

## "Curing and Crippling": Biomedical and Alternative Healing in Post-Soviet Russia

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### **Abstract:**

From its inception after the 1917 Bolshevik Revolution, the centrally controlled Soviet medical system attempted to monopolize medical practice-stigmatizing and punishing alternative practitioners who worked outside the state system. Nonetheless, alternative medical practitioners survived the seven decades of Soviet power. Ordinary people never stopped seeking them out, and since the late 1980s, the number of alternative healers in the Russian Federation has increased astronomically. The aim of this article is to analyze the forms of alternative medicine that exist in contemporary Russia and to offer an explanation for their continuing popularity in terms of popular conceptions of health and healing, the functioning of the state medical care system, and the attitudes of Russian physicians toward alternative healing.

### **Article:**

In the years following the Revolution of 1917, the new Bolshevik government created the world's first national health care system, a highly centralized structure designed to provide Soviet citizens universal access to medical services at no direct cost. From its inception, the system reflected the commitment of its organizers to "modern" biomedicine. They excluded other kinds of healers and implemented a variety of measures designed to wean the masses from their "dangerous reliance" on more traditional forms of treatment.

The seriousness with which this endeavor was regarded is suggested by the warning of a prominent late nineteenth-century physician about peasant medical practices: "Many healthy people die in Russia because of [them], and even more are crippled and remain broken, weak, or feebleminded for an entire lifetime" (Frieden 1981, 91). Imperial Russia did, in fact, have the highest mortality rates of any European nation, and the physicians who ventured into the countryside in that era quickly discovered that they faced powerful local opposition (Ramer 1991; Ransel 2000). While some peasants welcomed the medically trained outsiders, many others regarded the doctors' interventions as at best irrelevant-perhaps even dangerous or sacrilegious. During cholera epidemics in the 1890s, medical personnel were violently attacked by angry peasants suspicious of both their methods and their motives (Frieden 1981).

Like their predecessors, Soviet era medical leaders regarded stamping out health-related "superstitions" and suppressing the activities of nonphysician healers as vital to the nation's health. Over the course of the twentieth century, substantial resources were devoted to those tasks. Nonetheless, at the dawn of the twenty-first century, neither biomedical nor alternative practitioners have total hegemony over the minds and bodies of Russian patients. Despite repeated efforts by Soviet authorities to marginalize or punish alternative healers, ordinary people never stopped seeking them out. In the post-Soviet era, these practitioners are more visible than ever. Our aim in this article is to examine some aspects of alternative medical practice in the USSR and in post-Soviet Russia and to analyze factors that help to account for its abiding popularity. In particular, we focus on popular conceptions of health and healing, the functioning of the state medical care system, and the attitudes of Russian physicians toward alternative methods of healing.

## THE DATA

The data on which this analysis is based were collected in St. Petersburg, Russia, between 1992 and 1999. They include in-depth interviews with practicing physicians as well as surveys and in-depth interviews with adult members of the general population. In 1993-94, we conducted intensive (2-3 hours on average) structured interviews with a representative sample ( $N = 80$ ) of physicians. The sample includes doctors from all major specialty areas of medicine and all of the different branches of the urban medical care system. In the interviews, we questioned our respondents about their career patterns, the content of their work, and their attitudes toward colleagues, alternative healers, patients, the medical care system, and the profession's role in the larger society. In 1999, we conducted followup interviews with these same physicians to assess changes in their working environments, professional attitudes, and behavior.<sup>1</sup>

In addition to these physician interviews, we conducted two mass surveys ( $N = 1,500$  in 1992;  $N = 1,198$  in 1998) with random stratified samples of the adult population. Each survey was followed by lengthy structured interviews with a stratified subset of survey respondents ( $N = 44$  in 1994;  $N = 32$  in 1999). As our primary goal in collecting these data was to analyze health inequalities, we asked questions designed to assess health status, lifestyle, material well-being, health behavior, attitudes toward health and illness, and the role of informal social networks in medical help seeking. Other questions focused on utilization of and attitudes toward the medical care system, including cooperative medicine, private physicians, and alternative healers, as well as state institutions and practitioners. We also examined popular views regarding the role of the medical profession and the capabilities and the limitations of modern medical theory and practice.

## USE OF ALTERNATIVE HEALTH CARE PROVIDERS

These data offer ample evidence that use of traditional home remedies and resort to nonphysician healers continued throughout the Soviet era. Not surprisingly, those behaviors were more common among people who lived in rural areas; however, even urbanites sometimes called on the services of knowledgeable old women (*babki*), folk healers (*znakharki*), and psychics (*ekstrasensy*). We asked our lay interview respondents, all of whom grew up in the 1950s and 1960s, whether their parents had sought care for them from experts other than physicians. These questions stimulated numerous memories of childhood visits to traditional healers for problems as diverse as warts, styes, teething pains, injured limbs, infected wounds, allergies, sleepwalking, stomachaches, umbilical hernias, and speech defects.

While our respondents typically described a specific intervention, several also discussed the broader role of healers in their villages: as local experts on healing methods and as prognosticators. When recounting the death of a younger sibling, one woman recalled the following:

We had an old woman (*babul'ka*) in the village. She told mama from the beginning that children like that don't live long. [My sister] was very beautiful and wise beyond her years. God takes children like that. Maybe she evoked that evil result (*nakarkala*) ... or perhaps she just knew.

Another woman reflected on the extensive knowledge of an elderly woman from her village:

[She was] always talking and looking at what kinds of herbs grew around her. She gathered them all the time and dried them for the winter. "In the winter," she would say, "everything is useful." There are so many methods. We've simply forgotten them all. They help against any illness. You just have to know what works for what. Folk healers (*znakhari*) used to know a lot, but they were persecuted.

Village healers were sometimes fined or even imprisoned for their activities (Forrester 1998). Nonetheless, demand for their services never disappeared, and clients protected *znakhary* and *babki*, who provided them with care they could not get from the state medical care system. A particularly dramatic example is the case of abortion, which throughout most of the Stalin era was illegal. In desperation, many women turned to local healers. Describing the primitive and unsanitary techniques used by a lay abortionist in her village, a woman

interviewed recently by Ransel (2000) commented that, “Many women died in this way, but no one turned her in” (p. 110).

After Gorbachev’s policies of *perestroika* and *glasnost* increased the legal options for alternative medical practice in the late 1980s, both the number and variety of practitioners dramatically increased. Those practicing in post-Soviet St. Petersburg include, in addition to traditional folk healers and psychics, homeopaths, acupuncturists, herbalists, osteopaths, hypnotists, bioenergeticists, advocates of special diets and regimens of fasting, and experts on various Asian medical theories. Among these practitioners are widely renowned healing personages to whose public appearances have flocked masses of people in St. Petersburg and elsewhere throughout the Russian Federation. One of the best known of these is Anatoly Kashpirovsky, a trained physician whose nationally broadcast “teletherapy” healing sessions were watched by millions of people in the 1990s (Vinogradova 1996).

One out of five (21 percent) of the people we surveyed reported that they had been to a traditional folk healer or to another kind of alternative practitioner at least once. (This percentage remained essentially unchanged between 1992 and 1998). Almost everyone knows people who have sought help from such healers, and relatively few categorically rule out the possibility that—given the right circumstances—they might do so as well.

### **“CURING AND CRIPPLING”: PERCEPTIONS ABOUT RISKS AND BENEFITS**

As in other societies, urban Russians have complex medical help-seeking strategies. Decisions about where to go for expert help are influenced by social networks as well as by overall consumption strategies. They are also a product of prior interactions with the medical care system and popular perceptions about health and healing.

One widely held perception is that ordinary people are capable of understanding their own health problems without the assistance of experts. Claims to know, understand, or feel the state of one’s “organism” are common among the *Peterburgtsy* we interviewed. More than half (59 percent in 1992; 54 percent in 1998) of those we surveyed agree that “individuals understand their own health better than any physician.” As one man observed, “I know what I need. I have experience and I know what helps me.”

This confidence in self-knowledge is accompanied by a strong belief in the effectiveness of the remedies they choose for themselves. More than two-thirds (70 percent) say that at least some home remedies are better than professionally prescribed medications, and about half that many (37 percent) agree with the rather radical proposition that if people are patient enough they can recover from almost any illness without medical intervention.

Armed with this self-confidence, the people of St. Petersburg approach decisions about where to go for medical care with a combination of skepticism and pragmatism. Their skepticism about biomedicine derives in large part from concern about its methods—especially what people perceive to be its reliance on radical interventions and nonnatural remedies.

Most *Peterburgtsy* express a generalized distrust of nonnatural, that is, synthetic or “chemical,” medications. Natural methods, which include most home remedies, are almost universally regarded as harmless because their components are believed to be similar to the makeup of the human body (Pesman 2000; Tsarfis 1987). Thus, they help the body heal itself. Synthetic medications, by contrast, are distrusted as too powerful. The chemicals can accumulate in the body, people say. They can subvert the body’s own natural immune responses and cause treacherous side effects. This tendency of synthetic medications to cause new problems while attacking the original one is captured in a proverb, invoked repeatedly by our interview respondents: “they cure one thing while crippling something else” (*odno lechat, drugoe kalechat*).

While contemporary concerns about environmental degradation may well have intensified worries about synthetic medications, these sentiments are not new. The fact that many of our respondents shared childhood memories of discussions between parents and grandparents regarding the relative merits of natural and synthetic

medications indicates that their roots are much older. Often, it was the grandparents of our middle-aged respondents who were the most ardent advocates of natural remedies: “my grandmother always used to tell me, ‘take fewer tablets. They are full of chemicals.’”

When biomedicine uses powerful and invasive nonnatural methods, people believe the results can be catastrophic. As illustration, they offer stories of treatment regimens that complicated rather than cured the ailment. Some of the most poignant involve children. One man recounted at length his futile efforts to persuade physicians not to give his son medications to which the child indeed proved allergic. A woman accused doctors who had cared for her son of giving him such large doses of unnecessary medication that his kidneys were permanently damaged.

As suggested by these examples, the “dangerous” propensities inherent in biomedical approaches to healing can be exacerbated by less than competent medical practitioners. Concern about medical error is widespread among *Peterburgtsy*. These concerns have been exacerbated by the post-Soviet medical care crisis; however, they are not new. “Ninety percent of the doctors I’ve come into contact with are lousy,” complained one man. “I don’t trust them,” asserted another, whose heart condition has not lessened his determination to avoid the medical system. In a city with a reputation for one of the best medical care infrastructures in the Russian Federation, more than two out of every five (42 percent) people say that, on at least one occasion, medical treatment made them worse instead of better. Almost as many (36 percent) report that the care provided them by one physician was criticized by another.

Fear of being “crippled” in the process of being “cured” makes people wary of biomedically trained physicians, yet it does not appear that this fear is the primary force propelling them in the direction of alternative practitioners. Our data do suggest that few *Peterburgtsy* actually fear nonphysician healers. At worst, skeptics argue that their ministrations bring little or no benefit. Some of our respondents described unsuccessful ventures into this domain, but none expressed concern that alternative medical treatments might actually harm them.

All of their skepticism toward physicians notwithstanding, only one in ten of the people who use alternative healers say that they do so because they trust them more than doctors. For about one in four, nontraditional methods are a last resort after all other attempts at treatment have proven unsuccessful. Typical is the case of a man who described his desperate attempts to keep his mother from dying of cancer:

I never really believed the diagnosis they had given her and for some reason was certain that I could cure her—even though I am not a doctor. That was when I began to investigate the possibilities of nontraditional medicine.... Because of my efforts I learned of an [alternative] treatment for cancer.... I haven’t actually gotten it yet because there’s been no reason to. But I’m holding onto [this knowledge] as a weapon. If any of my relatives should develop that same diagnosis I’ll give them the name and address.

In most cases, the decision to visit alternative practitioners is motivated by far more limited and pragmatic considerations, such as the desire to receive some specific procedure, get confirmation of an earlier diagnosis, or learn more about a problem. As one woman put it, “we go when we have some concrete complaint” *Peterburgtsy* still take their offspring to *babki* for such things as umbilical hernias and speech problems. The people we interviewed have also turned to alternative healers in recent years for help with such diverse problems as alcoholism, tobacco addiction, pain management, lactation problems, eczema, allergies, sinus problems, hepatitis, and even bad luck.

Regardless of the specific reason for which they seek help from alternative practitioners, many *Peterburgtsy* learn about them from lay referral systems. Our respondents have participated in these networks both as recipients and referral agents. As is true in other societies, it is family and friends who not only introduce each other to non-traditional forms of medical care but eagerly help to establish necessary connections (Pescosolido 1992). One man described how he and his wife had found a bioenergeticist who helped to treat his daughter’s

back problem: “it was on the basis of recommendations. [We know] a lot of people who had already been there, so we knew that this was a good doctor.” Chronicling the successful treatment of her daughter, a woman explained how she had found such an effective healer: “[a colleague] told me that there was a very good homeopath at one of the cooperatives. So we went there. I’ve given the address to many of my friends. He’s helped a lot of people.” Another who has been faithfully attending public sessions conducted by an alternative healer said that she was introduced to him by a passerby on the street. She was so pleased with the result that she returned with her daughter and subsequently persuaded several friends to join them: “We’ve been going for a year now. It’s getting harder and harder to get tickets.”

The importance of these social connections is further evidenced by the fact that individuals whose initial encounters with alternative healers are ineffectual persist when significant others are involved. One man recounted at length how his wife and mother-in-law had dragged him to first one healer then another. They were invariably helped, but he said that he never felt any effect. Even watching Kashpirovskii on television initially did nothing for him, he recalled, “but the second time I watched I had a painful broken collarbone. Kashpirovskii said to put a container of water next to the television to be used later for pain.” He followed those instructions and reported enthusiastically that “it made the pain go away when nothing else helped at all.” Like the rest of his family, he has since become an advocate of alternative healing.

In sum, people tend to be more wary of the methods of biomedicine and the shortcomings of its practitioners than they are of alternative healers. Experiences with the latter may not solve their problems or even make them feel better, but they worry less about being crippled as a result of their interventions. Nonetheless, there are fewer people who actively seek out alternative health care providers by themselves than there are those who are coaxed, cajoled, or coerced to join significant others who are already using them.

#### **“CURING AND HEALING”: PERCEPTIONS ABOUT RELATIONSHIPS WITH HEALERS**

Very few *Peterburgtsy* regard the ideal physician as a mere technician whose role is to mend damaged bodies. Most expect far more. They believe that doctors should also exhibit particular qualities of character, without which their ability to heal is severely limited. Some even assert that it is actually those “spiritual” qualities that make healing possible at all: “A real doctor is one whose mere presence makes the patient feel better—without giving any pills or drops or injections.” “The doctor speaks and you experience much relief. You become confident and then you don’t even need any medications.” The role of the expert, in other words, involves far more than the application of technical expertise to mend or cure a bodily malfunction. It should also foster healing, helping those who are suffering to return to a state of health and well-being. True healers help patients to make themselves healthy. For this, “they don’t need strong medications.”

Good doctors are specialists with good educations, high qualifications, and they work in good institutions. Equally, or even more important, however, are human or spiritual qualities, particularly those that manifest themselves in interactions with patients. The men and women of St. Petersburg describe ideal physicians as sympathetic, compassionate, and caring. They always listen to patients, are attentive to their concerns, and offer warm words of support. People do not regard these as extraordinary or superhuman qualities. On the contrary, they represent the most essentially human ones. A good doctor, as one woman put it, is “a Person with a capital P.”

Most people report mixed experiences with physicians and with the state medical care system. Very few have never encountered a “good” doctor, but experiences with “bad” ones are fairly commonplace. Despite a widespread preference for physicians who will discuss their problems with them and make recommendations about treatment, more than half (50 percent in 1992; 54 percent in 1998) report that most of the doctors they have dealt with simply tell them what to do without offering any explanation.

Ordinary folk are offended by what they perceive as rudeness and lack of concern for their well-being on the part of their medical practitioners. Approximately half (54 percent in 1992; 48 percent in 1998) say that doctors act as if they are doing their patients a favor by treating them. A similar proportion (46 percent in 1992; 49

percent in 1998) complain that doctors are more concerned with their own problems than they are with treating their patients effectively. Even descriptions of what physicians should be like suggest the kinds of negative experiences people have had. When you are in a good doctor's office, contends one woman, "he or she doesn't look at you like you were an object and carry on conversations with other extraneous people." Doctors should not be rude or callous, people insist. They should listen to you and not immediately close your chart as soon as you enter their offices.

Complaints about interactions with physicians, the practitioners of biomedicine, are common, and the people of St. Petersburg are convinced that there is a relationship between the quality of healer-client relationships and the effectiveness of therapy. Alternative healers, on the other hand, are not perceived to be indifferent or hostile to their clients. No one complains that they receive too little attention from those practitioners or that the healers they have visited are rude to them and accuse them of malingering.

This is hardly surprising given the different circumstances under which care is provided by most alternative healers. While some healers rent or "borrow" space in state medical institutions, others practice from their own or someone else's home or they come to where their clients live. Some of these practitioners almost certainly experience time pressures as they interact with clients, but the informality of the settings decreases the likelihood that they will be perceived as formal uncaring bureaucrats. Moreover, unlike physicians in state practice, the success of most alternative practitioners actually depends on their ability to satisfy their clients enough that they will choose to return and ideally bring others with them.<sup>7</sup> One of the most effective means of achieving this end is providing the kind of personalized healer-client relationship that patients value but often do not have with biomedically trained physicians. Research on alternative medical care providers in numerous cultural settings has demonstrated that their ability to satisfy this demand is one of their greatest assets (Kronenfeld and Wasner 1982; Maddocks 1985).

Our respondents are sometimes critical of their relationships with alternative practitioners. As is true of their dealings with physicians, people tend to focus on the spiritual or moral dimensions of the relationship. This aspect of the interaction may be even more central here because the alternative healer's legitimacy is not grounded in the supposedly value-free rationality of science. Rather, it comes from more explicitly value-laden realms, such as tradition, the supernatural, and personal charisma.

With the possible exception of those who venture into alternative medicine solely to benefit from a specific procedure, people expect to be healed rather than merely treated. They also expect that the practitioners who minister to them do so in response to a higher calling. Nothing puts that into question so much as demands for cash payments for services rendered. Three-quarters of a century of "free" Soviet medical care has certainly conditioned attitudes toward paying for medical care. Nonetheless, people generally accept the notion that physicians need to earn a living from their work. Sympathetic individuals even join members of the medical profession in arguing that doctors should be much better paid.

Authentic "healers," on the other hand, are not supposed to be motivated by economic gain. While their clients expect to reimburse them for their services, they are critical when the initiative comes from the other side. The following account of a satisfied client suggests what people believe is appropriate:

[My youngest son] was born with an umbilical hernia. He didn't sleep for eight months. He screamed and screamed. After he had gotten a little bigger we were advised to take him to a particular old woman (*babushka*). She gave us some enchanted (*zagovorennaya*) water and I asked her how much we owed her. She said, "One should never say such things. As much as *you* think right." She told us what to do. She said to do it three times, but I think we only had to do it once. I still remember waking up and thinking, "Good grief! It's quiet. There's no crying and it's morning already."

It was standard practice in the past for village folk healers to receive payment in whatever form of "currency" their clients could afford to spare, and they were more likely to receive mushrooms, potatoes, or poultry than

rubles. Present-day expectations that clients should dictate the form of reimbursement may well be linked to such traditions, but they are now generalized to other types of alternative healers. Those who violate these expectations expose themselves to charges of greed and charlatanism: “I went to three sessions [with an Asian medicine specialist],” reported a man with a serious and long-standing interest in alternative healing. “The only thing I didn’t like was that he collected money. *That means he’s not really a healer.* He just presents himself as one to make money.”

When money is inserted directly into the relationship between practitioner and client, people believe that the healing process may be compromised. A woman with numerous personal and health problems described in some detail a disappointing session with a psychic healer. She linked the perceived failure of the intervention to the healer’s up-front demands for a large cash payment:

I left out of there, stopped on the staircase, and thought to myself: “I handed over my money but walked away with all the same problems.” Of course I didn’t go back and I won’t use that route again. But I would probably go to another healer if I knew of a good one.

### **COMPETITION AND COOPERATION: PHYSICIAN PERSPECTIVES ON ALTERNATIVE HEALERS**

The efforts of Soviet medical leaders to control alternative practitioners varied over time. In some periods, they were far more determined and punitive than in others. In an analysis of the contents of *Zdorovie (Health)*, a popular health magazine established in 1955, Gurjeva (2001) demonstrated that “official” views of alternative healing (particularly folk medicine) also changed over the course of the postwar period. Initial efforts to rationalize it were followed by periods of hostility, debunking, and prosecution that lasted more or less until the Gorbachev era.

In the early 1990s, *Zdorovie* began to publish articles that were much more favorably disposed toward alternative medical methods, and many of the physicians we interviewed in post-Soviet St. Petersburg clearly share that point of view. We asked our eighty respondents to discuss a variety of forms of alternative medicine, including acupuncture, folk healing, homeopathy, hypnosis, osteopathy (*manual’naya terapiya*), and psychic healing (*ekstrosensornoe Uozdeistvie*).

With the exception of psychic healing, the majority of these biomedically trained practitioners told us that they regard each of these alternative methods as a valuable therapeutic tool. Some indicated that they have referred patients to acupuncturists (31 percent), homeopaths (25 percent), folk healers (18 percent), and osteopaths (14 percent). A few physicians even claimed to have sought out alternative providers for their own health problems. Our respondents discussed visits to acupuncturists (16 percent), folk healers (15 percent), homeopaths (14 percent), psychic healers (11 percent), and osteopaths (5 percent).

The arguments they offer to explain their positive inclinations toward alternative methods are, first and foremost, pragmatic: “Anything that helps the patient is okay.” They are also grounded in the assumption that healing depends on the patient as much as the healer. As a pulmonologist expressed it,

We have within us some kind of great power, not understood and studied by nobody. We can do miracles with our own health. But how do we release it? If an old woman (*babulia*) can do it ... for God’s sake (*radi boga*)!

Acknowledging the limitations of biomedical intervention, a polyclinic administrator asserted,

any method is acceptable if the patient believes in it and if the method isn’t harmful to health. I can acknowledge any folk methods and spells and extrasensory methods as long as they serve the interest of health. I can’t say whether they’re effective or not. That’s another matter. But sometimes, what from

the perspective of the physician has little effect may, from the perspective of the patient, be more useful than an arsenal of pills.

Few St. Petersburg physicians would go so far as to concur with the assertion of one general practitioner (*terapevt*) that “our patients know better than we do.” While many ordinary *Peterburgtsy* tend to see things that way, most doctors have a great respect for biomedical knowledge. They regard these alternatives as complementary methods rather than as substitutes for the treatments they provide, and they are concerned about the poor regulation of alternative practitioners in post-Soviet Russia.

They are particularly critical of the form of alternative healing they perceive to be most susceptible to charlatanism and least amenable to regulation: psychic healing. Psychic healing is derided as ineffective, overtly harmful, and even sinful. Some physicians deny it any validity: “it’s just a type of hypnosis.” More are inclined to regard the problem as the by-product of an uncontrolled marketplace. As one put it, “There are psychics. I’ve encountered them. I know very competent psychics who can treat, help, diagnose. Unfortunately, 90 percent of those around them are rogues. That’s the tragedy”<sup>4</sup>

A few of the physicians we interviewed are broadly critical of alternative medicine in general. The most outspoken were oncologists and psychiatrists who claimed to have seen negative outcomes from patients who had delayed treatment and/or suffered psychologically at the hands of charlatans. On the whole, however, biomedically trained practitioners in St. Petersburg are comfortable coexisting with other kinds of healers. Some are incorporating alternative techniques into their own practices.<sup>5</sup> Their willingness to see each other as partners rather than as competitors suggests that the medical marketplace in post-Soviet Russia is likely to remain a pluralistic one for many years to come.

## **A CONCLUDING NOTE**

The conventional wisdom is that Russians are very passive consumers of medical care (Curtis et. al. 1995). Our analyses of the behavior of those who live in St. Petersburg suggest that the reality is far more complex. We have found a wide range of medical help-seeking strategies in that urban population. There are those who do their best to avoid any contact with health care providers whatsoever. There are also people who aggressively pursue each and every opportunity they can find. Not surprisingly, these diverse strategies are not randomly distributed across the urban social structure. While there are a few exceptions, in general there is a strong positive relationship between socioeconomic status and aggressive pursuit of health care options—both within and outside of the traditional medical system (Brown and Rusinova 1997).

Despite widespread skepticism regarding the methods of biomedicine and criticism of the incompetence and manner of many of its practitioners, very few of the men and women of St. Petersburg have abandoned it completely or put themselves unconditionally into the hands of alternative healers. On the contrary, the state medical system, dominated (albeit not exclusively) by biomedically trained physicians, remains at the center of most people’s approaches to dealing with serious health problems. Consider the words of this woman, a first-generation member of the urban intelligentsia:

If it’s something serious, of course, we’ll go to the polyclinic and to some hospital where there are experienced physicians. Or we’ll sign up with some professor. We’ll go everywhere if our health is threatened: to a psychic healer or to an herbalist, to a folk healer, to anybody. We’ll go everywhere.

Alternative healers tend to be sought out for relatively minor problems, or when conventional medical therapies have failed to bring relief, or even in the hope of attaining a more elevated state of personal wellbeing. Physicians rarely discourage this behavior. Indeed, they are as likely to use alternative providers as other *Peterburgtsy*. Still, biomedicine remains the method of choice for almost everyone in life-threatening situations. Dislike of its “harsh” and nonnatural methods does not deter people from using it. As one man observed, “There are situations that demand powerful methods.” “In treating one illness they just bring on



another,” commented another. “But, of course, there are serious illnesses you have to treat with strong medications. You just have to.”

## Notes

1. We were unable to locate fifteen of our original respondents for follow-up interviews; however, we were able to identify other physicians matched with the ones we had lost for medical specialty, gender, and age.
2. There are some healers whose livelihood does not depend on recruiting and maintaining clients. Regarding their healing powers as a potentially burdensome divine gift, they may try to limit their patient loads. People interviewed by Forrester (1998) recounted stories of "genuine healers" who "get sick or suffer psychological breakdowns because they take on too much of their patients' negative energy" (p. 13).
3. Forrester (1998) reported that people she interviewed in Karelia told her that God sometimes takes away the powers of those healers who "become greedy and start asking for big money and expensive gifts."
4. One in ten mentioned Kaspirovsky by name. All who did so were critical of his activities.
5. Several individuals noted that they had recently been studying homeopathy, acupuncture, or osteopathy. Two were even studying psychic healing.

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