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## FOLK AND COMPLEMENTARY MEDICINE IN POLISH ETHNOLOGICAL INVESTIGATIONS

The article is not a complete and detailed account of the history of Polish investigations of folk medicine. Its aim is to characterize the main aspects of these investigations, to show how they were changing, to look for and characterize the sources of modern Polish ethnomedical investigations, and, finally, to point to some areas of research that need further investigation. Only some works will be discussed in detail. However, I will not summarize their contents but, instead I will focus on the specific approaches they employed and characterize those aspects of research that were later continued and developed.

It is not easy to distinguish between ethnological works pertaining to folk medicine and sociological, ethnopharmacological or historic-medical ones. It is known that at the initial period of the development of Polish ethnology, doctors and naturalists wrote many works on folk medicine. Today, complementary medicine is researched by many disciplines related to ethnology. Ethnomedicine or medical anthropology are in the "border zone" between ethnology and other social and natural sciences. For this reason, I will also be referring to works written by authors who are not ethnologists by education but whose contribution to ethnomedical investigations is considerable.

Polish ethnological investigations focused on folk medicine. Today, however, folk medicine has been transformed — it would be difficult to isolate folk medicine from a wider set of medical beliefs and practices belonging to official medical science, a science which I have defined as complementary science.

Early investigations of folk medicine were mainly practical. In the middle of the 19th century, doctors started to stress the benefits that could be gained if various "superstitions" pertaining to medicine were investigated and if they could be eradicated. Many articles were written and published in various medical and natural journals ("Przegląd Lekarski", "Gazeta Lekarska", "Przegląd Farmaceutyczny", "Przyrodnik"). The articles described the best known quack doctors and the procedures they used, various beliefs and magic prac-

tices, and the therapeutic use of herbs. A more extensive work entitled *O przesądach lekarskich ludu naszego* [On medicinal superstitions of the Polish people] was published by M. Zieleniewski in 1845. M. Zieleniewski exhaustively presented beliefs and medical practices, dividing them into preventive and therapeutic ones. He made frequent references to written sources which he used but provided no bibliography of the materials he had collected and on which his dissertation was based. However, the author did not intend to provide documentation on folk medical practices but to describe “medical superstitions”, their sources and how to find “ways to eradicate them” because it is “the people who protect them (...) that suffer most” (Zieleniewski, 1845, p. 13). M. Zieleniewski also pointed to another benefit that could be gained from the investigation of “superstitions”<sup>1</sup>, namely it would be possible to learn about the history of medicine. According to the evolutionist assumption, the history of medicine can help understand “the beginnings of medicine” (*ibid.*, pp. 12 - 13). This motive was present in many 19th century ethnographic works. The most extensive work on Polish folk medicine at the time was written by M. Udziela (1891), a medical doctor. M. Udziela claimed (1891, pp. 5, 7) that folk medicine concealed the “beliefs of our ancestors” which “retained (...) their original purity”. Udziela’s work is well documented. The author based it on published sources and his own materials. Unlike Zieleniewski, Udziela used the term “folk medicine” whereas that of “healing superstitions” rarely appeared in the text. However, Udziela often emphasized the harmfulness of various beliefs, practices and medications used and, particularly, the work of “quack doctors” or “folk doctors” (*ibid.*, pp. 43 - 49). He was also skeptical about the belief held by many doctors and ethnographers that some elements of folk medicine could be used in scientific medicine<sup>2</sup>. However, he also wrote (*ibid.*, p. 6) that, in addition to “supernatural means”, many peoples used some medications, more or less effective. This aspect is easily found in Polish ethnographic literature dealing with folk medicine and is popular even today. Some renowned representatives of the medical world from the end of the 19th century, who claimed that it was necessary to use the procedures of folk medicine in official medicine, helped make it widespread. According to K. Moszyński (1967, p. 176), “W. Niemiłowicz, a former professor of Lvov University, expressed the opinion of many doctors and theoreticians of medicine in his appeal from 1893 which called for collecting information pertaining to the healing of peasants. He believed that the information would be useful not only to ethnography but

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<sup>1</sup> This is discussed only marginally. The author’s main intention was to “describe the superstitions of the Polish people pertaining to the medical science; to point, as far as possible, to their sources and suggest ways to eradicate them” (Zieleniewski, 1845, p. V).

<sup>2</sup> M. Udziela (1891, pp. 41 - 42) criticized J. Grajner’s view (1880) on the effectiveness of herbs used in folk medicine.

to <suffering mankind>”<sup>3</sup>. Moszyński believed that these hopes, although illusive, helped create valuable documents on folk medicine. The documents were created by both medical doctors and naturalists as well as ethnographers. The motivation behind the interest in folk medicine was different from that behind the drive to eradicate superstitions. Both aspects fit perfectly the framework of the positivist science of the 19th century. According to the evolutionist paradigm, “primitive”, “superstitious” beliefs and healing practices developed into protoscientific ones and then into modern scientific medicine. This approach is defined in the literature as empiricist or rationalistic (cf. Good, 1994, p. 29-47). One could add that the tendency to look for the “rational nucleus” in folk medicine is a good example of a phenomenon defined as the mythologization of folk culture, noticed and described by modern ethnologists (Robotycki, Węglarz, 1983; Stomma, 1986).

As mentioned above, authors writing in the first half of the 19th century looked for the distant past in folk medicine and pointed to the pure character of the latter. This approach was typical of the general position held by 19th century ethnographers with respect to folk culture, which emphasized the archaic character, permanence and invariability of elements belonging to folk culture. Mechanisms of this “basic” mythologization have been presented in detail by modern ethnologists (e.g. Stomma, 1986; K. Piątkowski, 1994). However, it should be pointed out that the authors of works on folk medicine sometimes noticed manifestations of its dynamism. This can be found in the works discussed above. Zieleniewski (1845, p. 69) wrote that “many superstitions found in books were assimilated by the peasants. The books themselves became the source of new superstitions and helped to popularize the old ones”<sup>4</sup>. Udziela (1891, pp. 23, 41) gives examples of concepts drawn from official medicine and points to the origin of many folk medications — old herbaria, calendars and other books, often found in manor houses. The author noticed that this was a bi-directional process. He quoted the opinion of A. Podbereski (1880): “It is difficult to distinguish between medications used by the gentry and at manor houses and those used by peasants because manorial servants would often take these medications to female quack doctors and from female quack doctors back to the manors. Then they would again return to the peasants, changed or unchanged” (M. Udziela, 1891, p. 41). J. Rostafiński (1885, pp. 2-3)

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<sup>3</sup> According to this appeal “The Polish people, so generously equipped with the sense of perception, made many discoveries, useful in their everyday life; discovered many medications and tested them practically. What is needed now are scientific investigations to collect these treasures, to critically examine their value and present them in the scientific light” (after: Moszyński, 1967, p. 176).

<sup>4</sup> In the introduction, however, the author said that he tried to avoid this foreign influence so as not to ascribe these foreign “superstitions” to the Polish people.

says that folk phytotherapy derived from popular literature and it bore no or almost no resemblance to the original beliefs<sup>5</sup>.

There were different reasons for which 19th century ethnographers collected materials on folk medicine. It remains a fact that interest in folk medicine was considerable. The works on folk medicine usually were of a documentary type and even today are a valuable source for ethnomedical investigations. Some works were on a single village, parish or district, and described a specific illness and ways of treating it or were devoted to individual methods and therapeutic medications. The works on therapeutic medications were mainly on herbal medications, although there were also many works on breaking spells and sorcerer's formulae used to charm illnesses away. Descriptions of practices used by quack doctors are an interesting and valuable source of information. Works on folk medicine were published in such journals as "Lud", "Wisła", "Zbiór Wiadomości do Antropologii Krajowej", "Materiały Antropologiczno-Archeologiczne i Etnograficzne" as well as in the medical and natural journals mentioned above and in popular weeklies and monthlies (e.g. "Tygodnik Ilustrowany", "Przyjaciół Ludu", "Wędrowiec") and in dailies. Materials on folk medicine can also be found in more general ethnographic works, e.g. Ł. Gołębiowski's *Lud polski. Jego zwyczaje, zabobony, wierzenia* [The Polish people. Its customs, superstitions, beliefs] (1830), R. W. Berwiński's *Studia o guslach, czarach, zabobonach i przesądach leczniczych* [The study of witchcraft, magic, superstitious practices and therapeutic superstitions] (1862) and in Oskar Kolberg's *Dziela wszystkie* [O. Kolberg's Collected Works]. Information about folk medicine can also be found in some monographs on regions and villages (e.g. M. Federowski, 1888; S. Udziela, 1902). There were very few works entirely devoted to folk medicine. Apart from the works by Zieleniewski and M. Udziela (the latter's work can be considered the first synthetic monograph on folk medicine), mention must be made of a valuable collection of articles on folk medicine written by J. Talko-Hryncewicz *Zarysy lecznictwa ludowego na Rusi Południowej* [An outline of folk medicine in Southern Ruthenia] (1893)<sup>6</sup> and J. Rostafiński *Zielnik czarodziejski, tj. zbiór przesądów o roślinach* [A magic herbarium, i.e. a collection of superstitions about plants] (1885), used even today by Polish ethnopharmacologists as a valuable source.

Materials for works on folk medicine were collected in different regions of

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<sup>5</sup> J. Burszta (1967, p. 400) writes that "ethnographic field data suggest that the essence of folk practices and superstitions connected with specific herbs and plants used in therapy is not much different from those described by J. Rostafiński. This undoubtedly indicates the influence of this literature on folk therapy or, perhaps, that authors of this literature had drawn directly from peasant lore.

<sup>6</sup> This is an extensive, well documented work in which Talko-Hryncewicz used ethnographic literature as well as such sources as various notes in magazines and calendars and information collected by doctors, apothecaries, and village priests.

Poland. Most of them, however, were collected in Galicia and eastern parts of Poland.

The arrangement of information in the books adopted by the authors is very interesting. They usually start from illnesses, ordered more or less according to the medical classifications used at the time. Descriptions of illnesses are accompanied by descriptions of medications and therapeutic methods that should be used to heal the illnesses. Zieleniewski (1845) used a simple division, also borrowed from the medical science, into beliefs and practices (in his terminology – “superstitions”) connected with health and treatment of illnesses. The topics that did not fit the first two chapters were discussed in the third chapter (e.g. “plague”, customs related to death). The arrangement of information in M. Udziela’s work (1891) is more or less typical of many works on folk medicine. The author distinguishes illnesses of the brain, nerves and senses, illness of the respiratory organ, illnesses of the digestive, urinary and sexual organs, skin illnesses, “surgical illnesses” and illnesses of the motorial system. There are also such chapters as: pregnancy, birth, puerperium; adolescence and pediatric diseases; death, the corpse and funerals. Because of this classification, there are unavoidable problems with classifying individual illnesses, particularly those that do not have their counterparts (or precise counterparts) in medical nosology. For example, Udziela (1891, pp. 158-159, 171, 178-187, 226-234) classified such ailments as “gripes” (the feeling of suffocation caused by a nightmare), “paints in bones”, ague (fever<sup>7</sup>) as “illness of the digestive, urinary and sexual organs”, and erysipelas and pimples as “surgical ailments and ailments of organs of movement”. It should be added that the introductory part of the work, preceding the discussion of the illnesses, includes chapters on beliefs about the causes of illnesses, general methods of their treatment and about “folk doctors”.

At this point it will suffice to note the permanence of some aspects of research which appeared and were developed in Polish investigations of the folk medicine of the 19th and the beginnings of the 20th century.

In the interwar period interest in folk medicine decreased considerably. This was due to the weakening of the positivist belief in the profits that official medicine could derive from studies of folk medicine. Some articles appeared in such popular magazines as “Orli Lot”, “Kuryer Literacko-Naukowy”, in regional publications such as “Ziemia Nadnotecka” or “Zaranie Śląskie”. However, there were very few serious works. Mention can be made of A. Fischer’s *Rośliny w wierzeniach i obrzędach ludu polskiego* [Plants in the beliefs and customs of the Polish folk] (1929), S. Udziela’s *Rośliny w wierzeniach ludu*

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<sup>7</sup> According to M. Udziela (1891, p. 178), the name “fever” entails many illnesses with shivers.

*krakowskiego* [Plants in the beliefs of Cracovians] (1931) and J. W. Szulczewski's *Rośliny w mianownictwie, przesądach i leczeniu ludu wielkopolskiego* [Plants in the designation, beliefs and treatment of the inhabitants of Wielkopolska] (1932). Some information on folk medicine can be found in manuals on Polish ethnography (Fischer, 1926; Poniowski, 1932). H. Biegeleisen's *Lecznictwo ludu polskiego* [The medical care of the Polish folk] (1929) was an attempt at a synthetic analysis. Despite the author's ambitious aim, the book, presenting an extensive material on Poland and other European countries, is not a reliable source (it lacks satisfactory documentation) and the genetic arguments are not convincing. An index prepared by J. Obrębski (1931) helps locate the data, freely scattered all over the text.

The greatest contribution to the investigations of folk medicine was made by K. Moszyński (1963, 1st edition in 1939). An extensive chapter on folk medicine in the book entitled *Kultura ludowa Słowian* [Folk culture of Slavs] is an excellent source of information. It synthesizes materials on the Slavs and, moreover, includes many more general, interesting ideas on the features of folk medicine. Moszyński (1963, pp. 175-176) emphasized that folk medicine was a branch of culture which was particularly hard to classify. It could not be included in the "technical culture" because it presented a "very close combination of technical and magic, and sometimes cult, elements", which could not be separated. According to the author, what mattered was not only the form of the therapeutic procedure but, first of all, its essence, its contents, which were not taken into account by most sources.

I have already mentioned the opinion made by Moszyński on the illusiveness of hopes to find "treasures" in folk medicine which could be used by scientific medicine. In his opinion, such cases are rare. Moszyński describes the mythologization (he does not use this word) of folk medicine: "even university professors claim that folk medicine is the <treasure of medical knowledge> although practically it is an enormous chaotic bric-à-brac in which valuable things occupy relatively little space" (Moszyński, *ibid.*, p. 232). However, Moszyński still maintains the 19th century division of therapeutic procedures into rational and irrational, although he notices that what has no value for scientific medicine is very valuable for people.

In Moszyński's book medicine was discussed from the standpoint of folk medicine. As there were problems with classification, this was a better solution than trying to make folk medicine a part of "technical culture". The material is organized into chapters on illnesses and their names, causes of illnesses (these were divided by Moszyński into supernatural and natural), prevention and therapy, with a distinction between therapeutic procedures and medications.

The investigations of folk medicine are poorly represented in Polish ethnographic literature written after 1945. The majority of works are con-

tinuations of the traditional ethnographic approach to folk medicine. Such periodicals as “Rocznik Muzeum Etnograficznego w Krakowie”, “Opolski Rocznik Muzealny”, “Łódzkie Studia Etnograficzne” carried articles on folk medicine practiced in some region, district or town (e.g. Jastrzębski, 1961; Hajówna, 1966; Jakubowska, 1966; Olszowy, Tylkowa, 1968; Pawłowska, 1972; Szychowska-Boebel, 1978; Dłużewska, 1983). Other texts described selected therapeutic techniques, for example, bleeding people (Kisiełewska, 1966), clay treatment (Czubala, 1984) or discussed a single illness and its treatment (Nowakowski, 1979). The latter problem was also studied in more recent articles by A. Paluch and Z. Libera. One of them deals with plica (Libera, Paluch, 1988), another with consumption (Paluch, 1994). Results of studies of medicinal plants are found in M. Hensłowa (1962; 1972; 1976). A. Paluch also made a great contribution to the investigations of plants used in folk medicine (Paluch, 1984; 1989; Libera, Paluch, 1993). Some information about folk medicine can be found in various regional monographs (or monographs on individual villages). In *Kultura ludowa Wielkopolski* [The folk culture of Wielkopolska], J. Burszta (1967) treated folk medicine very extensively. A similar treatment of folk medicine can be found in D. Tylkowa’s monograph of the folk culture of the Silesian Beskidy Mountains and Sącz Beskidy Mountains (Tylkowa, 1984; 1985). In 1970s and 1980s regional monographs on folk medicine were published by B. Szychowska-Boebel, *Lecznictwo ludowe na Kujawach* [Folk medicine in Kujawy] (1972) and D. Tylkowa, *Medycyna ludowa w kulturze wsi Karpat Polskich* [Folk medicine in the culture of villages in the Polish Carpathian Mountains] (1989). These two monographs are based on reliable ethnographic documents and are very valuable source materials. All three books merit a detailed discussion.

The monograph on folk medicine in Wielkopolska written by J. Burszta is very well documented. J. Burszta presented the historical sources of Polish folk medicine, pointing to the strong influence of popular literature of the 16th, 17th and 18th centuries. This influence was even intensified in the 19th century with the publication of various works written specifically for peasants. According to J. Burszta (1967, p. 401) in folk medicine “it is not possible to (...) separate what was adopted from what was shaped by life experience of many generation inhabiting a given village”. The author discusses etiological views on folk medicine (divided into cosmic, natural and demonological-magic ones, supplemented by the author with naturalistic ones); magic in folk medicine, home medicine (herbs and other medications), “healers” or “folk doctors”. The conclusion is entitled “From folk to modern medicine”. The author presented the characteristic features of folk doctors and their practices, including data on quack doctors residing in towns whose influence was felt in villages. Consequently, he did not artificially distinguish between what is “rural” or “folk” and what is “urban”. In sections on prevention and therapy the author

discussed “superstitious and magical practices” and those which are “more or less rational and real” (*ibid.*, p. 412). However, the author clearly stated that those “superstitious and magic procedures” are considered superstitious and magic procedures from our modern point of view<sup>8</sup>. Writing about changes in folk medicine Burszta points to its former autonomy. He maintains that today folk medicine has become a cultural relic (*ibid.*, p. 430). Elsewhere, however, when writing about folk etiologies, Burszta says that they are a complex “in which old knowledge, which is rapidly diminishing, and elements of modern knowledge can be detected” (*ibid.*, p. 406). This remark is true not only with respect to etiology. One can say that folk medicine has undergone a transformation.

The monograph on the folk medicine in Kujawy by B. Szychowska-Boebel is written very traditionally. Etiological beliefs, prevention, therapeutic procedures and means are not discussed in separate chapters but accompany the discussion of individual illnesses. Illnesses were classified into groups, according to a slightly simplified medical system. This presentation is characteristic of former ethnomedical works discussed above. Obviously, there are some problems with the classification of some illnesses. For example, Szychowska-Boebel treats plica as a skin disease (cf. the article by Libera and Paluch, 1988) and a number of such different illnesses as rheumatism, anaemia, neoplasms, overstrain are under the category of “other”. One chapter is devoted to quack doctors. In accordance with 19th century tradition, Szychowska-Boebel divides therapeutic means and methods into rational and irrational (although she admits that it is difficult to separate them), without specifying the reasons for this division. Although, as declared in the introduction, one of the aims was to grasp modern changes in folk medicine, the monograph is rather focused on the reproduction of traditional beliefs and practices. The author’s remarks on earlier changes, adoption of the views of official medicine by folk medicine, and the popularization of the views and advice of Reverend Kneipp in villages (Szychowska-Boebel, 1972, pp. 14-15) are all worthy of note.

D. Tylkowa’s monograph on folk medicine in the region of the Polish Carpathian Mountains is characterized by a slightly modified traditional approach. There are chapters on etiology and diagnostics, forms of medical care, therapeutic means, classification of illnesses and therapeutic procedures. Methods of treatment are discussed twice – first with reference to specific diseases and then in a chapter on illnesses. Illnesses are grouped according to a very simplified medical classification and generally divided into “pediatric diseases” and “adult diseases” (although many diseases are typical of both age groups). Like Burszta and Szychowska-Boebel, Tylkowa also had problems

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<sup>8</sup> J. Burszta (1967, p. 429) writes that folk medicine is characterized by a “peculiar way of thinking (...), in which all means are rational and purposeful. A considerable part of these means become irrational only from the perspective of the modern, real, and rational view of the world”.

with classifying individual illnesses. For example, plica-rheumatism is not listed at all (it is discussed in the chapter on therapeutic means). The distinction between rational and irrational beliefs (etiology, knowledge about therapeutic means) and medical practices is present in all the chapters. According to the author, “rational” are means of plant, animal or mineral origin and “mechanical procedures”, such as, for example, the application of cupping glasses (Tylkowa, 1989, p. 84), whereas magic and religious practices and means are irrational<sup>9</sup>. Again, the reason for such a division is not given. One can only suppose that it is made from the point of view of medical science. If this is true, it seems absurd to define the belief that a common cold is the cause of liver diseases part of a “rational” etiology (*ibid.*, p. 25) and rubbing cream onto pimples part of “rational” therapeutic procedures (*ibid.*, p. 89). Elsewhere (*ibid.*, p. 80) the author writes about rational therapeutic procedures, “folk ones or adopted from official medicine”. Does she mean a “common sense” point of view? Tylkowa (*ibid.*, pp. 105 - 106) also mentions the problem of the “rational nucleus” of folk medicine, finding it mainly in herbs or in such procedures as application of cupping glasses or leeches. Such a position is a logical consequence of identifying rational and irrational therapeutic practices and means. The last chapter, devoted to modern changes in folk medicine in the area of the Polish Carpathian Mountains, describes the “modernization processes” that influence the change of proportion in the knowledge of folk medicine “between what is rational and what is irrational in favour of knowledge that can be scientifically proved”. On the other hand, the author notices that “many old superstitions and practices of folk medicine” have still been preserved (*ibid.*, pp. 101, 103). Thus, what is “traditional” is in opposition to what is “modern”. There is no analysis of this situation which could show how the “new” is combined with the “old”.

I will now address some aspects dealt with in the monographs discussed above. These aspects are very common in modern Polish ethnomedical literature.

The division into “rational” and “irrational” beliefs and practices of folk medicine, adopted from positivistically oriented ethnography of the 19th century, is still very widespread. Some authors signal this division in the introduction. Sometimes, they make a reservation that it is not easy to make such a division because of the “complex combination of rational and irrational practices”<sup>10</sup>. Others make this distinction when discussing individual etiologi-

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<sup>9</sup> The author (Tylkowa, 1989, p. 79) says that she realizes that identification of magic procedures is “considerably artificial”. She writes: “Magic acts accompanied most folk therapeutic procedures, i.e. those which could be rationally justified”. Consequently, she identifies magic procedure with irrational ones and the rest with rational ones.

<sup>10</sup> This opinion is voiced by, for example, J. Jastrzębski (1961, p. 135), who makes a reference to Moszyński. It is interesting that Jastrzębski noticed that “enlightened medicine” changed its views about the effectiveness of individual folk medications and practices. He also added that

cal beliefs or therapeutic procedures. Generally, they do not identify the reasons for such a distinction. One could think that reference to the views of official medicine is a concealed assumption. However, its paradigm undergoes constant changes and, secondly, the authors' opinions are formulated from the "common sense" point of view. In modern ethnology the subjective approach, which generally undermines any sense of such a division, is dominant. In this situation, it is difficult to speak only about culturally relativized "rationality". Any belief about an illness and its treatment can be considered rational if, according to the system of knowledge held by a given group, behaviour which is in harmony with these beliefs helps obtain desired results. It is not important how these beliefs are evaluated from the point of view of other systems of knowledge<sup>11</sup>. This was expressed in slightly different words by B. Good, an eminent American medical anthropologist (1994, p. 29): "what strays from rationality, assumed from the biomedical perspective, is not the result of ignorance or <superstitions> but is rooted in the culture, system of beliefs and practices which have their own <cultural logic> and perform adaptation functions". Such an approach can hardly find its place in Polish ethnomedical investigations. The "rationalistic" tradition is still dominant. It is significant that J. Burszta's remarks on that problem, quoted above, were ignored by authors of later works. The article by Z. Libera and A. Paluch (1988, p. 151) is a noteworthy exception. The authors criticize the opposition of rational and irrational elements in folk medicine<sup>12</sup> (cf. also Libera, 1995, pp. 8 - 11). Perhaps the theoretical and methodological works of such authors as M. Buchowski and W. Burszta, which present and promote the "subjective reconstruction of culture" (e.g. Buchowski, Burszta, 1992), will help change this state of affairs.

If we adopt the above understanding of "rationality", the question whether or not folk medicine contains a "rational nucleus", becomes pointless. I have already mentioned that this problem and attempts at looking for the medications and methods of folk medicine which could become part of official medicine were of particular interest to 19th century medical doctors and ethnographers (often the two professions were combined) and later could be traced in ethnomedical investigations. Some scholars (e.g. Moszyński) were skeptical about the value of folk medicine and the role it might play in official medicine. Others say that the latter benefited a lot from the former. For example, A. Paluch (1979, pp. 87 - 88) wrote: "Often some indications, recipes, folk therapeutic methods are part of magic formulae, spells, gestures, rituals

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"There are also facts that a procedure which an ethnographer would consider irrational, would not be considered entirely irrational by a doctor". In other words, the view of an ethnographer is not identical with the medical point of view.

<sup>11</sup> I have written about it elsewhere (e.g. Penkala-Gawęcka, 1983, p. 28; 1991, p. 46).

<sup>12</sup> Today, the relative character of the concepts "rational-irrational" with reference to folk medicine, is pointed out by medical sociologists (cf. W. Piątkowski, 1994).

and yet often contain the rational nucleus and are endowed with real activity. And they seem to be irrational only because of the <magic framework>". This position was severely criticized by L. Stomma (1986, pp. 193 - 195) who called it "the myth of folk medicine" and said that majority of folk practices and therapeutic means had no value for scientific medicine and that in folk medicine there was no place for experiments. Stomma wrote that "This does not mean that there cannot be <in folk medicine> recipes, more or less correct from the point of view of scientific medical knowledge. But this is very accidental (*ibid.*, p. 195). Paluch and others (e.g. Tytkowa) who spoke positively on the problem of the "rational nucleus" of folk medicine, refer directly or indirectly to the biomedical perspective. Also Stomma adopted this point of view, although his conclusions are entirely different. In my opinion, ethnologists should avoid judgements concerning the "rationality" of folk medicine, which is a position I tried to prove when I discussed the concept of rationality<sup>13</sup>.

Ethnographers often use the perspective of medical science when they try to classify the illnesses identified by folk knowledge. Usually, this classification is very simplified compared to medical nosology. But even the division is very general, a scholar encounters problems, particularly in the case of illnesses which are defined in the literature as "folk illnesses" or as "culture-bound syndromes", that is such ailments (or their syndromes) which do not have counterparts or have only approximate counterparts in biomedical classification<sup>14</sup>. In Polish folk medical knowledge these would include, for example, overstrain, plica and, as one can judge from an interesting study by A. Paluch (1994), consumption. When I discussed the monographs on folk medicine, I pointed out to problems that ethnographers face when they want to classify such ailments or illnesses into a system. It seems that a scholar should always provide detailed documentation on a given concept that would describe some ailments or, for that matter, avoid its automatic identification with a biomedical illness only on the basis of a similar name. The sense and meaning of the illnesses which clearly appear to us as "folk" illnesses and those which appear to be counterparts of medical illnesses should be determined (in accordance with the principles of humanistic interpretation, cf. Buchowski, Burszta, 1992).

Presentation of changes occurring in folk medicine is another problem that is encountered when reading ethnographic works on folk medicine. Most often

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<sup>13</sup> Obviously, these "rational" elements (from the point of view of biomedicine) in folk medicine can be looked for, or, in other words, the effectiveness of individual medications and methods can be tested by representatives of medicine and other natural sciences, for example, pharmacology. They can be assisted by, for example, ethnopharmacology (cf. Penkala-Gawęcka, 1994).

<sup>14</sup> There is extensive literature in world anthropology on this problem (e.g. Simons, Hughes, 1985. Cf. also Penkala-Gawęcka, in print).

this problem is treated very generally, as a necessary addition to the basic part dealing with the reconstruction of the "traditional folk medicine". This is a continuation of the 19th century approach to folk culture, one which never changes and always retains the old meanings. The works usually present a picture of an artificially isolated folk medicine in opposition to the "processes of changes", described very schematically. What is usually shown is the "introduction" of modern medicine (institutions, doctors, nurses) into villages and the restrictions imposed on folk medicine by these "modernization influence". Gradually, folk medicine becomes a relic. However, many beliefs and practices of folk medicine have been preserved and for this reason this is a domain of culture which changes more slowly than others. These works lack more elaborate analysis of the transformations of folk medicine; it is not presented "in the process of change". It is interesting that sometimes authors detect the older influence, that of the manor, the church, or popular literature, that transformed folk medicine in the course of its history, but omit, or are not interested in how new elements of various origin penetrate folk medicine<sup>15</sup>. And this influence and the transformations that follow it are more intensified than in the past. Perhaps because of the speed and scope of change many scholars are willing to treat folk medicine as a relic, more or less consciously acknowledging that what is being born nowadays is some new quality which cannot be called folk medicine. But irrespective of whether we adopt this position or we acknowledge that it is still folk medicine, continually changing but preserving many of its features, we should examine it as it is, without artificially isolating what we consider "traditional".

I would like to suggest the concept of "complementary medicine", understood very broadly, to be used with reference to all forms of beliefs and therapeutic procedures which exist outside official medicine (cf. Penkala-Gawęcka, 1991; 1993). From among many concepts used in Polish popular literature and world ethnomedical literature (such as alternative medicine, unconventional medicine, unorthodox medicine, natural medicine)<sup>16</sup>, I chose the concept of "complementary medicine" to emphasize that it is treated (by

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<sup>15</sup> For example, D. Tylkowa (1989, p. 61) writes in her monograph about hydrotherapy promoted by Rev. S. Kneipp, which became widespread at the end of the 19th century in villages of the Silesian Beskid Mountains. On the other hand, in a chapter on modern changes of folk medicine she does not mention transformations influenced by the mass media, various elements of unconventional medicine brought from towns, etc. The author only notices "on the one hand the transformations, and on the other — the tradition rooted in the inhabitants of the villages investigated" (*ibid.*, p. 106).

<sup>16</sup> I analyzed these concepts in detail in an article on the ethnological perspective in investigations of complementary medicine (Penkala-Gawęcka, 1993). It should be remembered that in Third World countries, unlike in Europe and the United States of America, only western medicine can have a complementary character, particularly where there are "great medical systems" with a long tradition.

subjects of medical activities) as a supplement and not an alternative to official medicine<sup>17</sup>. Usually this concept, like other, similar ones, is used with reference to such popular practices as homeopathy, bioenergopathy, acupuncture, acupressure, aromatherapy, reiki, magnetotherapy and many others. I think, however, that folk medicine fits the framework of complementary medicine; together with the practices mentioned above it makes up a set of proposals complementing official medicine<sup>18</sup>. This view is shared by W. Piątkowski, a medical sociologist, who has been dealing with this problem for many years and who wrote many interesting articles on this subject (1981; 1984; 1990; 1994 and others). In his pioneer book, *Spotkania z inną medycyną* [Meetings with a different medicine] (1990), in the section on “non-medical therapeutics” the author identifies autotherapy, folk medicine and “therapeutic practices of healers”. His classification is based on the type of practices and therapists. In this approach, however, folk medicine is limited to the practices of specialists – different folk therapists. But medicine practiced at home or among neighbours constitutes its important part. Likewise, the therapeutic activity of healers was separated from often analogous practices performed individually by nonspecialists (acupressure or dowsing). Autotherapy, on the other hand, is present in both types of complementary medicine. Likewise, different specialists can be found both in folk medicine and “unconventional practices”.

The use of the term “folk **medicine**” was opposed by W. Piątkowski. In his works he advocated that the term “medicine” be used only with reference to “scientific”, empirical and experimental, medicine (W. Piątkowski, 1990, pp. 15-16 and other works)<sup>19</sup>. He proposes to use the term “non-medical therapeutics” which, however, seems awkward. L. Stomma, a representative of ethnographers, questions the use of the term “folk medicine”. In his opinion, “the choice of recipes in ⟨folk medicine⟩ is based on ⟨Mendeleyev’s periodic table of elements⟩ – on a myth and not on a rational analysis of reactions and consequences” (Stomma, 1986, p. 195). These remarks are related to the criticism of views on the “rational nucleus” of folk medicine. I will not quote

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<sup>17</sup> Some scholars treat this “complementary” character differently. For example, W. Piątkowski (1990, p. 115), a sociologist, writes that perhaps in the future “there will be a need to introduce a new concept ⟨complementary medicine⟩ in place of the concept of ⟨non-medical medicine⟩”. This, however, requires deep changes in the system of medical care. What is important is to fully recognize the complementary character of unconventional medicine by representatives of official medicine.

<sup>18</sup> It is very difficult to find a general name for the unconventional practices mentioned above. W. Piątkowski (1990, pp. 22-23) describes them as “therapeutic practices of healers”. But they also include such autotherapeutic procedures as, for example, acupressure, tai-chi, hatha-yoga.

<sup>19</sup> The author notices that the scientific character of medicine differs, that there is arbitrariness in determining what “is medicine (science) and what is not medicine” (W. Piątkowski, 1990, p. 16). One could add that today there is greater awareness, at least in medical anthropology, of cultural conditions of so-called biomedicine, formally treated as objective and unquestionable.

here detailed arguments in favour of the term "medicine"<sup>20</sup>. In a nutshell, opponents look at folk or complementary medicine from the perspective of official medicine which tries to set a clear border separating it from such therapeutic practices (and knowledge) which do not meet the "scientific" criteria. According to this reasoning, if folk medicine does not meet these criteria, it is not medicine. In my opinion, however, it is simply not scientific medicine. Therapeutic folk (and, more broadly — complementary) practices differ because they are based on different systems of knowledge. But this is not a reason to abandon the prevailing linguistic custom<sup>21</sup>.

There are also some controversies pertaining to folk medicine itself. Many scholars pointed out close relations between folk medicine and magic, religion, and myth (e.g. Moszyński, 1967, p. 22. Also A. Paluch often refers to Moszyński in his works). Far reaching conclusions were drawn from this fact by L. Stomma. It seems that his use of "inverted commas" with reference to folk medicine questions the validity of the term itself, i.e. folk medicine is not medicine but some therapeutics. As he put it "⟨folk medicine⟩ is *summa summarum* a set of combinations, determined by ⟨Mendelejev's periodic table⟩, of elements of opposition and mediation". This restriction is opposed by Z. Libera and A. Paluch (1988, pp. 152 - 153). They say that myth, although very important, does not exhaust the domain of folk medicine. The authors generally oppose the reductionism of structuralism because "At the level of ⟨Mendelejev's periodic tables⟩ there is no medicine, religion, magic or art; there is only a set of ⟨elements⟩ which organize all kinds of human activity within the framework of a given culture, in accordance with the same assumptions". And further on they argue "Medicine is an integral part of a cosmological system. It functions as one of the tools to maintain order, cohesion, social and cosmic continuity, sustains the harmony in relations between man and his environment (...) and therefore all medical problems have a mythical, magic, religious, moral, etc. nature" (*ibid.*, p. 153). Hence, when dealing with medicine, one should see it in a wider cultural perspective; this, however, does not stop us from making it a separate discipline. I agree with this opinion. I would like to add that folk medicine (or more broadly — complementary medicine), understood as a system of knowledge being part of the general vision of the world/cosmos (cf. Stomma, 1986, p. 193), regulates a specific, separate type of social practice<sup>22</sup>.

<sup>20</sup> I have presented them in another articles (1993). It is interesting that today some doctors stress the lack of borders between scientific and complementary medicine, although the position which puts the latter in opposition to the former is still dominant.

<sup>21</sup> A similar discussion was held in anthropology on the validity of such terms as "primary law" or "economics of primary societies". Scholars are of the opinion that such concepts as "law" and "economics" can be referred to different cultures if meanings relativized to the Euro-American cultural circle are not substituted for them.

<sup>22</sup> This practice is organized around the "supreme value", i.e. health. Health is a culturally

The structural approach, used for the first time with reference to ethno-medical problems by L. Stomma (1986), contributed much to Polish investigations of folk medicine. It helped look differently at problems treated in the literature in a routine manner, duplicating the old, 19th century schema. The categories of opposition and mediation, used by Stomma with reference to beliefs about illnesses, recipes, means and methods of folk medicine, were adopted by scholars who did not fully accept the structural approach. A. Paluch with Z. Libera (1988), expressing their reservations, analyzed plica semiotically and structurally — *Plica polonica*. In an article on consumption (1994, p. 199) A. Paluch spoke very clearly about the restrictions of the structural-semiotic orientation, using, however, modified concepts to analyze this illness. The use of structural categories can be found in more recent articles on the folk medicine of individual regions (e.g. Ruszel, 1993).

Folk medicine and complementary medicine are also investigated by representatives of other branches of science. Results of their investigation are often very valuable to ethnologists dealing with folk medicine. Much has been contributed to the studies of complementary medicine by sociologists of medicine, particularly M. Sokołowska (1980a; 1980b; 1986; 1987) and W. Piątkowski (1981; 1984; 1990; 1993; 1994). A psychologists' report presenting the results of investigations of healers (Mellibruda et al., 1984) is, unfortunately, an exception. Ethnology can profit much from investigations conducted by historians of medicine. Works by S. Szpilczyński (1956) and popular articles by Z. Kuchowicz (1954) are well known. Currently, interesting studies are conducted by B. Płonka-Syroka (1994), A. Syroka and J. Jeszke (1986) who deal with folk medicine in Wielkopolska. Ethnopharmacological and ethnopharmaceutical studies were developed after the war by J. Muszyński (1956). Presently, they are conducted by the Pracownia Historii Nauk o Leku [Department of the History of Sciences about Medications] at the Institute of the History of Science, Education and Technology of the Polish Academy of Sciences (established in 1989 and earlier known as the Department of the History of Pharmacy). Ethnopharmaceutical investigations are understood as a description of traditional phytotherapy and evaluation of the effectiveness of individual floral ingredients from the point of view of modern pharmaceutical knowledge (Kuźnicka, ed., 1986, p. 16). The department invites cooperation of ethnologists and representatives of other humanistic disciplines; this cooperation has already resulted in interesting articles (Kuźnicka, ed., 1986; 1989; 1993). In this case, interdisciplinary work is focused on the examination of the traditional medications used in folk medicine. Complex, interdisciplinary

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relativized category, just like an illness. One should remember that sometimes any action attempted to accomplish this value (health) is not undertaken. This happens when other values, e.g. honour or respects of ancestors, are put before it (cf. Penkala-Gawęcka, 1983, pp. 26-28).

studies of complementary medicine are also needed. Ethnomedical investigations of complementary medicine have just started and cooperation, particularly with sociologists of medicine, is very useful for us.

In this short article I have discussed only some problems; their choice was very subjective<sup>23</sup>. I have tried to show the continuity of some motives and formulations in Polish investigations of folk medicine. The traditional approach is still dominant, yet new works contributed a structural approach which gives us a tool useful in many ethnomedical analyses<sup>24</sup>. Complementary medicine is a new research area which ethnology should not avoid. Studies of complementary medicine perfectly fit the trend of "modern anthropology".

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<sup>23</sup> I have not discussed Polish investigations of the traditional medicine in other countries. Let me mention works by M. Czaplicka (1914), particularly her studies of arctic hysteria. Furthermore, the present author conducted investigations of traditional medicine in Afghanistan, described in a few articles and books (1988).

<sup>24</sup> We should also mention an excellent book by M. Sznajderman (1994), which is an interesting *novum* in Polish anthropological investigations of illnesses. Excellent paradigms for the latter have been set by world literature, for example the works by M. Foucault.

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