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Praktičari narodne medicine¹

Ovaj rad dio je šireg, desetogodišnjeg istraživanja narodne medicine na području Hrvatske. Tijekom istraživanja skupljani su podaci o različitim praksama, vjerovanjima i stavovima prema bolesti i zdravlju te ulozi koju su praktičari narodne medicine imali za okolinu u kojoj žive i rade. Podaci dobiveni terenskim istraživanjem uspoređeni su s relevantnom etnološkom i antropološkom literaturom te liječničkim prikazima tako da rad obuhvaća razdoblje od kraja 19. stoljeća do danas. U tekstu se pokušava utvrditi koje su funkcije imali praktičari narodne medicine i kako su se te funkcije mijenjale tijekom vremena, odnosno kako današnja upotreba narodne medicine ima drugačije gospodarske, ideološke i društvene pretpostavke ne samo za pojedince, već i za društvo u cjelini.

Ključne riječi: narodna medicina, alternativna medicina, iscjelitelji

Uvod

Postoje različiti pristupi medicinskim problemima. Povijest medicine do 20. stoljeća uglavnom su pisali liječnici. U svojim radovima oni se najčešće bave ulogom medicine u razvoju čovječanstva. Posljednjih desetljeća o toj temi počinju pisati i stručnjaci s drugih područja znanosti: antropolozi, sociolozi, filozofi i povjesničari koji medicini pristupaju više kulturološki, tretirajući različite medicinske sustave kao kulturne konstrukcije.²

¹ Članak je djelomice skraćeni rad objavljen u Sociologiji sela 165-166(3-4)/2004

² Budući da svaka kultura ujedno stvara i teorijski sustav koji nam omogućuje razumijevanje bolesti, antropolozi se zalažu da se i za liječenja u nezapadnjačkim kulturama, koja su se najčešće proučavala u sklopu istraživanja vjerovanja i magije, koristi termin medicina.

Od šezdesetih godina 20. stoljeća, istraživanja vezana uz medicinska shvaćanja nezapadnjačkih kultura daju osobit doprinos razvoju antropološke i etnološke misli. Antropološki orijentirana istraživanja medicinske sustave shvaćaju kao semantičke, polazeći od pretpostavke da je definicija bolesti kulturna kategorija i sastavni dio općeg sustava simboličkih vrijednosti. Zato nam shvaćanje bolesti može poslužiti u razumijevanju semantičkog sustava drugih kultura budući da sve kulture podrazumijevaju određenu klasifikaciju bolesti, njezine simptome i liječenje. Uvjerenje da načini liječenja bolesti u nezapadnjačkim kulturama posjeduju svoju vlastitu racionalnost koja proizlazi iz svjetonazora različitog od našeg te da takvo liječenje može također biti funkcionalno i djelotvorno, značajan je doprinos medicinske antropologije.³ (Levi-Strauss, 1989:165-183; Otto, 1993:25-36).

Istraživanje narodne medicine europskih naroda imalo je drugačiji razvoj. Pojmovi narodna medicina, pučka medicina, seljačka medicina, tradicionalna medicina, prirodna medicina i sl. danas se često koriste kao sinonimi. Velik broj različitih pristupa istraživanju narodne medicine, kao i različite tradicije unutar pojedinih zemalja, doveli su do terminološke neujednačenosti. U ovom se radu koristi pojam narodna medicina jer on u istraživanjima kod nas ima već određeno povijesno i društveno značenje.

Potkraj 19. stoljeća, u vrijeme kad se etnologija kod nas pokušava utemeljiti kao znanstvena disciplina, proučavanje narodne kulture uglavnom se odvijalo u odnosu prema elitnoj kulturi. Kad se govorilo o narodnoj kulturi, u prvom se redu mislilo na seljačku kulturu, karakterističnu za seljačko stanovništvo u predindustrijskom razdoblju.⁴ Oblici izražavanja u narodnoj kulturi uspoređivali su se s analognim oblicima u «gospodskoj kulturi». Usporedna kategorija za narodnu medicinu postala je školska, znanstvena, ortodoksna, konvencionalna ili, kako se danas najčešće naziva, službena medicina.⁵

Razlika između službene i narodne medicine očituje se u naobrazbi, znanju i društvenom statusu onih koji prakticiraju narodnu medicinu kao i njihovih pacijenata. Naravno, postoje ljudi koji se bave medicinskom praksom i potječu iz puka, ali to nužno ne znači da se uvijek radi o narodnoj medicini. Postupke liječenja koji proizlaze iz osobnih uvjerenja i individualnih praksi ne možemo smatrati narodnom medicinom. Pod pojmom narodna medicina podrazumijevali su se oblici liječenja, to jest pojmovi

³ Takav stav izaziva i moralne dvojbe. Mnoge prakse, beskorisne ili čak štetne s medicinskog gledišta zapadne kulture, racionaliziraju se kao nešto što je «drugačije». Za razliku od medicinskih stručnjaka, koji se zalažu za dovođenje humanitarne pomoći i sprečavanje bolesti u nerazvijenim zemljama, antropolozi dvoje oko toga treba li se uplitati u shvaćanja bolesti pripadnika drugih kultura ili naprosto promatrati i proučavati njihovu kulturu.

⁴ Suvremena etnologija i antropologija ne bave se više samo seljačkom kulturom, već svim nižim društvenim slojevima, odnosno neslužbenim oblicima kulture.

⁵ «Službena se medicina temelji na shvaćanju tijela i njegova djelovanja onako kako ga shvaćaju zapadna društva. Radi se o pojmovima bolesti i zdravlja koji su politički i kulturno prihvaćeni u određenoj sredini od strane institucionaliziranog zdravstvenog sustava, kojeg je državna administracija priznala i uključila u službeni obrazovni sustav i zdravstvenu skrb dotične države. Službena medicina priznaje samo one terapeutske postupke čija se djelotvornost može utvrditi kliničkim eksperimentom. Takvi načini liječenja temelje se na znanstvenim, racionalnim premisama ili hipotezama.» (Rozman, Godec prema Židov, 2000:140).

o bolesti i zdravlju, koji se temelje na pučkim tradicijama i koji su kolektivni, odnosno svojstveni cijeloj zajednici u određenom razdoblju.

S druge strane, ono što danas nazivamo neslužbenom medicinom, prilično je neodređen pojam. Kao sinonimi najčešće se koriste pojmovi alternativna i komplementarna medicina, nekonvencionalna medicina, neortodokсна medicina, holistička medicina.⁶ Kod nas je najuobičajeniji naziv alternativna medicina u smislu zasebnog medicinskog sustava koji podrazumijeva različite preventivne, dijagnostičke, terapijske i rehabilitacijske metode. Neke od tih tehnika odbacila je školska medicina u ranijim razdobljima ili su to metode karakteristične za druga društva i kulture. U zapadnim zemljama najčešći je naziv komplementarna medicina,⁷ što podrazumijeva spajanje sa službenim zdravstvenim sustavom u smislu dopune postojećim službenim terapijama.

Osnovni načini liječenja u narodnoj medicini bili su liječenje biljem, magijom kao i liječenja temeljena na religioznim uvjerenjima, a to su ujedno načini kojima i današnja alternativna medicina liječi svoje pacijente. Mnogi magijski postupci i vjerovanja koji su pripadali praksi narodne medicine, danas se nazivaju ezoterikom i tretiraju kao dio alternativne medicine.

Autori koji su se bavili problematikom službene i neslužbene medicine nemaju jedinstven stav prema današnjem shvaćanju narodne medicine. Dok jedni smatraju alternativnu medicinu modernim oblikom narodne medicine, drugi ukazuju na to da je današnji kontekst u kojem se koristi alternativna medicina, premda podrazumijeva i metode narodne medicine, bitno drugačiji od onog u 19. i početkom 20. stoljeća, pokazujući kako današnja upotreba narodne medicine ima drugačije ideološke, gospodarske i društvene pretpostavke (Židov, 2000:151). Ja sam također sklonija prihvatiti ovo drugo mišljenje.

Predmet, metoda i cilj istraživanja

Ovaj rad dio je šireg istraživanja o narodnoj medicini u Hrvatskoj, u obliku u kojem se ona prakticira od kraja 19. stoljeća do danas.⁸ Cilj je istraživanja bio prikupiti po-

⁶ Tijekom 20. stoljeća nazivi za neslužbenu medicinu mijenjali su se; od nadriliječništva (početkom stoljeća pod nadriliječništvom su se uglavnom podrazumijevale prakse narodne medicine) preko alternativne medicine sedamdesetih godina do komplementarne medicine devedesetih, što na neki način svjedoči o procesu sve većeg javnog prihvaćanja i priznavanja neslužbene medicine.

⁷ U svibnju 1997. Europski parlament usvojio je Rezoluciju o neslužbenoj medicini. Rezolucija preporučuje uključivanje osnova neslužbene medicine u službenu liječničku edukaciju i podržava daljnja istraživanja u tom smjeru (Buklijaš, 1999:1).

⁸ Najveći dio podataka o narodnoj medicini iznesenih u tekstu, prikupljen je u razdoblju između 2000. i 2001. godine kada sam zajedno s kolegicom Mirjanom Randić pripremala izložbu *Narodna medicina*. U tom

datke o različitim shvaćanjima bolesti, te različitim praksama liječenja i vjerovanjima povezanim s njime u seoskim i gradskim sredinama u Hrvatskoj. Osobitu pažnju u ovom radu posvetila sam praktičarima narodne medicine, kao i njihovoj ulozi u zajednici u kojoj žive i djeluju. Željela sam ispitati tko su današnji pacijenti koji koriste usluge praktičara narodne medicine i zašto. U radu se pokušavaju utvrditi njihove funkcije i promjene tih funkcija tijekom vremena. S obzirom da je danas kontekst narodne medicine bitno izmijenjen te da je ponuda alternativnih načina liječenja puno veća nego prije sto godina, nastojala sam istražiti one tradicije koje su postojale u našim krajevima u prošlosti, a postoje i danas, kako u gradu tako i na selu.⁹

Podaci prikupljeni terenskim istraživanjem uspoređeni su i upotpunjeni starijom građom s istog područja, iz vremena prelaska 19. u 20. stoljeće. Ta je građa najvećim dijelom objavljena u Zbornicima za narodni život i običaje južnih Slavena.¹⁰ U Zbornicima postoji mnoštvo podataka o liječenju, posebno u monografskim prikazima Otoka kod Vinkovaca, Vrbnika na Krku, Samobora, Prigorja, Poljica i Bukovice, gdje se uz pojedinu bolest navode i različite metode liječenja. Svakodnevni život, pa tako i bolest u spomenutim su monografijama prikazani vrlo realistično. Osobito su dragocjeni podaci u kojima su izneseni stavovi o praktičarima narodne medicine.

Osim toga, u Zbornicima su objavljene i neke ljekaruše¹¹ s područja Hrvatske, koje potječu iz 18. i 19. stoljeća, pa stoga predstavljaju važan dokument za praćenje kontinuiteta određenih pojava. Premda se važnim kriterijem razgraničenja između znanstvene i narodne medicine smatrala usmenost,¹² upravo nam ljekaruše kao i pučke knjižice i kalendari svjedoče da se narodna medicina u prošlosti, kao ni ona u sada-

vremenu bile smo na ispitivanjima u Lici, Slavoniji, Podravini, Međimurju, Zagrebu i zagrebačkoj okolici, okolici Samobora, Zadru i zadarskoj okolici, Istri i Posavini. No istraživanjem narodne medicine bavila sam se i u okviru timskih muzejskih istraživanja (Žumberak 1995./1996., Pisarovina 1997., Gorski kotar 2003., Ivanić Grad i okolica 2003./2004.). Dio tih istraživanja prezentiran je izložbom "Narodna medicina", popratnim katalogom i filmom o ljudima koji se bave liječenjem koristeći tehnike i metode narodne medicine. Sva prikupljena građa pohranjena je u Dokumentaciji Etnografskog muzeja u Zagrebu.

⁹ Osobito u istraživanju narodne medicine postajemo svjesni koliko je teško proučavati narodnu kulturu kao zasebni fenomen. Iste stavove, prakse i vjerovanja vezana uz zdravlje i bolest koji su svojstveni nižim slojevima mogu dijeliti i pripadnici viših slojeva.

¹⁰ *Zbornike* je izdavala Jugoslavenska akademija znanosti i umjetnosti, a počeli su se tiskati na prijelazu iz 19. u 20. stoljeće, kada sazrijeva misao o narodopisu ili narodoslavlju kao znanstvenoj disciplini, pa Akademija potiče proučavanje narodnog života u svim njegovim oblicima. Godine 1898. u drugoj knjizi *Zbornika* objavljena je uputa o načinu prikupljanja podataka pod naslovom *Osnova za sabiranje i proučavanje građe o narodnom životu*, koju je sastavio Antun Radić. Na temelju Radićeve upitnice skupljena je vrijedna etnografska građa.

¹¹ *Ljekaruše* su zbirke recepata i uputa za liječenje bolesti ljudi i životinja. Najčešće su ih pisali svećenici kao pripadnici najobrazovanijeg sloja često dopisujući i metode pučke medicine.

¹² Osim toga, valja naglasiti da se tradicija koja je postojala u prošlosti nije nikad neizmijenjena prenosila iz generacije u generaciju. Pri svakom prijenosu dodavali su se neki novi elementi, često iz tada suvremene službene medicine, nešto bi se izmijenilo ili izostavilo. Između elitne i neelitne kulture oduvijek je postojala komunikacija. Usporedbe pisanih popularnih tekstova o liječenju ljudi i životinja, tekstova školske medicine i zapisa usmene predaje s područja narodne medicine pokazuju prožimanje usmenih i pisanih tradicija (Loux, 1993:306).

šnjosti, ne sastoji samo od starih tradicija prenošenih usmeno s generacije na generaciju, već i od elemenata prenošenih knjigama. Te knjižice po mišljenju mnogih autora, predstavljaju prelaz iz pučke u znanstvenu medicinu (Thaller, 1938: 38; Šušnić-Filker, 1992:306).

Tijekom 20. stoljeća naši su se etnolozi narodnom medicinom uglavnom bavili usputno, pa radovi o toj temi najčešće sadrže građu na razini opisa. U istraživanjima u Hrvatskoj narodna se medicina uglavnom shvaćala kao sklop neobičnih recepata i praznovjerja, a ne kao cjelovit sustav. Premda su se drugi fenomeni relevantni za etnologiju tumačili u svjetlu različitih teorija karakterističnih za razvoj etnološke misli u 20. stoljeću, s područja medicine nije bilo takvih radova. Ipak treba napomenuti da su se u okviru proučavanja običaja, vjerovanja i magije kao i usmene književnosti interpretirali i podaci relevantni za narodnu medicinu, premda su težišta istraživanja bila na drugim temama (Bošković-Stulli, 1975:205-231; Čulinović-Konstantinović, 1988: 95-103; Čulinović-Konstantinović, 1989; Bošković-Stulli, 1991:124-160; Belaj, 1992: 215-219). U novije vrijeme izašle su još dvije knjige vrlo značajne za proučavanje magijskog i religijskog segmenta narodne medicine (Čiča, 2001; Španiček, 2002).

Drugi dio korištene građe odnosi se na tekstove koje su pisali liječnici. Kod nas su narodnu medicinu najviše istraživali liječnici i farmaceuti, pa su i klasifikacije bolesti i liječenja u narodnoj tradiciji stvorene po uzoru na službenu medicinu tog vremena. Ta je činjenica imala za posljedicu odvajanje racionalnog od iracionalnog aspekta u liječenju. Znanstvenu je medicinu i farmaciju, naravno, više interesirao racionalni faktor zbog izmjerljivosti učinka ili djelotvornosti pojedinih pripravaka, pa su istraživanja provedena s tim ciljem u pravilu zanemarivala simbolične elemente poput gesta (npr., znak križa ili pentagrama), važnosti boja ili simbolike brojeva. Etnolozi i folkloristi pak zapostavljaju racionalni karakter liječenja, a više pažnje posvećuju magiji i tumačenjima tih pojava kao prežitka nekog kulta. Valja zato napomenuti da su u narodnoj medicini racionalni i iracionalni elementi nedjeljivi, pa kad se ispituju odvojeno, oni gube smisao.¹³

Pišući monografije o svom kraju, mnogi su autori željeli seoski život i običaje prikazati u što boljem svjetlu, pa o higijeni, spolnom životu, alkoholizmu ili nekim negativnim pojavama nisu željeli pisati. Zato nam liječnički prikazi, osobito slikovna građa, predstavljaju vrlo važnu komparativnu građu.

Najveći dio korištene građe objavljen je tridesetih godina 20. stoljeća u Liječničkim vjesnicima. Također valja spomenuti filmove i fotografije koje je po hrvatskim selima u istom razdoblju snimila Škola narodnog zdravlja "Andrija Štampar". Osnovna djelatnost Škole bila je proučavanje i podučavanje naroda (kako se tada govorilo), čime je uvelike utjecala na usvajanje modernog shvaćanja zdravlja i bolesti. Škola je po-

¹³ Puno ljudi danas brani narodnu medicinu s pozicija službene medicine pa saznanja službene medicine o djelotvornosti nekog narodnog lijeka koriste tako da narodnoj medicini daju novi smisao i sadržaj.

krenula i niz edukativnih akcija s ciljem poboljšanja higijenskog i zdravstvenog stanja širokih narodnih slojeva (Brenko, Dugac, Randić, 2001:191-211).

Način prikupljanja podataka

Pri istraživanjima na terenu najčešće smo koristile uobičajene etnografske i antropološke tehnike poput razgovora s kazivačima, promatranja ponašanja i sudjelovanja, te provjeravanja etnografskih i drugih podataka i snimaka. Tijekom spomenutih istraživanja razgovarale smo sa stotinjak ljudi od kojih su dvadeset praktičari narodne medicine koji još uvijek koriste tradicijske tehnike i postupke.

Na početku naših istraživanja oblikovale smo upitnik. Pitanja u upitniku, uz standardne opće podatke o ispitaniku, odnosila su se na poznavanje određenih metoda liječenja u narodnoj medicini, na poznavanje ljekovitog bilja i drugih sredstava za liječenje, magijske i religijske prakse i vjerovanja, higijenu, spolni život, porod, njegu djece i odgoj, odnos prema starijim i bolesnim osobama, odnos prema službenoj medicini i sl. Razgovori s kazivačima najčešće su snimani na kazetofon, no ako je prisustvo kazetofona uznemiravalo ispitanike, odgovore smo zapisivale rukom u bilježnicu. Naravno da nije bilo moguće sva pitanja predviđena upitnikom postaviti svakom kazivaču. To je ponajprije ovisilo o raspoloživom vremenu i psihofizičkom stanju kazivača. Primijetile smo da su žene općenito spremnije na razgovor, pa su razgovori s njima trajali duže no s muškarcima. Kroz razgovore o važnim životnim trenucima - rođenju, vjenčanju i smrti, iznosile bi ne samo emocije, već i svoja razmišljanja i zaključke do kojih su došle tijekom života. Pričajući o vjenčanju, rođenju i smrti, zapravo su pričale svoj život i na taj način iznosile i niz drugih podataka i stavova koji su itekako važni za interpretaciju građe. S muškarcima su se razgovori najčešće vodili o njihovom poslu i znanjima vezanim uz posao. Premda je cilj istraživanja bio obuhvatiti sve dobne skupine, zbog demografskih osobitosti pojedinih područja to nije bilo moguće. Ponekad smo istodobno razgovarale s više kazivača, što se pokazalo jako dobrim, jer su jedan drugog poticali i upotpunjavali. Sa starijim osobama uspješnim se pokazao razgovor u prisustvu pripadnika mlađe generacije, koji su već poznavali njihove životne priče i podsjećali ih na momente značajne za temu, tako da su kazivači odgovorili i na ono o čemu u početku nisu željeli govoriti ili se nisu mogli sjetiti. U društvu sebi bliskih osoba i sami su se ispitanici osjećali sigurnije i opuštenije. No kad se radilo o intimnim pitanjima, kao što su ženska iskustva vezana uz spolni život, trudnoću, porod i pobačaj, uvijek smo nasamo pričale s kazivačicama, jer o nekim aspektima svoga intimnog života nisu željele govoriti pred najbližom rodbinom. Osim toga, valjalo je najprije uspostaviti odnos povjerenja, što je bilo moguće tek poslije nekoliko uzastopnih posjeta.

Sličan problem pojavio se i kod pitanja vezanih uz liječenje magijskim postupcima. U prvom razgovoru obično bi nam kazivači rekli da oni više u to ne vjeruju ili da su čuli da je neka susjeda išla skidati uroke, ali da o tome ništa ne znaju. No kad bismo se više zbližile s kazivačima, saznale bismo živu istinu, odnosno uslijedile bi priče o

različitim događajima čije je tumačenje bilo magijskog karaktera. Kazivači su nam često pokazivali i različite predmete koje nose uza se za zaštitu od zlih sila, a dobili su ih od praktičara narodne medicine koji se bave liječenjem magijskim postupcima ili su to bili religijski predmeti doneseni s hodočašća. Praktičari narodne medicine koji u liječenju koriste magiju nerado pristaju na razgovor. Stoljetni negativni stav Crkve i službene medicine prema toj djelatnosti očituje se u duboko ukorijenjenom strahu da se radi o nečem grešnom, zabranjenom ili primitivnom. S druge pak strane, otkrivanje čarobnih formula, odnosno glasno izgovaranje, poništava njihovo terapeutsko djelovanje.

Za potrebe izložbe bilo je važno snimiti što više građe foto- i video-kamerom. Tu se također pojavio problem, jer neki praktičari narodne medicine nisu željeli javno nastupati bojeći se posljedica, budući da je njihova praksa nelegalna. Pristali su tek kad smo ih uvjerile da im nećemo prikazivati lice i da ćemo im modulirati glas. Valja istaknuti da je kod nekih kazivača upravo nastup pred kamerom bio presudan da uopće pristanu na razgovor s nama. Osim toga, morale smo dobiti i dopuštenje pacijenata da možemo snimati. Ponekad smo se i same podvrgavale terapiji. Veliku su nam pomoć pružili i suradnici Muzeja koji su pronalazili kazivače i pripremali ih za naš dolazak.

Opis građe

U našim dinarskim krajevima na nekoliko je mjesta zabilježena izreka: “Koji čovjek od 30 godina ne zna sebe liječiti, nije dostojan da živi.” No, kao i u svim ostalim znanjima, tako su i u liječenju bolesti postojali pojedinci koji su se isticali svojom darovitošću, sklonošću prema liječenju te željom za pomaganjem stečenim i naslijeđenim znanjem. Praktičari narodne medicine s kojima smo razgovarale predstavljali su vrlo šaroliku grupu s obzirom na metode, na razumijevanje svog mjesta u lokalnoj zajednici, kao i načine kako ih doživljava njihova okolina. Među njima je bio podjednak broj muškaraca i žena. Svi su oni bili obiteljski ljudi, koji sada pripadaju srednjoj i starijoj dobnoj skupini. Najmlađi praktičar narodne medicine rođen je 1967. godine. Većina je započela javno djelovati potkraj puberteta. Iznimka je kazivačica koja je počela liječiti u dobi od samo pet godina. Tada ju je starija osoba u selu bila poučila molitvi na vodu, to jest magijskoj formuli za liječenje protiv uroka.¹⁴

Nitko od ispitanih praktičara nema za sada potencijalnog nasljednika.¹⁵ Dok se osoba aktivno bavi liječenjem, osobito magijskim, nikoga ne uvodi u posao jer postoji vje-

¹⁴ Izgovorivši tu formulu glasno pred kamerom, kazivačica je izgubila moć da njome liječi, ali nije joj žao, jer misli da je tijekom života dovoljno pomagala. Sjećajući se vremena kad se najaktivnije bavila liječenjem, kaže da joj je najgore bilo kad bi na televiziji počeo dobar film, a ona morala prekinuti gledanje, jer je netko zatražio da za njega izmoli molitvu (TZ, 2001).

¹⁵ Kćerka jedne praktičarke narodne medicine, koja namješta kosti i masira, radi kao fizioterapeutkinja. Po riječima kazivača, uživa ugled kao stručna i obrazovana osoba, ali i kao kći spomenute praktičarke te joj se ljudi obraćaju s velikim povjerenjem.

rovanje da će formula izgubiti moć ako je još netko pozna. Običaj da se znanje o tehnikama rada čuva u obitelji i prenosi mladima tek potkraj životnog vijeka najstarije generacije, karakterističan je i za šamanističke metode liječenja. Zato su takva znanja češće nasljeđivali unuci nego li sinovi i kćeri. Razlog je izbjegavanje odavanja formule i konkurencija. Stariji podaci pokazuju da žene najčešće prenose svoja znanja najspособnijoj snahi, ukoliko im nijedna kći nema interesa za liječenje. Osim toga, snaha je nasljeđivala svekrvu jer je udajom ostajala u kući, a kćerka je udajom odlazila. Od kazivačica s kojima smo razgovarale, pet ih je vještinu liječenja naučilo od majke, dok je jedna po smrti muža preuzela njegov posao. To odudara od uobičajenih normi, jer se radi o barbirenju, koje je u našim krajevima tradicionalni muški posao. Muškarci su vještinu prenosili sinovima ili nećacima, no od ispitanika samo su trojicu očevi uveli u posao. Jedan je vještinu stekao radeći sa susjedom, a u jednom slučaju, zbog osobitog zanimanja unuka za različite vrste tradicijskog liječenja, baka je bila ta koja ga je poučila liječenju biljnim i životinjskim sredstvima te magijskim postupcima.

Potreba da se pomaže bližnjima kod dvoje se praktičara javila u vezi s nekom vrstom preobraćenja, koje je uslijedilo poslije posjeta Međugorju, odnosno po ukazanju Majke Božje u snu. Predodređenost za taj posao imala je samo jedna osoba koja je po rođenju krsnik.¹⁶ Krsnici su po funkciji bliski, ali po mističnim osobinama različiti od ostalih seoskih praktičara narodne medicine.

Liječenjem se profesionalno bavio samo jedan od praktičara narodne medicine koje smo upoznale za vrijeme istraživanja. Ostalima je to bilo sporedno zanimanje uz uobičajene seljačke poslove. Jedna je ispitanica radnica u obližnjoj tvornici, a jedan je praktičar narodne medicine općinski službenik. Nitko od kazivača nije imao nikakvu formalnu medicinsku naobrazbu. Većina je pohađala samo osnovnu školu. Dvoje je završilo veterinarski tečaj, pa su uz pomoć knjiga stekli znanje i o ljudskoj anatomiji. Oni su ljudima znali namjestiti iščašeni zglobovi ili slomljenu kost. Neki od njih imaju vrlo ograničeno znanje, koje i ne pokušavaju proširiti, a specijalizirani su samo za određene metode i tehnike. To su uglavnom praktičari čiji je značaj bio više lokalnog karaktera. Jedino se za troje može reći da uživaju regionalni ugled. Bavljeno liječenjem kod njih je najčešće želja za pomaganjem i osjećaj da su dovoljno sposobni to činiti na temelju naslijeđenog i stečenog znanja.

Praktičari narodne medicine s kojima smo razgovarale nemaju jedinstven stav prema službenoj medicini. Dok su jedni svjesni svojih mogućnosti i ograničenja, pa liječnike službene medicine ne doživljavaju kao konkurenciju, drugi pak misle da ni suvremena medicina ne može pomoći u teškim slučajevima i nastoje mistificirati svoje sposo-

¹⁶ Zbog polarizacije na krsnike i štrige (vještice) u Istri i Primorju bilo je od presudne važnosti utvrditi kako se tko rodio. Krsnici se obično rađaju u bijeloj košuljici (ostatku vodenjaka), za razliku od štrige ili štrigona, rođenih u crnom ili crvenom mjeħuru. Osobine djece koja su tako rođena poznata su i zabilježena i drugdje u svijetu. Negdje takvo rođenje nosi sreću, a negdje zlu kob. Njihovo rođenje glasno se objavljivalo. Kad navršše određenu dob, pripadnici njihove sekte pozivaju ih prema utvrđenom obredu u svoje društvo. Krsnici su neka vrsta mjesnih zaštitnika, a naročito je bila važna njihova iscjeliteljska uloga. Smatra se da krsnici imaju jaču snagu od štriga (Bošković-Stulli, 1975:224).

bnosti. Velik broj njih naglašava kako ih za pomoć nekad zamole i liječnici iz obližnjih medicinskih ustanova. Jedna je praktičarka za svoje zasluge čak dobila i službeno priznanje: Plaketu općine Pitomača. Praktičari narodne medicine vole pričati kako su pomogli ljudima koje su liječnici godinama sasvim pogrešno liječili ili pak onima kojima su trebale biti amputirane ruke ili noge, ali su ih oni svojom intervencijom spasili (TZ, 1996-2004).

Bez obzira na to kako su stekli svoje znanje, praktičare narodne medicine možemo podijeliti u nekoliko kategorija.

Načini liječenja

Već se u prošlosti na našim prostorima spominju i cijene ljudi koji se bave narodnom kirurgijom. To su tehnike vezane uz namještanje slomljenih kostiju, vidanje rana, barbirenje, a u literaturi ima podataka i o skidanju mreine, trepanaciji, vađenju kamena i sl. (Bazala, 1943:122-123). Kirurške su zahvate u pravilu obavljali muškarci. O njima se govori vrlo pohvalno i naglašava kako njihova vještina iz vremena ratovanja s Turcima nimalo ne zaostaje za vještinom stručno školovanih liječnika (Grmek, 1958:581). Do 19. stoljeća kirurške intervencije, kao i puštanje i zaustavljanje krvi, bile su isključivo u djelokrugu akademski neobrazovanih pojedinaca. Nazivali su se barbiri ili chyrgugi (Hajduk, 1973:2).¹⁷ Oni su se svrstavali u kategoriju profesionalaca, po časti i položaju bliskih liječničkom zvanju. Zato su i uživali veći ugled od ostalih praktičara narodne medicine. Mnogi stvarni uspjesi poticali su ljude da im se obraćaju s velikim povjerenjem. Barbiri su ujedno bili i jedini koji su imali tarifu i svoje usluge novčano naplaćivali. Tridesetih godina 20. stoljeća Škola narodnog zdravlja "Andrija Štampar" pokrenula je niz propagandnih akcija protiv nadriliječništva, smatrajući ga osobito štetnim za seosko stanovništvo. No oni se najmanje okomljuju na ovu vrstu narodnih liječnika. Njihove su kritike bile više usmjerene prema nehigijenskim okolnostima u kojima su se odvijali takvi zahvati (Vrus, 1940:604). Na početku naših istraživanja bile smo uvjerenе da barbiri više ne postoje, no na naše veliko iznenađenje otkrile smo da na samom području Zagreba i Samobora još uvijek ima ljudi koji se time bave i koji imaju svoje stalne mušterije (TZ, 2001).

Osobe koji se danas bave namještanjem iščašenih i slomljenih udova, tzv. kostolomci i ramnači, još su uvijek vrlo cijenjeni. Iznenađuje vještina i hrabrost kojom se upuštaju u namještanje, na primjer, iščašene ključne kosti ili kukova novorođenčadi (TZ, 2001). U tu kategoriju spadaju i oni koji ravnaju kičmu, dižu želudac i rade različite masaže. Takvim liječenjem danas se najviše bave žene. U liječničkoj literaturi o njima se govori kao empiricima, no tijekom istraživanja primijetile smo da oni također u svoje liječenje uključuju i neke druge metode vezane uz iracionalne načine liječenja.

¹⁷ Zanimljivo je da se kirurzi danas nalaze u samom vrhu liječničke hijerarhije.

Od naših ispitanika najveći ugled imaju dvoje praktičara koji pripadaju upravo toj kategoriji. To su Sofija Sesvečan iz Pitomače i Pere Bajčić iz Brusića (otok Krk).

Prije početka zahvata praktičari narodne medicine uvijek se obraćaju Bogu za pomoć, a svojim pacijentima preporučuju da se mole Majci Božjoj ili kojem svecu zaštitniku. Na neki način pozitivan ishod liječenja ovisi o Božjoj volji, odnosno o vjeri pacijenta. Kada liječenje duže traje, oba spomenuta praktičara također traže od svojih pacijenata da se pridržavaju i crkvenih zapovijedi. Moralno-religiozne stavove Sofija Sesvečan pokušala je i pismeno uobličiti. Za vrijeme boravka na terenu pokazala nam je rukopis knjige o svom životu pod naslovom "Veliko srce bake Soke", koji je upravo bio priređen za tisak i iz kojeg je vidljiv njen stav po kojem okretanje od Boga, nepoštivanje Božjih zapovijedi i crkvenih autoriteta vodi u moralnu propast, grijeh i kaznu u vidu bolesti. Knjiga započinje rečenicom: "U našoj je kući na prvom mjestu bio Bog." Oba su praktičara u znak zahvalnosti Bogu podigli kapelice.

Osobito povjerenje koje uživa Pere Bajčić može se protumačiti ne samo time što potječe iz obitelji koja se liječničkim poslom uspješno bavi generacijama, već i time što je njegova moć u svijesti ljudi pojačana činjenicom da je on po rođenju krsnik.¹⁸ Njemu se ljudi obraćaju i kad imaju probleme u braku te on za njih radi neku vrstu bračne psihoterapije. Jedno je od uobičajenih pitanja supružnicima idu li nedjeljom na misu. Od ljudi s cijelog otoka slušale smo priče o njemu kao poštenom, dobrom i nadasve skromnom čovjeku. Zanimljivo je da mu ljudi još i danas donose robu bolesnika da moli nad njom, jer misle da je njegova molitva "jača" od svećenikove. Po narodnom vjerovanju, svećenici mogu utjecati na bolesti i nečiste sile koje ih uzrokuju s obzirom na moći koje im daje njihovo zvanje i položaj (Filipović-Fabijanić, 1968:68). Zato se svećenicima nosila roba bolesnika da mole nad njom (Ivanišević, 1904:34).¹⁹

Liječenje biljem također se nalazi na granici racionalnog i iracionalnog. Biljari i biljarice mogu s biljem postupati vrlo empirijski, a ujedno vjerovati u magijska načela. Liječenje biljem gotovo je redovito pretpostavljalo nadnaravna svojstva pojedinog raslinja kao i osoba koje ih poznaju. U prošlosti je liječenje biljem bio pretežno ženski posao.²⁰ Podaci iz tridesetih godina 20. stoljeća govore o biljarima, muškarcima, čiji ugled i slava nadržavaju okvire lokalnih zajednica. Najistaknutiji među njima bio je Sadik Sadiković. Budući da je to vrijeme snažne kampanje protiv nadriliječništva, če-

¹⁸ Kako se funkcija *krsnika* smatrala važnom govori nam sljedeći primjer: "Na Sušaku se za vrijeme prvog svjetskog rata pojavio liječnik prezimenom Kresnik; sa svih strana ljudi su dolazili, čekali su čitave dane i noći u redu, samo da se mogu u njega liječiti jer on je i *krsnik* i pravi doctor." (Bošković-Stulli, 1975:212-213).

¹⁹ Slično je zabilježeno sredinom 20. stoljeća i u dinarskim selima gdje se bolesnikova roba donosila kovaču. Posebna snaga čovjeka koji oblikuje metal u vatri kao magijskom mediju bila je dovoljna podloga vjerovanju da takav čovjek ima natprirodne sposobnosti pa da prema tome može i liječiti (Čulinović-Konstatinović, 1989: 77).

²⁰ Dalmatinski su statuti s početka 13. stoljeća vračeve nazivali *herbarii* što je ranije imalo značenje biljara, a kasnije čarobnjaka. Naziv *herbaria* za čarobnjaštvo svjedoči o tome da se tadašnja predodžba o čarobnjaštvu temeljila na vjerovanju u tajanstvenu moć ljudi koji se bave liječenjem biljem. Razvitkom školske medic-

sto u medicinskom tisku tog vremena nailazimo na vrlo negativno intonirane članke o njemu. Među biljarima bilo je specijalista za pojedine bolesti. U njihovim obiteljima su se generacijama čuvali i usavršavali pojedini recepti po kojima su bili nadaleko poznati, poput čaja protiv žutice ili masti protiv različitih kožnih bolesti. Kako bi terapiju učinili što djelotvornijom, neki su biljari davali bolesnicima obajanu travu ili izgovarali magijske formule dok čiste rane (Filipović-Fabijanić, 1968:68).

Premda je najčešća asocijacija kad se radi o narodnoj medicini liječenje biljem, za vrijeme terenskog istraživanja u razdoblju 1995.-2004. godine u selima nismo naišle ni na jednog praktičara narodne medicine koji bi pripadao toj kategoriji. Dok u gradovima, pod parolom prirodnog liječenja, od svih grana alternativnog liječenja upravo fitoterapija uživa najširu podršku pacijenata, ali i određenog dijela predstavnika službene medicine, na selima smo o biljarima njihovog kraja saznavale samo iz sjećanja kazivača. S druge strane, sretale smo ljude koji nisu nositelji narodne tradicije u smislu prethodnih, ali ipak ih se na neki način može smatrati dijelom te tradicije. Njihov rad treba istaknuti jer su u svojoj sredini poštovani, a njihovi savjeti vrlo cijenjeni. Radi se o ljudima koji su znanje o ljekovitom bilju učili iz knjiga. Knjige koje se najčešće spominju su: "Narodno zdravlje" Sadika Sadikovića, "Zlatna knjiga ljekovitog bilja" Zlatana Gurskog, "Liječenje čajevima ljekovitog bilja" Jovana Tučkova, "Prirodno liječenje biljem i ostalim sredstvima" Nikole Gelenčira, "Priručnik za skupljanje ljekovitog bilja" Simona Ašića i sl.

Najveća je po brojnosti i funkciji kategorija onih koji sebe smatraju posrednicima između bolesnika s jedne strane i demona koji izazivaju bolesti, s druge. Njih i danas ima gotovo u svakom selu, no oni i njihova okolina rijetko odmah priznaju čime se bave. Svi praktičari narodne medicine koji liječe magijskim postupcima i s kojima smo razgovarale idu u Crkvu, a neki su čak naglašeno pobožni. Jednoj je praktičarki Majka Božja rekla u snu kako da liječi bradavice. Radi se o poznatom magijskom obrascu na tom području da se bradavice u vrijeme mjesečevih mijena mažu jabukom.²¹ Praktičar, koji liječi uroke rašljama tako da stimulira pozitivnu energiju, svoju je sposobnost osjetio u Međugorju prilikom hodočašća. O odnosu magije i religije bit će još govora u daljnjem izlaganju. Unutar ove kategorije također ima specijalista, recimo onih koji čarobnom formulom liječe zmijske ujede, poganicu (bolest očiju) ili različite kožne bolesti. No za uspjeh terapije važno je objasniti i društvenu funkciju koju su takvi ljudi obavljali.

ne kod naših je vrača slabila primjena empirizma, a jačala čarobnjaštva. Dva su stoljeća bila potrebna da riječ *vrač* ili *herbarius* izgubi značenje 'liječnik' i dobije značenje 'čarobnjak'. Vračarski se rad potkraj 14. stoljeća počeo smatrati ženskim poslom, koji se pretežno zasniva na čaranju odnosno magiji (Ferri, 1954: 140-141).

²¹ Rabljeni komad jabuke mora se preko glave baciti negdje na stranu (u grmlje ili jarak) ne gledajući gdje pada. Po analogiji, kako jabuka trune, očekuje se da i bradavice nestaju (TZ, 2000).

Društvena uloga praktičara narodne medicine

Već su klasična djela, poput Castanedinog “Učenja don Juana”, pokazala da se do izvanrednih spoznaja i razumijevanja kozmologije, magije, vjerovanja, etnobotanike, etnopsihologije i sl. neke zajednice može doći intenzivnom suradnjom samo s jednim kazivačem. Taj posebno talentirani pojedinac nosi u sebi čitavu sliku svijeta kojeg su drugi samo djelomice svjesni i samo ga fragmentarno mogu prenijeti (Supek, 1976: 58). U seoskim sredinama u proteklim stoljećima narodni su liječnici imali daleko veći broj uloga od one samog liječenja stanovništva. Njihov rad i znanje različito su vrednovani. Nekima su se podsmjehivali, nekih su se bojali, a neki su pak bili vrlo traženi i cijenjeni. Da bi osoba stekla ugled, najprije se njezina okolina morala uvjeriti u uspješnost njezina liječenja. Tako stečen društveni ugled ponajprije bi se čuvao pomaganjem suseljanima. Opisujući životne prilike u Prigorju početkom 20. stoljeća, Rožić spominje i praktičare narodne medicine u svom kraju pa kaže: “Oko ni drugač pošten čovek, unda takav čovek baš ni preštivan, i ničer ne drži da je to kunšt želudac ali ruku naravnati.” (Rožić, 1903:256). Bavljenje liječenjem pretpostavljalo je bolje poznavanje ljudi i prirode te zahtijevalo veću inteligenciju i pronicljivost osobe koja se time bavila. Strah od nadnaravnih sposobnosti takvih osoba opstao je pod utjecajem u prošlosti ukorijenjenih strahova od vještica, ali i od nerazumijevanja njihovih postupaka. Istraživanja provedena sredinom 20. stoljeća pokazuju da ti ljudi s manje zemlje i stoke žive podjednako dobro kao i drugi, iako ih zbog neposjedovanja veće imovine smatraju siromašnjima. Oni ipak uživaju veći ugled od drugih siromašnijih seljaka, a muškarci su ujedno poluprofesionalni zanatlije, spretniji od ostalih u svim vrstama popravaka, savjetnici za uzgoj i liječenje stoke, poznavatelji ljekovitog bilja, spretniji u klanju i pripremi mesa (Čulinović-Konstantinović, 1989:80). Oni su nerijetko i pokretači raznih aktivnosti u selu, dobri svirači, vješti graditelji (TZ, 1995-2004). Žene su, uz poznavanje bilja i magijskih postupaka, spretne domaćice, stočarice i poljodjelke, bolje kuharice od drugih, pa bi ih pozivali kao glavne kuharice na svadbe i druge svečanosti. One pomažu pri porodima i ženama izvan sela, njeguju bolesnike, liječe dječje bolesti, organizatorice su seoskih proslava, nastoje održavati seoske običaje i obrede, bolje poznaju norme društvenog ponašanja (Čulinović-Konstantinović, 1989:80).

To su, dakle, rodaci, susjedi, vješti muškarci i žene iz okolice koji su svojim sposobnostima pomagali oboljelima. U razgovoru s praktičarima narodne medicine i njihovim obiteljima došli smo do zaključka da je obavljanje liječničkog posla bila za njih neka vrsta dužnosti i obveze prema bližnjima, koja nije bila samo stvar njihovog izbora, već neka vrsta poslanja. Velik broj praktičara narodne medicine isticao se u svojoj sredini jakim individualnošću, ali im je upravo ukorijenjenost u kulturnu tradiciju omogućavala djelovanje (Španiček, 2002:278). Nijedan praktičar narodne medicine neće vratiti onoga tko je došao zatražiti pomoć. Peri Bajčiću, čuvenom kostolomcu s otoka Krka, ljudi dolaze u polje gdje radi da im namjesti iščašeni ili napukli zglob. U svako doba dana i noći on je spreman pružiti svoje usluge (TZ, 2001). Mnogi praktičari narodne medicine spremni su i sami posjetiti težeg bolesnika. Kao što Rožić opisuje na jednom mjestu, kad nekomu treba pomoć, samo kaže. “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

Lokalni su iscjelitelji obično već poznavali obiteljsku situaciju bolesnika. Ljudi su s njima imali kontakt bez obzira je li se tražila njihova liječnička pomoć ili ne. Budući da su dijelili istu društvenu sredinu, koristili su isti jezik u komunikaciji s pacijentima. Nitko od njih ne traži nagradu za svoj trud, ali je razumljivo da se na neki način valja odužiti. Oni koji primaju novčanu nagradu nikad ne određuju cijenu, već prihvaćaju nagradu u skladu s mogućnostima pacijenta. Međutim, također se podrazumijeva da taj iznos raste s ugledom narodnog liječnika (TZ, 1996-2004).

Postojali su dakako i komercijalno orijentirani iscjelitelji koji su putovali od sajma do sajma i tamo nudili svoje medicinske usluge. Najčešće su to bili putujući seoski barbiri. Neposjedovanje titule nadoknađivali bi vanjskim simbolima (bijela kuta, instrumenti, autoritativan i arogantan stav) koji su kod pacijenta trebali izazvati povjerenje temeljeno na percepciji liječnika kao stručnjaka (Rorbye, 1982: 58). Pojedini praktičari narodne medicine, naime, žele što je moguće više djelovati kao liječnici i zato pretjeruju upravo u onim stvarima koje asociraju na stereotipnu predodžbu liječnika.²³

Jedna od važnih holističkih koncepcija jedinstvo je vremena i mjesta. Mjesta gdje se rađa, umire, boluje, slavi, radi ili odmara nisu odijeljena. Unutar obiteljskih zajednica ljudi su od najranijeg djetinjstva stjecali znanja u odnosu prema tijelu i bolesti. Tu su se, osobito za žene, odvijale sve njihove aktivnosti.²⁴ Bolest se oduvijek smatrala nenormalnim događajem, nečim što narušava prirodni tijek života. Zato se uloga terapije ponajprije sastojala u pronalaženju značenja i objašnjenju bolesti, što je ujedno bio povratak skladu i ravnoteži. Bolesnikovo sudjelovanje temeljilo se na povjerenju neophodnom za ozdravljenje. Smještanjem rituala za ozdravljenje u okvire svakodnevnice, tijelo se ponovno vraća u obiteljski kontekst, u koherentan svijet djetinjstva što, ako i ne dovodi do izlječenja, stvara osjećaj olakšanja. Zato samo objašnjenje ozdravljenja obredom nije dovoljno jer sam sadržaj vjerovanja i nije toliko bitan kao društvena uloga koju iscjelitelj obavlja (Brenko, Dugac, Randić, 2001:35).

No, ako je društvena uloga iscjelitelja da olakša bolest i dade joj značenje, znači li to da su praktičari narodne medicine djelotvorni samo unutar konteksta određene kulture ili zajednice? Mogu li oni liječiti i današnje bolesti?

²² Nazivi za praktičare narodne medicine s obzirom na metode kojima se služe najčešće su bili: *babe, babice, babe vračare, vračтели, vračtelke, coprnjice i coprnjaki, štrige i štigoni, krsnici, vidari i vidarice, biljari i biljarice, travari, ramnači, kostolomci, barbiri* i sl. Za vrijeme naših terenskih istraživanja nikad nismo naišle da nekog praktičara narodne medicine nazivaju nekim od naziva koji sugeriraju njegovo bavljenje liječenjem osim za *barbira* čija nam je rodbina rekla da je njemu i na osmrtnici uz ime i prezime pisalo *barbir* jer je pod tim nazivom bio poznat u cijelom kraju (TZ, 2001).

²³ Premda nemaju formalnu medicinsku naobrazbu, neki praktičari narodne medicine prije određivanja terapije zahtijevaju da im pacijenti donesu nalaze i dijagnoze liječnika službene medicine i vode posebne kartoteke o svojim pacijentima. Na terenu smo također čuli o jednom svećeniku koji liječi ljude rakijama u kojima su različite mješavine ljekovitog bilja. Kad prima pacijente, redovito oblači bijelu kutu (TZ, 2001).

Bez obzira što su terapijski elementi različiti ovisno o kulturi, u njima se mogu pronaći i određene konstante. Značaj koji se pridaje krvi, utjecaj Mjeseca na ljudsko tijelo, načelo analogije kao i opreka između hladnog i toplog, pojavljuju se kao konstanta u mnogim kulturama, premda na različite načine (Loux, 1993:671). Narodna medicina posjeduje djelotvorne lijekove čija je vrijednost potvrđena empirijski, ali i kliničkim ispitivanjima. To isto vrijedi i za pojedine tehnike kao što su masaža i puštanje krvi. Do mnogih spoznaja u liječenju i pozitivnih iskustava narodna je medicina došla prije znanstvene. Praktičari narodne medicine došli su do niza ispravnih pretpostavki, na primjer: da kod pada ili snažnog udarca u glavu treba obaviti trepanaciju, da trule dijelove kosti i mesa treba odstraniti, da kod prijeloma valja imobilizirati kosti čvrstim zavojem, da rane treba čistiti, da mrenu s oka valja odstraniti, a mokraćni kamenac izvaditi, no pri izvođenju tih operacija nedostajalo je znanje o uzrocima oboljenja, osobito o antisepsi i infekcijama, do čega je i znanstvena medicina došla relativno kasno. Ali je zato metoda kojom su se služili kod nekih psihičkih oboljenja imala stvarne i trajne rezultate. Psihoterapiju,²⁵ koja se jednim dijelom temelji i na tome da "ljudima pomaže to u što vjeruju", praktičari narodne medicine odlično koriste (Filipović-Fabijanić, 1968:69).

No ono što najviše razlikuje narodnu od znanstvene medicine i što antropolozi naglašavaju kao najdjelotvornije sredstvo, svakako je činitelj društvene reintegracije. Tijekom istraživanja narodne medicine upoznali smo rodbinu čovjeka koji trenutno živi u Švedskoj i boluje od PTSP sindroma. Prema kazivanju njegovih rođaka, nikakve terapije koje je tamo dobivao nisu mu pomogle, a poboljšanje je uslijedilo tek kad je počeo piti čaj koji je za njega pripremio biljar iz njegovog kraja (TZ, 2002).

Magija i religija

Preplitanje magijskih i kršćanskih vjerovanja karakteristika je pučke pobožnosti koja se i danas prakticira na cijelom području Hrvatske. I magija i religija pretpostavljaju postojanje nadnaravnih bića. Jedna od osnovnih razlika između magije i religije oči-

²⁴ Antropolozi i etnolozi najčeće su se bavili ulogom iscjelitelja, zapostavljajući pritom svakodnevnu, pretežno žensku, domaću medicinu. U tradicijskim sredinama, starije žene koje su s vremenom stekle dovoljno znanja i iskustva smatrale su se najkompetentnijima za liječenje bolesti. Zato se uloga žene kao prenositeljice iskustava često ogleda i na simboličnoj razini. Zanimljivo je da se žene kao praktičarke narodne medicine u nekim slučajevima liječenjem mogu početi baviti tek "kad se od svega oproste", dakle tek poslije klimakterija, jer samo "čista" žena može posredovati između bolesnih i demona bolesti koje treba istjerati ili svetaca od kojih se očekuje pomoć u istjerivanju bolesti (Filipović-Fabijanić, 1968:67).

²⁵ Tako je Sadik Sadiković, poznati narodni liječnik, imao vrlo uspješnu metodu liječenja depresije. Terapija se temeljila na sugestiji kojom je oboljele osobe pokušao odvratiti od usredotočenosti na svoje smetnje. Na primjer: "ustani zorom, dok je rosa na travi, uhvati ili ubij devet švraka i pojedji svaki dan po jednu pečenu pod saksiju..." (Dujmi, 1940: 8). Tim se receptom pred pacijenta postavljaju problemi čije rješenje iziskuje trud i napor: da rano ustaje; da je rosa na travi; da uhvati svrake što i nije tako jednostavno. Na taj se način njegova pažnja polako odvraća od same bolesti pa je rezultat terapije vrlo dobar (Dujmi, 1940:8).

tuje se u odnosu prema nadnaravnom. Magija podrazumijeva aktivan odnos prema nadnaravnom svijetu u smislu da čovjek magijskim postupcima može utjecati na taj svijet i izazvati željene promjene. Vrač kao posrednik između našeg i natprirodnog svijeta vjeruje da ima moć nad nadnaravnim i prirodnim silama i vjeruje u izvjesnost svojih postupaka ukoliko se oni izvedu pravilno. Magijsko se djelovanje temelji, dakle, na izboru prave formule i valjano izvedenom postupku što neizbježno dovodi do uspjeha. Za razliku od magijskih postupaka, religijski obredi naglašavaju ljudsku bespomoćnost. Vjernici se obraćaju Bogu za pomoć, a on odlučuje čiju će molitvu uslišiti a čiju ne (Rosman, Rubel, 2001:212).

Već od samih početaka kršćanstvo se nastojalo ograditi od pučkih magijskih praksi i vjerovanja, pozivajući se na Bibliju, koja na nekoliko mjesta kaže da čarobnjake i čarobnice treba najstrože kazniti.

Potkraj srednjeg vijeka čarobnjaštvo je proglašeno herezom te se od 13. do 15. stoljeća na čarobnjake počinju primjenjivati iste mjere kao i na heretike. Ti su se progoni u sljedećim stoljećima nastavili kao veliki masovni progoni vještica utemeljeni na internacionalnom teološkom shvaćanju čarobnjaštva. Tako stvoren teološki obrazac vještice, s načinom dokazivanja u kojem je glavnu ulogu imala tortura, omogućio je da se seoske vračare optuže kao zle čarobnice, sa svim stereotipnim atributima (obožavateljice vraga, pripadnice organizirane sekte koje sklapaju ugovor s vragom, na tajnim sastancima održavaju orgije i rade štetu). U Hrvatskoj su progoni vještica dostigli svoj vrhunac u 17. stoljeću, a do njihovog prestanka dolazi tek sredinom 18. stoljeća (Bayer, 1954:211).

U slavenskim je jezicima vračati značilo i liječiti i obavljati magijske postupke, pa je vrač ujedno bio i liječnik i čarobnjak. Rašireno narodno shvaćanje o podjeli na crnu i bijelu magiju, to jest onu koja pomaže i onu koja šteti, službena je religija svela pod isto uz parolu "onaj tko zna liječiti može i škoditi", kako je rekla svjedokinja na jednom suđenju u Modeni 1499. godine (Burke, 1991:92). U folklornim zapisima 19. i 20. stoljeća navodi se katkada da je neka osoba svoje umijeće naučila od vila. Kaže se da vračari i vračarice imaju vile i vilovnjake za posestrime i pobratime, koji ih uče kako liječiti bolesti; coprnjice su, naprotiv, s vražje strane, one čaraju i prodaju dušu vragu (Bošković-Stulli, 1991:131).

U Zbornicima za narodni život i običaje južnih Slavena na više se mjesta spominje kako svećenici s oltara prekoraavaju one koji se bave skidanjem uroka, kao i one koji im se obraćaju za pomoć: "Popi puno karaju s otara one, koji viruju u čare, grijota je: nike stare babe, koje skidale čare i namete, ne 'tili ispovidit ni pričestit, dok se ne ostavu tog dila. Malo će ko danas za svoje zdravlje zvat čarovnicu, da moli ili šapori, ide u popa, da učini zapis..." (Ivanišević, 1905:295).²⁶

²⁶ Zapisi su različiti tekstovi vjerskog karaktera, koji su sadržavali molitve upućene Bogu, Majci Božjoj ili pojedinim svecima da izliječe bolesnu osobu, odnosno da je zaštite od nesreće. Ti su se tekstovi nosili pre-

Rezultati tog višestoljetnog dijaboliziranja praktičara narodne medicine vidljivi su i danas. Tijekom istraživanja nekoliko smo puta zabilježile izjave ljudi da su njihove sposobnosti liječenja s Božje strane, kao da se unaprijed ograđuju od bavljenja magijom kao vražjim poslovima te naglašavaju da za izlječenje ne treba zahvaliti njima nego dragom Bogu (TZ, 2000-2001). Odbojnost i strah prema narodnoj magiji Crkva izražava i danas.

Tijekom povijesti mnogi su kritičari katoličke Crkve pokazivali kako ona u svojoj praksi također prihvaća magiju. Uvriježeno narodno vjerovanje da se bolesti izazvane magijskim putem, odnosno čarobnjaštvom, mogu uspješno izliječiti jedino protučarobnjaštvom, Crkva je stoljećima pokušavala bezuspješno iskorijeniti nudeći u zamjenu za čarobnjaštvo "svete lijekove": molitvu, zavjete, zagovore svecima i moći svetaca, post, hodočašća, pokoru, egzorcizam, pokušavajući na taj način osigurati isključivo pravo na obavljanje čudotvornih postupaka (Brenko, Dugac, Randić, 2001: 52). Proces prihvaćanja službene religije tekao je sporo. Neke je elemente pučke pobožnosti Crkva prihvatila u službeni kult (hodočašća, procesije, križni put), a nekima su sami narodni praktičari dali kršćansku formu i značenje. Može se reći da je širenjem i prihvaćanjem kršćanstva magijsko postalo sve ono što se nije uspjelo uklopiti u službeni vjerski kult (Španiček, 2003:249).

Magijska shvaćanja dugo su vremena podržavali i sami katolički svećenici koji su se u narodu shvaćali kao "dobri vrači", što ilustrira i etnografska građa s prijelaza 19. u 20. stoljeće. U Zbornicima nalazimo podatke o izuzetnoj moći svećenika da "križem i molitvom" liječe bolesne (natresanjem²⁷ robe bolesnika i pisanjem već spomenutih zapisa), utječu na urod blagoslovom polja, tjeranjem gusjenica i skakavaca, dozivaju kišu ili šalju tuču na susjednu župu (Ivanišević, 1904:34). Pojedini svećenici postigli su veliku slavu zahvaljujući svojim sposobnostima liječenja, ali Ivanišević isto tako naglašava da to "nije ni do nji", nego komu Bog odredija; Bog sriču dili" (Ivanišević, 1904:34). Isti autor, pišući o životu u Poljicima na prijelazu 19. u 20. stoljeće, osobito pohvalno govori o don Stipanu Simuniću i njegovim iznimnim uspjesima u liječenju, zbog čega su mu drugi svećenici zavidjeli, pa su ga i prijavili splitskom biskupu pod optužbom da skida uroke i daje zapise tako da mu je biskup zabranio držanje misa: "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 prikri-

savinuti u trokute (kod muslimana), odnosno četverokute (kod katolika), pohranjeni u srebrne spremice ili zamotani u tkaninu, na ogrlici oko vrata, odnosno privezani upravo na bolesno mjesto. Franjevački su redovnici prestali raditi zapise tijekom 19. stoljeća, smatrajući ih praznovjermem, a hodže su nastavili s tom praksom za muslimansko i kršćansko stanovništvo. Uglavnom se smatralo da jače moći imaju oni zapisi koje je radio svećenik druge vjere. Liječenje kuranskim zapisima i danas je popularno u okviru ezoterike kao alternativnog načina liječenja.

²⁷ Običaj *natresanja robe* bolesnika u prošlosti su obavljali svećenici. Kad bi sišli s oltara i počeli skidati misno ruho, svaki komad odjeće koji bi odlagali prvo bi protresli nad glavom bolesnika, jer ako je bolest došla s "vražje strane" na ovaj se način smatralo da će odstupiti. Bolesnik, pak, kleči sklopljenih ruku, ljubi svaki komad odjeće i preporučuje se Bogu svojim obećanjima (Ivanišević, 1905:297).

žija, nestalo svega, kuća ostala čista ko zlato, a moj don Stipe opet ka' i bija, dopustija biskup odma' misu i molitve." (Ivanišević, 1904:35).

U Otoku kraj Vinkovaca vjerovalo se da je proklet svaki pop koji može navlačiti oblak, odnosno izazvati tuču.²⁸ Istraživanje provedeno sredinom prošlog stoljeća pokazalo je da u selima sjeverozapadne Hrvatske stanovništvo vjeruje da se župnicima nije dobro zamjeriti jer mogu biti zločeste naravi i imati istu snagu kao i copernjaki (Čuli-nović-Konstantinović, 1989:83). Prema narodnom shvaćanju, činjenje štete i umijeće liječenja vrlo su srodni. Ljudi su sve svoje nevolje, bolesti, smrt bližnjih, pomor stoke, sušu, nevrjeme i bilo što drugo pripisivali osobama za koje su vjerovali da imaju nadnaravne sposobnosti. Granice između liječenja vjerskim i magijskim putem lako se pomiču, pa je zbog toga pripisivanje nadnaravnih sposobnosti određenim osobama izazivalo divljenje i poštovanje, ali ujedno i strah od nanošenja zla.

Praktičari narodne medicine nekad i sad

U prošlosti je nedostatak liječnika i njihova nedostupnost svakako bio jedan od razloga što se pomoć tražila od seoskih narodnih liječnika. Godine 1598., na sjednici Hrvatskog sabora sazvanoj zbog prijetnje kuge, zaključilo se da u cijeloj Hrvatskoj i Slavoniji nema ni jednog liječnika. Tek 1603. godine stigao je u Hrvatsku dr. Daniel Their de Rosenberger kao doctor, medicus Regni Slavoniae et venerabilis capituli Zagradiensis (Thaller, 1938). Još u 19. stoljeću, liječnici su na našim područjima bili prava rijetkost.²⁹

Zbog toga im se u hitnim slučajevima seosko stanovništvo i nije moglo obratiti. Loši putovi i odsječenost pojedinih planinskih sela zimi stvarali su još veće probleme. Da-

²⁸ Kao ilustraciju toga vjerovanja Lovretić navodi kazivanje koje je čuo od tamošnjih ljudi. Sina, koji se po završetku školovanja za svećenika vratio kući, otac je zamolio da mu ispriča što je sve u školama naučio, a ovaj mu odgovori da može navući oblak na njegov vinograd. Znatiželjni otac odgovorio je da bi to baš volio vidjeti. Na to: "*Šin uzme knjigu i stane molit. Oblak se navuče nad njegov vinograd, led pade i vinograd potuče do zemlje. Otac uze pušku, na oko nanišani i ubije prokletnika sina i reče: 'Eto, sinko, da više ne biješ ničije rane u polju, da mene ne grde ljudi za tebe.'*" (Lovretić, 1990:536-537).

²⁹ U cijeloj Hrvatskoj i Slavoniji bila su 1873. godine svega 103 diplomirana liječnika i 88 ranarnika, a otprilike polovica ih je živjela u gradovima (Glesinger, 1954:70). Godine 1900. broj diplomiranih liječnika na području Hrvatske i Slavonije povećao se na 317, za razliku od broja ranarnika koji se smanjio na 46 (Statistički godišnjak, 1905:265). Godine 1910. bilo je 386 liječnika, a zbog nove zakonske regulative o potrebi postojanja diplomiranih liječnika, broj ranarnika sveo se na svega 10 (Statistički godišnjak, 1906/10:221). U Dalmaciji su već sedamdesetih godina 19. stoljeća postojali općinski liječnici pa je zbog toga stanje na selima bilo nešto bolje, ali još uvijek nezadovoljavajuće. Tako su 1905. godine u Dalmaciji radila 142 diplomirana liječnika od kojih je 70 bilo općinskih. Krajem 19. stoljeća u Istri je obavljalo praksu oko 70 liječnika i 3 ranarnika (Glesinger, 1954:70). Valja napomenuti da je na području Hrvatske i Slavonije 1880. godine živjelo oko 1,900.000 stanovnika, a ta se brojka na prijelazu u 20. stoljeće popela na oko 2,-400.000 stanovnika. Nakon Prvoga svjetskog rata broj liječnika i ostalog medicinskog osoblja ubrzano se povećavao. Tako je pred Drugi svjetski rat u Banovini Hrvatskoj bilo 1710 liječnika, od kojih je 1400 radilo u gradovima i trgovištima, a samo njih 300 na selu (Sremac i Nikolić, 1941:38).

nas nedostupnost liječnika više nije važan problem. Dapače, u traženju alternativne pomoći prevaljivanje čak i velikih udaljenosti za ljude s jakom motivacijom ne predstavlja nikakav problem.

Važan je bio i gospodarski faktor. Medicinske usluge koje su bolesnicima pružali njihovi suseljeni u pravilu su bile besplatne ili su se nadoknađivale protuuslugom, a liječnička se pomoć gotovo redovito naplaćivala. Većina seoskog stanovništva zbog siromaštva i nije mogla zvati liječnika. Danas pak imovinska situacija ima drugačiju ulogu, jer su neki vidovi alternativne medicine dostupni samo ljudima boljih materijalnih mogućnosti.

Medicinski fakultet u Zagrebu osnovan je tek 1917. godine, što znači da su liječničku praksu u našim krajevima stoljećima obavljali stranci ili naši ljudi koji su svoje titule stekli u inozemstvu. Prema njima su široki narodni slojevi imali vrlo negativan stav: zato što su bili stranci s kojima nisu mogli razgovarati materinim jezikom ili pak zato što, premda su govorili istim jezikom, nisu pripadali istim društvenim slojevima. Jedan je od razloga uspješnosti narodnih liječnika i taj što njihov status po mnogo čemu odgovara pacijentovom (obrazovanje, društveni položaj, dob, spol). Oni međusobno komuniciraju na način koji je nezamisliv u liječničkoj ordinaciji.

Osim toga, percepcija bolesti seoskog stanovništva u prijašnjim je vremenima bila bitno drugačija. Radi se o tome da za mnoge bolesti ljudi nisu ni znali da se mogu liječiti, pa stoga i nisu ništa poduzimali. Oni su naprosto prihvaćali veliku smrtnost djece: Bog dao, Bog uzeo; i imali manja životna očekivanja: Nije mu bilo suđeno. Pozivanje liječnika bila je zadnja mogućnost i kad bi bolesnik na kraju ipak umro, mogli su pred rodbinom i susjedima reći: Čak smo i doktora zvali. Kada bi netko umro zato što je liječnička pomoć stigla prekasno, bila je to potvrda da im liječnik ionako ne može pomoći i motiv za nastavak već poznatih praksi tradicionalnog liječenja (Brenko, Dugac, Randić, 2001:28).

Kao neki od uobičajenijih razloga popularnosti alternativne medicine danas, navode se nedostaci zdravstvenog sustava. Motivi za traženje alternativne pomoći mogu biti pozitivni i negativni. Među pozitivne možemo ubrojiti: naglasak na holizmu, duhovnu dimenziju, aktivnu ulogu pacijenta, dobar odnos s terapeutom, suosjećanje, ugodno terapijsko iskustvo i sl., a negativni su motivi najčešće dotadašnje neučinkovito liječenje ili nemogućnost izlječenja, loš odnos s liječnikom, liste čekanja, odbacivanje znanosti i tehnologije i sl. (Ernst, 2000:4).

Velik uspjeh alternativne medicine u zapadnim društvima zadnjih desetljeća 20. stoljeća pripisuje se i razvoju potrošačkog društva i alternativnih stilova života. Budući da je u gradovima alternativna ponuda puno veća i šarolikija, čini se da je gradsko stanovništvo sklonije tražiti tu vrstu pomoći, ali u skladu sa svojim preferencijama. Osobito ljudi s kroničnim bolestima i psihosomatskim³⁰ smetnjama postaju pacijenti

³⁰ Za liječenje psihosomatskih bolesti važna je i činjenica da narodna medicina poistovjećuje simptome i bolesti. Praktičari narodne medicine razgovaraju s pacijentima o simptomima i boli. Bol se ubraja u osjećaje koji se mogu izraziti na različite načine, ali nikad potpuno precizno. Osim toga, čovjek može trpjeti bol, a da s gledišta službene medicine bude potpuno zdrav.

alternativne medicine. Osobe s psihosomatskim smetnjama nailaze na veće razumijevanje kod alternativnih nego kod službenih liječnika.³¹

Osim toga, s pozicije bolesnika korištenje službene i neslužbene medicine nije nespojivo. S ciljem što potpunijeg i bržeg ozdravljenja istovremeno se kombiniraju terapije službene i neslužbene medicine.

Kao što vidimo, razlozi prakticiranja neslužbene medicine mijenjali su se s obzirom na vrijeme i prostor, ali i vrstu terapije i motivaciju pojedinaca što pokazuje da je kontekst primjene narodne medicine u 19. i početkom 20. stoljeća sasvim drugačiji od današnje primjene alternativne medicine.

Zaključak

Analiziravši komparativne podatke, možemo doći do nekoliko zaključaka: Kao dio sveukupne narodne kulture, narodna je medicina područje u kojem veza s kulturnim nasljeđem osobito dolazi do izražaja. Prenošenje znanja s jednog naraštaja na drugi način je održavanja tog kulturnog nasljeđa. Praktičari narodne medicine svojim radom i djelovanjem te tradicije prenose i danas. Tijekom 19. i 20. stoljeća premlen broj školovanih liječnika i ljekarnika predstavljao je velik problem seoskom stanovništvu. No čitajući Liječničke vjesnike s početka 20. stoljeća, često nailazimo na izjave liječnika koji se žale kako je u nekim mjestima gotovo nemoguće održati liječničku praksu. To se najčešće odnosilo na područja gdje su generacijama postojali vješti barbiri (ljudi koji su se bavili puštanjem krvi), biljari ili ramnači (namještači kostiju). Oni su svojim radom i vještinom upravo stvarali i poticali kod ljudi potrebu da im se obraćaju i onda kada im nisu mogli pružiti odgovarajuću pomoć. Učenje tih tehnika prenosilo se s generacije na generaciju. Magične formule učile su se napamet i predavale neposredno prije smrti svom nasljedniku ili nasljednici. Skupljanje bilja i stjecanje znanja o njegovoj ljekovitosti, načinima pripreme i liječenju bio je dugotrajan proces. Godine rada uziskusnu osobu, najčešće iz obitelji, urodile bi ovladavanjem vještine i izgrađivanjem vlastitog repertoara, a upravo je to neposredna okolina i očekivala od njih. Na taj su način neke obitelji generacijama obavljale posao liječnika i bile potpuno lokalno integrirane. Traženje njihove pomoći u rješavanju različitih životnih problema ističe njihovu ulogu u životima pojedinaca, ali i čitavih seoskih zajednica jer se na njih uvijek moglo računati.

³¹ Jedan od načina na koji praktičari i službene i neslužbene medicine poboljšavaju bolesnikovo zdravlje, potpuno je prirodan, a radi se o placebo učinku (bilo koje poboljšanje zdravstvenog stanja čiji je uzrok sam čin primanja pomoći, a ne sama pomoć). No zagovarači alternativne medicine nastoje minimalizirati ili drugačije interpretirati djelovanje placeboa. Već sam odnos koji se uspostavlja između pacijenta i terapeuta ima jak placebo učinak. Iscjelitelji pokazuju veće zanimanje za individualne potrebe bolesnika i imaju manje dvojbe je li nešto medicinski ispravno ili u skladu s društvenim interesima. Vrlo je iskren bio jedan naš kazivač koji liječi hodžinim zapisima. Priznao nam je da se često pita je li on šarlatan ili nije? "Ali kad vidim da pomažem ljudima, onda mi odgovor i nije važan." (TZ, 2000).

Zahvaljujući globalizaciji, znanja i vještine lokalnih praktičara narodne medicine danas su isto tako dio gradske alternativne ponude. Razvojem znanstvene medicine mnogi su stručnjaci smatrali da će drugi vidovi liječenja postupno nestati, a s njima i praktičari narodne medicine. No umjesto da iščeznu, oni su se prilagodili zahtjevima vremena na sličan način kao i službena medicina. Prilagodba praktičara narodne medicine današnjem vremenu ogleđa se i u rasponu bolesti koje pokušavaju liječiti, poput hepatitisa C, AIDS-a, raznih vrsta malignih oboljenja, Alzheimerove bolesti i PTSP-a (Brenko, Dugac, Randić, 2001:38). Slava pojedinih narodnih liječnika već je u prošlosti prelazila okvire njihove neposredne zajednice. No, ono što je karakteristično za naše doba, to su iscjelitelji s kojima se prvi kontakt ostvaruje preko masmedija. Ne samo preko tiska na lokalnoj i nacionalnoj razini, već i preko interneta te televizijskih i radijskih kontakt-emisija. Neki iscjelitelji svoje usluge obavljaju samo posredno, narudžbe se obavljaju poštom ili internetom. Većina praktičara narodne medicine s kojima smo razgovarale bez obzira žive li u gradu ili selu, posjeduju telefon, mobitel i posjetnicu.

Unatoč stoljetnim naporima elitne kulture da nametne vlastite okvire narodnim tradicijama, one nisu nestale. U skladu s novim trendovima (centralizacija, racionalizacija) očekivalo bi se da pojedinci koji liječe magijskim postupcima budu najviše pogođeni sadašnjim razvojem. No baš te vrste liječenja upravo kod nas doživljavaju pravi procvat. Na temelju naših istraživanja utvrdili smo da seosko stanovništvo danas pokazuje veću spremnost za traženje pomoći kod službenih liječnika, čak i za lakše bolesti poput prehlade. S druge strane, kada se radi o psihičkim problemima kao posljedicama gubitka bliskih osoba ili imovine, neuspjeha u intimnom životu ili na poslovnom planu i sl., ta se stanja i događaji proglašavaju posljedicom magije, pa se pomoć traži kod osoba koje znaju skidati uroke i raditi zaštitu od zlih sila ili "negativne energije" (TZ, 2000). Osobe koje se danas u gradu bave magijskim načinom liječenja, odnosno skidanjem uroka, najčešće se predstavljaju kao duhovni iscjelitelji.

Shvaćanje bolesti kao posljedice uroka ili zlih sila mnogima je i danas prihvatljivije od onog u kojem su tek žrtva stjecaja nepredvidivih okolnosti, jer prvo objašnjenje potvrđuje i čuva njihov kulturni identitet. Osim toga, i Crkva je stoljećima na različite načine sugerirala kako je moralni život preduvjet čovjekovog zdravlja te da su duševni grijeh i tjelesna bolest znak zla u čovjeku.³²

Nasuprot tome, naša službena medicina može donekle objasniti što je uzrokovalo bolest, ali ne može odgovoriti zašto se to dogodilo upravo nama. Današnja medicina ne postavlja bolest u kulturni kontekst. Prihvatanjem racionalnih i znanstvenih objašnjenja bolest se više ne shvaća kao kazna za grijeh, iskušenje ili posljedica uroka. Bolest je u tijelu, a ne izvan njega.

³² U mnogim kulturama već je i sama interpretacija bolesti ujedno i važan dio liječenja. Ono što se smatra uzrokom bolesti, simbolički potvrđuje pojmove o dobru i zlu u određenoj zajednici. Vrlo je prošireno objašnjenje da bolest nastupa kad se ljudi ne pridržavaju onoga što se smatra ispravnim u određenoj kulturi.

Danas sve više nadvladava mišljenje da će popularna narodna medicina, kao forma medicine, uvijek postojati paralelno sa službenom medicinom.³³ Također je vidljiva tendencija ublažavanja kazni za nadriliječništvo. Premda se radi o praksama koje su s pravnog gledišta i prema stavovima službene medicine potpuno ilegalne,³⁴ najveći broj osoba sasvim neometano obavlja taj posao, što možda znači da njihova praksa ipak ima određenu društvenu korist. Premda kriminalizirani, različiti iscjelitelji obavljaju svoju društvenu funkciju. Oni su društveno korisni sve dok pridonose brizi za zdravlje. Ljudi se obraćaju iscjeliteljima na vlastitu odgovornost. "Društvena korist" alternativne medicine ide na ruku kako državnim institucijama, tako i promotorima alternativne medicine.

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³³ Premda alternativna medicina i njezine metode nisu znanstveno utemeljene, njezini zagovarači ističu stoljetnu kulturnu utemeljenost takvih metoda. Teorije službene i neslužbene medicine temelje se na različitim paradigmatima, pa se njihova različitost ogleda ne samo u drugačije utemeljenim teorijama nego i nemogućnosti da koriste istu eksperimentalnu metodu provjere (Buklijaš, 1999:12-15).

³⁴ Današnje sankcije za nadriliječništvo regulirane su člankom 244. Krivičnog zakonika iz 1997. godine. Za postojanje krivičnog djela nadriliječništva potrebna su tri uvjeta: 1. da se radi o osobi koja nema propisanu stručnu spremu; 2. da je proveden neki postupak liječenja bolesnika; 3. da je to liječenje provedeno radi zarade ili uz nagradu. Novčana kazna za povredu zakona iznosi do sto pedeset dnevnih dohodaka ili je to kazna zatvora u trajanju do šest mjeseci. Tridesetih godina 20. stoljeća zakon protiv nadriliječništva bio je strog i predviđao je kaznu i do 10 godina zatvora ukoliko se poslije liječenja bolest pogorša ili bolesnik umre (Bazala, 1932:122). U prošlosti su ti zakoni bili još rigorozniji, pa iz sudskih materijala doznajemo o procesima protiv čarobnjaštva za koje je kazna bila spaljivanje.

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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 ničer 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.