorcism, trying to secure the exclusive right to perform magic procedures (Brenko, Dugac, Randić, 2001:52). The process of accepting official religion was a slow one. Some elements of folk devotion were accepted to the official Church cult (pilgrimages, processions, the Way of the Cross), and some were given Christian form and meaning by the folk medicine practitioners themselves. It can be said that in the course of the spreading and acceptance of Christianity everything that could not fit in the official religious cult was labelled as magic (Španiček, 2003:249).

For a long time, magic beliefs were supported by Catholic priests themselves, who were perceived in the folk as “good magicians” as illustrated by the ethnographic material from the turn of the century. The Anthologies contain data about extraordinary powers of priests to heal the sick “by cross and prayer” (through *natresanje*²⁷ of the sick patient’s clothes and written prayer formulas carried as amulets), influencing pe-

²⁶ *Zapisi* are diverse texts of religious character containing prayers for healing or protection from evil addressed to God, the Holy Mother or individual saints. Such texts could be folded in triangular (with Muslims) or square shapes (with Catholics), worn around the neck or at the sick spot in silver boxes or wrapped in cloth. Franciscan monks stopped this practice in the nineteenth century, considering it superstitious, while Muslim mullahs continued this practice both on behalf of the Christian and the Muslim population. It was generally believed that the prayer amulets were more powerful if they were prepared by a priest of another faith. Healing with Koran prayer amulets is still popular within esotery as an alternative method of healing.

²⁷ The custom of “*shaking off*” the sick person’s clothes (*natresanje robe*) was performed by priests in the past. When they came down from the altar and started removing their mass vestments, they would shake every piece over the patient’s head before laying it aside, in the belief that if the illness came from the “devil’s side” it would go away after such treatment. During this, the patient would kneel with his hands clasped, kiss every piece of the vestments and put himself to the mercy of God (Ivanišević, 1905:297).

ople through blessings of fields, expelling insect parasites, praying for rain or sending hail to the neighbouring parish (Ivanišević, 1904:34). Certain priests became very famous through their healing powers, but Ivanišević also noted that “it was not their choice, but God’s will” (“nije ni do nji”, nego komu Bog odredija; Bog sriću dili”) (Ivanišević, 1904:34). Writing about the life in Poljica at the turn of the nineteenth century into the twentieth, Ivanišević mentions with special praise don Stipan Simunić and his exceptional successes in healing, which caused the envy of other priests who reported him to the bishop of Split accusing him of removing spells and making written prayer amulets, upon which the bishop forbade him to celebrate mass: “Don Stipe was very upset about this and cursed even the bishop so that his house was swarming with vermin, which he could not get rid of. The bishop called don Stipe for help, he made the sign of cross and everything was gone immediately, the house stayed clean as gold, and my don Stipe was as before, the bishop allowed prayers and mass right away” (“Teško bilo to don Stipi, borme ukleja on i biskupa, prolizla po njegovu palacu pusta gamad ušiju, čirnovica, nikid ji’ otrubit. Ositija se biskup, prizva’ don Stipu, on prikrižija, nestalo svega, kuća ostala čista ko zlato, a moj don Stipe opet ka’ i bija, dopustija biskup odma’ misu i molitve.” (Ivanišević, 1904:35).

In the village Otok near Vinkovci it was believed that every priest capable of calling clouds, i.e. causing hail, was cursed.²⁸ A research conducted in the mid-twentieth century showed that in the villages of north-western Croatia the population believed that one should not displease the parish priests, because they can have an evil nature and equal powers as sorcerers (Čulinović-Konstantinović, 1989: 83). According to folk belief, doing harm and healing are very kindred powers. People blamed all their troubles, illnesses, deaths of close people, the dying of animals, draught, storm or anything else on persons they believed to have supernatural powers. The borders between the healing by religion and healing by magic are easily shifted, which is why supernatural powers ascribed to certain individuals caused admiration and respect, but at the same time fear from harm.

Folk medicine practitioners before and now

The lack and unavailability of doctors in the past was certainly one of the reasons why people sought help from village folk doctors. In 1598, when the Croatian Parliament was convened due to the threat of plague, it was concluded that there is not a single doctor in the whole territory of Croatia and Slavonia. It was only in 1603 that doctor

²⁸ To illustrate this belief, Lovretić mentions an account he heard from the people of that region. A son was sent to study for priest and after he returned, the father asked him to say what he learned there. The son answered that he can call a cloud on his vineyard. The father was curious and said that he would like to see it. “*The son took a book and started praying. A cloud came over their vineyard, hail fell and beat the vineyard down. Then the father took a gun, aimed and killed the cursed son and said: ‘Now, son, no more will you beat other people’s toil in the vineyard, I will not be chided by the people because of you’* (Lovretić, 1990:536-537).

Daniel Their de Rosenberger arrived to Croatia as doctor medicus Regni Slavoniae et venerabilis capituli Zagrabiensis (Thaller, 1938). Even in the nineteenth century doctors were a rare phenomenon in our country.²⁹

Thus, the rural population could not see a doctor for help in urgent cases. Bad roads and the isolation of some mountain villages during the winter imposed even greater difficulties. The spatial distance of doctors is no longer an issue. On the contrary, travelling even great distances is no trouble for strongly motivated people seeking relief in alternative medicine.

In the past, the economic factor mattered, too. Medicine services provided to patients by fellow villagers were free, as a rule, or were compensated by a reciprocal favour, while doctor's services were regularly charged. The majority of the village population could not call a doctor due to poverty. Today, the economic situation plays a different role, because it is some aspects of alternative medicine that are available only to better-off people.

The Medical Faculty in Zagreb was established as late as in 1917, which means that medicine in Croatia was practiced for centuries by foreigners or Croats educated abroad. The population generally had a very negative attitude towards them: because they were foreigners with no command of the local language or because they belonged to a different social class even if they spoke the same language. One of the reasons for the success of folk doctors was also their status, which was in many ways corresponding to the patients' (education, social standing, age, sex). They communicated among them in a way that was unthinkable for the doctor's practice.

Besides that, the perception of illness in the rural population was very different in the past. Many illnesses people believed were not to be cured and therefore took no action. They simply accepted the high mortality in children: given by God, taken by God. They also had lesser life expectations: it was not meant to be. Calling a doctor was the last resource and when the patient would eventually die, they could say to relatives and neighbours: We even called a doctor. If someone died because medical help was too late, it was proof that the doctor was not able to help anyway and the motive to continue the already known traditional healing practices (Brenko, Dugac, Randić, 2001:28).

²⁹ In 1873, there were only 103 graduate doctors and 88 surgeons in the whole of Croatia and Slavonia. Approximately half of them lived in cities (Glesinger, 1954:70). In 1900, the number of graduate doctors in Croatia and Slavonia increased to 317, as opposed to the number of surgeons, which decreased to 46 (Statistički godišnjak, 1905: 265). In 1910 there were 386 doctors and the new legislation referring to the need for graduate doctors reduced the number of surgeons to 10 (Statistički godišnjak, 1906/10:221). As early as in the 1870s, there were community doctors in Dalmatia, which made the situation in the villages somewhat better, but still substandard. Thus there were 142 active graduate doctors in Dalmatia in 1905, of which 70 were community doctors. In the late 19th century, approximately 70 doctors and 2 surgeons were practicing in Istria (Glesinger, 1954:70). It should be noted that Croatia and Slavonia had a population of 1.900.000 in 1880, which figure reached 2.400.000 at the turn into the twentieth century. After World War I, the number of doctors and other medical staff grew rapidly. Thus there were 1710 doctors in Banovina Hrvatska just before World War II. 1400 of them practiced in towns and markets and only 300 in villages (Sremac i Nikolić, 1941:38).

The shortcomings of the health care system are stated to be among the usual reasons of the popularity of contemporary medicine. The motivation for seeking the help of alternative medicine can be positive or negative. Positive motives include: tendency to holism, spiritual dimension, active role of the patient, good relationship with the therapist, compassion, good therapy experience, etc. Negative motives are generally the inefficacy of prior therapy or lack of healing results, bad relationship with the doctor, waiting lists, rejection of science and technology, etc. (Ernst, 2000:4).

The great success of the alternative medicine in western societies in the last decades of the twentieth century has been also attributed to the development of the consumer society and alternative lifestyles. Since the alternative offer is much broader and diversified in the cities, the urban population seems to be more inclined to seeking this kind of help according to individual preferences. Especially people suffering from chronic diseases and psychosomatic³⁰ disorders become patients of alternative medicine. Persons with psychosomatic illnesses find greater understanding with alternative than with official doctors.³¹

Besides that, the use of official and unofficial medicine is not incompatible from the point of view of the patient. In order to restore health as completely and quickly as possible, therapies of official and unofficial medicine are combined.

As we see, the reasons for practicing unofficial medicine have changed in temporal and spatial terms, but also regarding the type of therapy and the motivation of a person, which shows that folk medicine has been used in the nineteenth and twentieth centuries in a very different context than it is used today.

Conclusion

Based on the analysis of comparative data, we can formulate several conclusions: As part of folk culture in general, folk medicine represents a territory where the link with cultural heritage is particularly expressed. The transfer of knowledge from one

³⁰ An important fact in the healing of psychosomatic illnesses is that folk medicine equates symptoms with the illnesses. Folk medicine practitioners talk to patients about symptoms and pain. Pain is a feeling that can be expressed in different ways, but never with perfect precision. Besides that, someone can suffer pain and be completely healthy from the point of view of official medicine.

³¹ One of the ways in which practitioners of both official and unofficial medicine improve the patient's health is a completely natural method – the placebo effect (any improvement of the health condition caused by the sole act of receiving a remedy rather than the remedy itself). However, proponents of alternative medicine have attempted to minimize the placebo effect or interpret it differently. The sole relationship established between the patient and the therapist has a strong placebo effect. Healers show greater interest for the individual needs of patients and have fewer doubts whether something is correct from the medical standpoint or in line with social interests. One of our informants who heals with written prayer amulets honestly admitted that he often wonders whether he is a charlatan or not. "But when I see that I help people, the answer does not matter." (TZ, 2000).

generation to another is a way of preserving this cultural heritage. Folk medicine practitioners still preserve these traditions in their practice. In the course of the nineteenth and twentieth century, the lack of educated doctors and pharmacists was a big problem for the rural population. However, the issues of *Liječnički vjesnik* from beginning of the twentieth century often quote doctors' complaints that it is practically impossible to have a doctor's practice in some places, mainly referring to regions where there was a tradition of capable barber-surgeons (blood-letters), herbalists or bonesetters (*rammači*). Their work and skill literally drove people to ask for their assistance even when they could not provide appropriate help. These techniques were transferred from generation to generation. Magic formulas were learned by heart and passed on just before death to the male or female successor. Collecting herbs and acquiring knowledge of its medicinal qualities, its preparation and the development of healing methods represented a long process. Years of work with an experienced person, mainly from the family, would result in mastering the skill and building a personal repertoire, which is precisely what the immediate environment expected from them. This is how some families operated as doctors for generations and were fully integrated in the local community. The demand for their help in solving various life problems accentuates their relevance in the life of individuals, because they could be always relied upon.

Thanks to globalization, the knowledge and skills of local folk medicine practitioners are today part of the urban alternative medicine on offer. The development of scientific medicine made many experts believe that unofficial forms of medicine will gradually vanish together with folk medicine practitioners. Instead, they have adapted to the demand of time in a similar way as official medicine. The adaptation of folk medicine practitioners to modern times is also reflected in the scope of illnesses they treat, such as hepatitis C, AIDS, various types of malignant diseases, Alzheimer's disease and PTSP (Brenko, Dugac, Randić, 2001:38). The fame of certain folk doctors has already in the past exceeded the boundaries of their immediate community. What is typical for the present time is that healers establish first contact through mass media, not only through the local and national press, but also by way of Internet, TV and radio call-in shows. Some healers announce their services only indirectly and take orders by post or Internet. Most folk medicine practitioners we talked to own a telephone, a cellular phone and a calling card, regardless of whether they live in the city or in a village.

Despite centuries of efforts invested by the elite culture to impose its own frameworks on folk traditions, they have not disappeared. It could be expected that new trends such as centralization and rationalization would cause the most damage to individuals practicing magic healing. But precisely these forms of healing are literally flourishing in Croatia. Our research has shown that the rural population today is readier to seek help with official doctors, even for lighter illnesses such as colds. On the other hand, psychic problems caused by loss of close persons or property, lack of success in the private or business life, etc., are perceived as consequences of magic, in which case help is sought with persons who know how to remove spells and protect against

evil forces or “negative energy” (TZ, 2000). Persons practicing magic healing, i.e. spell removal, in cities today mainly present themselves as spiritual healers.

Even today, many people can more easily accept illness as the consequence of spells or evil forces than perceive themselves as the victim of an unpredictable set of circumstances, because the former explanation confirms and preserves their cultural identity. Besides that, the Church has for centuries suggested in different ways that a moral life is a precondition of health and that spiritual sin and physical illness are signs of evil in man.³²

Conversely, official medicine can explain to a certain extent what caused the illness, but cannot answer why it happened to us of all people. Contemporary medicine does not put the illness in a cultural perspective. By accepting rational and scientific explanations, illness is no longer accepted as the punishment for sins, a test or the consequence of spells. The illness is in the body and not outside it.

Today, the prevailing opinion is that, as a form of medicine, popular folk medicine will always exist parallel to official medicine.³³ There is also a visible tendency to ease fines for medical quackery. Although these practices are fully illegal from the viewpoints of law and official medicine³⁴, most practitioners work without any obstruction, which could mean that their practice nevertheless provides a certain social benefit. Even though criminalized, various healers still perform their social function. They are socially useful as long as they contribute to the health care. People turn to healers at their own risk. The “social benefit” of alternative medicine plays in the hands of both state institutions and promoters of alternative medicine.

Translated by Sanja Novak

³² In many cultures, the interpretation of illness itself is an important part of the healing. What is regarded as the cause of illness symbolically confirms notions about good and evil in a certain community. According to a very popular explanation, illness is the result of people failing to adhere to what is regarded correct in a certain culture.

³³ Although alternative medicine and its methods have no scientific basis, its proponents emphasize the centuries-old cultural basis of such methods. Theories of official and unofficial medicine rely on various paradigms, so that their difference is reflected not only in different theories but also in the impossibility to use the same experimentally verification method (Buklijaš, 1999:12-15).

³⁴ Present sanctions for medical quackery are regulated by Article 244 of the Criminal Code of 1997. Three preconditions needed to be fulfilled to constitute the criminal act of medical quackery: 1. the person has not the adequate education; 2. a type of medical treatment has been performed on a patient; 3. the treatment was done for monetary benefit or for a reward. The fine for illegal practice is 150 daily salaries or up to 6 months imprisonment. The law against medical quackery was very strict in the 1930s and provided a sentence of up to 10 years in prison if the patient's state deteriorated or the patient died (Bazala, 1932:122). In the past, such laws were even more rigorous. Legal records contain accounts of processes against sorcery with the accused being sentenced to death on the stake.