

LEGITIMACY AND AUTHORITY OF FOLK MEDICINE PRACTITIONERS IN POST-
SOVIET KAZAKHSTAN

by

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Abstract.

The thesis describes traditional medical practices in Kazakhstan. The research project applies the Weberian concept of “legitimacy” to folk healing in the context of Kazakhstan. The research project has several objectives. Firstly, the paper covers the historical and modern representation of folk medicine by the state and Kazakhstani society along with the commercialization process of folk healing. Secondly, it classifies different types of healers providing their services and discusses the role of religion in Kazakhstan folk medicine. Lastly, the analytical part of this project explains the dynamics behind the legitimization of folk medical practices by healers, patients and the state. The project focuses on identifying the ways in which traditional Kazakhstani healers wield legitimacy into their practices. The purpose of this thesis is to analyze the legitimization strategies employed in non-biomedical healing practices in contemporary Kazakhstan.

Folk medicine in Kazakhstan has a long history of different social and political periods that have transformed it into its current shape. Through those events folk healing has become an inseparable part of a Kazakh culture. The social perception is that this sector of medicine has a huge potential to grow in the foreseeable future. There are different types of folk healers in Kazakhstan that vary depending on their specialization. Although there are lots of similarities among healers, different healers tend to use different techniques to legitimize their practices. According to the results of the project, when deciding to approach a folk practitioner, the most influential factor for the Kazakhstani society is the traditional authority of a certain healer. Individual characteristics and the political implications also play a significant role in providing legitimacy to folk healers, though they were not given as much emphasis by the healer-respondents as legitimation through traditional knowledge.

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Introduction.

Motivation to study the topic.

In my childhood I was told many stories about the supernatural beings and other worlds. I was so receptive back then and listened to every story with utmost interest. I remember once my uncle told me how he observed the performance of a *baqsi*¹. He told me that the *baqsi* was going into trance, dancing and jumping eccentrically around the patient while speaking to the spirits and drawing their powers to cast out the evil spirits. My uncle said it was one of the most spectacular things he has seen in his life. As I approached my teenage years, I started to sort out the stories I have been told as a child and wonder how they were designed and what are the reasons people, including me, believe in them. As a child and then a teenager, I used to spend my summer holidays in two *auls*² (Aqsu-Aiyuly and Aktau³) as both of my parents were originated from Central Kazakhstan rural areas. They were typical Kazakh villages with about 100 houses, 1 or 2 administrative buildings, a café, and a school. The main occupation in such *auls* is usually livestock breeding. *Auls* are considered to be the preservers of the old traditions in Kazakhstan. These regions of Central Kazakhstan were addressed as the Kazakh steppe, full of traditions, legends, and believes.

Many people who currently live in this steppe practice different forms of folk healing, and there are histories of folk healing practices that are part of the current construction of folk medicine (Dzhumagalieva, 2020). During those years, I have been a witness to several healing rituals that I did not understand but was told to have belief in my heart. Most of them were preventive measures. As far as I remember, the most common one was called *ushyktau*⁴. I often

¹ A Central Asian shaman (one of four types of Kazakhstani healers which I describe in Chapter 2).

² Kazakh village

³ Auls in Central Kazakhstan

⁴ A small-scale folk healing ritual for cleansing a child's soul where a responsible adult circles a small bowl with salt three times over the child's head, each time making the child spit into the bowl, while saying basic Quranic prayers.

experienced *ushyktau* during my childhood. It is a common preventive measure for children used against the actions of *til tiyu* and *koz tiyu*⁵. *Til tiyu* and *koz tiyu* are the practices when someone sort of “curses” you by saying words or just staring/looking at you. This “curse” is usually unintentional but can also be intentional. For example, when there is a newborn child, Kazakh people try not to show them, especially their faces, to the public because some people, especially those women who does not have children of their own, may fancy the newborn so much that it can accidentally activate the “curse”. This can cause a physical distress for the child, such as an abrupt body temperature change, endless anxiety, crying and lack of appetite, etc. The process of *ushyktau* is done by the elderly, though not any of them because it should be performed by skillful and confident people from the healer lineage. Otherwise, it may be counteractive and cause damage to healers themselves. Although I was often exposed to such healing procedures, I found it difficult to understand folk medicine, though I never questioned them as they were very common and disperse at the time. This lack of comprehensibility only enhanced my interest in folk healing and how some people would prefer visiting a folk practitioner over a doctor in the hospital.

When I was sixteen I attended a funeral for a distant relative, my aunt’s brother. The funeral itself occurred over three days and took place in the countryside. Kazakh people normally bury their deceased in the *aul* graveyard near their ancestors. My aunt, my mother’s cousin, fainted when she saw the body of her brother and started to tremble. I was in farthest room where people brought her and the healer followed them. She, the healer, was quite old, which was a quite a common characteristic for the rural healers. I have been struck by the scenery I have seen in that room. The actions were not very complicated but just very bizarre. The healer drank some water which she brought with her and spitted that water to my aunt’s unconscious face while saying aloud short prayers and something else in Kazakh⁶. Surprisingly

⁵ I can only try to accurately translate them as “tongue touch” for *til tiyu* and “eye touch” or “evil eye” for *koz tiyu*.

⁶ Something like “Кет! Шық” (get out, go away) addressed to evil spirits causing my aunt distress.

the healer's actions brought my aunt back to consciousness. Witnessing this short but effective ritual sparked my further interest in folk medicine. Since then, I have always wondered how traditional medicine maintained its authority in the modern world of science and became a reliable option for many people when contemporary medicine seems to be powerless or too expensive.

Literature review.

As the topic of my project is about traditional healing practices in Central Kazakhstan, this work lies in the realm of the anthropology of religion. My project discusses the ways in which folk healers build legitimacy in their health provision methods for ordinary people. Folk healing has always existed as a practice but may have been called differently, e.g. magic, witchcraft, rituals. This project assigns all of these practices to the concept of "religion" in anthropology. The literature review will present the basic anthropological perspective on "religion" and how it was defined by the main thinkers from different backgrounds in a more or less chronological flow.

The approach that anthropology takes towards religion is usually intertwined with many other social sciences and humanities disciplines like religious studies, sociology, history and philosophy. The anthropological definitions of religion take its roots from many influential thinkers in the field. There is no fundamental definition of the anthropology of religion. Rather, they are assessed as "more or less useful", which helps determine the value of each definition and its contribution to our understanding of the anthropological perspective of religion (Bielo, 2015). This literature review will first consider the viewpoints of some of the main thinkers in the study of religion, and then turn to discussion of definitions coming from the field of religious anthropology, and finally, I present my own hybrid framework and attempt to sketch a useful

definition of religion that will help me conceptualize religion in the context of traditional medicine in Kazakhstan.

Karl Marx and Max Weber are among the most influential thinkers of the concept of religion. These individuals may not be seen as specialists in religious anthropology but their contribution to the field is enormous by providing different perspectives and ways of studying religion. Karl Marx is a famous philosopher, who criticized industrial capitalism (Ritzer, 2009). Although he did not create a large amount of knowledge about religion, his ideas are used in many social sciences and humanities fields, including religious studies. He argues that religion is an absolute human product (Bielo, 2015). One of the Marxian popular expressions that call religion “the opium of the people” is cited globally by many scholars in various disciplines. This citation means that religion is a drug or false consciousness, a blinding factor that deprives people, industrial workers in his case, from facing the harsh reality of their conditions. Max Weber is a significant figure in the field of sociology. He says that religion can be seen as a specific type of social behavior, the conditions and effects of which should be thoroughly studied. Weberian school of thought prioritizes understanding the meaning of subjective experiences of religious people (Bielo, 2015).

The next stage is to identify the main thinkers in the anthropology of religion whose ideas are widely used and cited by contemporary anthropologists. One of the most influential ones, the ancestor of religious anthropology, would be an evolutionist Edward Burnett Tylor. He offered one of the “foundational” definitions of religion adopted by the anthropological inquiry (Larsen, 2013). In his volume *Religion in Primitive Culture* (1871), Tylor offers a “minimal” definition of religion as “a belief in spiritual beings” (Eller, 2007). He defended the rationalism and uniqueness of all humans and each society and argued against those who considered the small-scale communities as degeneration or lacking inherent creativity in building its own culture. That is why in order to produce an elementary definition of religion, he aimed at a systematic study of

lower races' religions (Lambek, 2007). Tylor largely relies on the theory of animism in describing the belief in spiritual beings as animism "characterizes tribes very low in the scale of humanity". The theory of animism says that souls of creatures are capable of existence after death and that those spiritual beings can affect the physical world (Lambek, 2007).

The next definition useful in the study of religious anthropology comes from Emile Durkheim. Durkheim considers religion from the social position and argues that the origins of religion can be found in the collective memory, or consciousness, of the society (Lambek, 2007). For him, religion was a unified system of beliefs and practices related to sacred things (Durkheim, 1912). The notion of "sacred things" does not necessarily mean the spirits, but rather Durkheim argues that the sacred is what is worshipped by the community itself and that worshipping the sacred is the natural expression of people that reflect the religion of society. In other words, he saw religion as a representative of society (Eller, 2007:35). Durkheim takes a functionalist approach by stating that social morality and solidarity is established by the sacred, deity or idols, of the society's own making (Csordas, 1990:33).

All of these different accounts serve to show the importance of the perspective and theory behind every scholarly definition of religion. The definitions presented are well-established and widely referred to among contemporary anthropologists. Anthropologists choose the definition of religion depending on their needs in their field of study and research interest. E. B. Tyler and Durkheim's definitions of religion proved to be very useful in this work. Durkheim's explanation may be of great use when describing the "sacred" of a particular society as different societies believe in different sacred things. E. B. Tyler's reliance on animism theory helped me shape my own concept of religion in examining folk healing in Kazakhstan as the majority of traditional⁷ Kazakhs believe in the existence of spirits (Penkala-Grawecka, 2013). Looking at those popular definitions of religion, in this research project I take religion to be a collection of symbols with

⁷ Those who are kept away from world globalization, mostly the residents of *auls* (Kazakh villages).

supernatural attributes that people of Kazakhstan believe in. Traditional medicine practiced in Kazakhstan is closely linked with this concept of religion, especially Islam (Grzywacz, 2010).

Theoretical framework.

The theoretical part of this piece touches upon the question of how does folk medicine maintain its legitimacy in the eyes of the public and how the sets of “symbols”, ranging from physical ritual objects to religious prayers to spiritual sessions, that are used by healers create the atmosphere of legitimacy. Analyzing my personal interaction with folk medicine treatments in the past, I realized that there are many actors in play. Although I would not be able to distinguish any of them back then, I will try to identify and classify them by typology now in this thesis. The main question I had in my head was the question of “how”. How do healers make people have faith in their practices? The word “legitimacy” came to my mind as an appropriate term to describe the case. So I changed the question to “how do healers wield legitimacy into their practices?”. With that question, it was easier to look for the theory that would help me identify the dynamics behind the traditional healing practices. I divided the main actors into three: (1) healers themselves, (2) patients and (3) the socio-political context (e.g. laws and regulations of a certain country concerning folk medicine). Those actors and the perspectives they take determine whether or to what extent the particular healer is legitimate. That is when I became acquainted with the Weberian “authority” concepts. Weber identified three main types of legitimacy: traditional, charismatic and rational-legal (further – legal) (Weber, 1978:215). The concepts of legitimacy can be used in relation to health care systems (McCormack, 1981). These three legitimacy types can easily correlate to the major actors that impact the healer’s legitimacy. The research project uses Galina Lindquist’s application of the Weberian theory of “authority”, where Lindquist uses the word “legitimacy” instead, in the context of traditional healing in Kazakhstan (Lindquist, 2001). Legitimation in relation to traditional medicine is understood as

attempts to gain recognition, formal or informal, and the process of constructing authority (Lindquist, 2002:3). Applied to folk healing in Kazakhstan, legitimacy translates to the power of persuasion that forces people to subjugate themselves to non-biomedical healing treatments and to follow the healer's prescriptions.

One of the basic rationales behind folk healing system is the fact that it was practiced for many generations before and still of popular use today. So how it maintained its value in a modern society? One of the main factors is what Weber calls – traditional legitimacy (Weber, 1978). But what is tradition? The term elicits a lot of meanings. The most popular and common definition of tradition is that it is “a set of cultural ideals regarded as a coherent unit in which past ideals influence the present patterns of behavior in the group, a recognized set of present practices with the origins in the past, or a set of practices created in the past that are purposefully maintained by the group in the present” (Green, 1997:800). In all, the term refers to a specific type of behavior that was designed in the past and which determines the “normal behavior” in a specific social surrounding. In the context of Kazakhstan, this set of characteristics, e.g. customs and traditions, has a significant impact on the way many people live and think about different things in life. Healers have always been considered as a respectful members of the Kazakh society who would provide treatment to the ill (Grzywacz, 2010; Penkala-Grawecka, 2014). This traditional relationship between healers and people was historically formed in Kazakhstan, so it is of great consideration when we study how healers are viewed by the society in modern period. That is how “tradition” can foster legitimacy to folk medicine. Weber identifies traditional legitimacy as a form of authority that “derives from custom, tradition or established norms” (Weber, 1978:216). Although the context behind this type of legitimacy is less logical than the one behind conventional medicine, traditional healing system is perceived as a keeper of traditional morals and values (Lindquist, 2001:16). That is where healing practices absorb the authority to be considered more or less significant as a type of medicine, being popular among ordinary people. For example, from the observations of Buryat families by anthropologist Eva

Fridman, we can see how some Buryat families, which were forced to move away from their ancestral lands by the Russian government, brought “legitimacy” for their religious shamanic activities and traditions to the new land in a form of stones from their holy places (Fridman, 1999). In that case, local shamans needed a spiritual connection with their ancestors to perform rituals and being away from the homeland was a deterring factor for them. That is why shamans needed some sort of bind to their ancestors and homeland, and those stones made them feel comfortable entering the shamanic trance (Kehoe, 2000:23).

Another type of legitimacy is what Weber calls the charismatic legitimacy (Weber, 1978:216). Charismatic legitimacy draws its power from the personal skills and abilities of the healer to gain trust and respect from patients, making them loyal subjects. That is why it is the most flexible type and even called revolutionary (MacCormack, 1981:423). The problem with this type of legitimacy is that if a healer fails to meet their patients’ imaginations of a charismatic personality, then the healer loses the authority. On the other hand, depending on the individual creativity and preference of healers, charismatic legitimacy is open to innovations and differences in terms of providing medicine, at the same time presenting their legitimacy to patients (Lindquist, 2001:17). This is demonstrated by the growing number of advertising techniques, e.g. TV, newspapers, social websites, that cover the whole spectrum of supernatural-related practices, including spiritual and magical healing (Lindquist, 2001:19). The Russian healer Kashpirovski who did mass séances and charging water bottles with healing energy is probably a perfect example of a charismatic healer. He managed to gather a large number of people in stadiums of Russian big cities. However, Kashpirovski was accused of exacerbating the conditions of his patients and forced to leave the country. The same scenario was common among the healers who performed openly in public, they usually left the stage very quickly. Anthropologist Galina Lindquist shares her personal experience of encountering folk medicine in Russia, as she calls it (Lindquist, 2001:23). Despite the educated and skeptical environment in which she was raised, she brought her baby with a hernia to the folk healer, or *babka* as

Lindquist calls the healer woman, when the options were limited. The practice, according to Lindquist, was simpler and cheaper than going to the actual doctor and, more importantly, astonishingly helpful. The whole process of healing took place in a special room, which she recalled as healer's room, that was full of icons and a small oil lamp, which seemed "exotic" to her eye (Lindquist, 2001:19). Did those icons and a distinct room for the therapy make the healer look more professional, or the whole process more legitimate?

The third type of legitimacy that plays an important role in legitimation of folk healing methods is legal legitimacy (Weber, 1978). Legal legitimacy varies depending on the geographical location. Countries have different laws and policies regarding traditional healing practices. Thus, Weberian legal legitimacy is a form of authority enforced on healers and their patients by law. This legitimacy type is also called bureaucratic legitimacy as it forces folk practitioners to follow the bureaucracy of the rational institutionalized regime (Lindquist, 2002:3). In this regime, the worth of a folk healer is judged by the entitled organizations of the state. Healers undergo formal examinations of their skills and knowledge which then brings them legal entitlements. Such legal entitlements allow folk healers to operate legally in Kazakhstan, the practice of which is common among many other countries worldwide (Cohen & Ruggie, 2004). Although this type of legitimacy remained primary at the turn of the twentieth century (during the first years of the Independent Kazakhstan from 1991), nowadays legal grounds for providing folk medicine seems to have lost its authority (Prokhorov, 2019).

It is also interesting to observe how health-seeking strategies vary depending on the regional and cultural context of society. Those choices of where one should approach in case of ailment can reflect not only the accessibility and social class but also the ideology and moral standards of one's own or communal traditions and beliefs. Sometimes, external forces, like government or ideology, try to influence those choices but the outcome is hard to measure. For instance, when the Soviet government tried to promote the domination of conventional

biomedicine over other types of providing health by pressing on the alternative medical practices, it gave a reversed result of popularizing and diversifying those practices semi-underground (Lindquist, 2001:19). The above example provided by Lindquist refers to the low costs and speediness of folk medicine. At the end of the day, a healer's worthiness as a representative of folk medicine is mostly dependent on the healer's charismatic abilities and skills, like some sort of psychic energy that emanates from a healer making people believe in the practice for example, and, of course, on the actual results of therapies. That is why they need to deploy different creative techniques to wield legitimacy as a trustworthy type of medicine and survive in a modern "rational" world where everything is explained by logic and science (Lindquist, 2001:27).

Methodology.

This research project uses two distinct methodologies for the data collection. It integrates the semi-structured interviews into the ethnographic observation, participant observation and digital observation. Both of these two types of methods are very important for the research project as they will provide me with valuable information about the healers' experiences and "insights". Both of these methods and their varieties are to be explained in detail below.

Semi-structured interviews. Interviewing is perhaps the most basic mode of inquiry, widely used in qualitative research. In this research project, I deploy semi-structured interviews, which consist of open-ended questions. Those open-ended questions facilitate a discussion with the respondent rather than a straightforward question and answer format. They also set the territory boundaries to be explored and at the same time allow the interviewee to take a direction that he or she wants to go further. So the main feature is that this type of question does not presume an answer (Seidman, 2006, p. 84). My purpose is strongly exploratory and my role as

an interviewer is nondirective, letting my interviewee talk more and accurately listening to his or her in order to have less influence over the results (Fontana & Frey, 2008, p. 128). The major task is to build upon and explore healers' responses to those questions. The insight information is gathered through this method. That is why this interview is semi-structured with a couple of questions to be certainly answered and, at the same time, freedom is given to the healers to share their opinions and insights. It is also important to be flexible and to be able to make changes in the methodologies and processes to cope with the possible issues indicated during the analysis of data (Roulston, 2014, p. 307). In terms of the timing of the interviews, there are not any strict boundaries on that because of the low quantity of those involved in the interview and the character of the interview, which is the semi-structured interviews with the patterns of oral histories.

Overall, I managed to conduct only one offline, or face-to-face, interview before the national lockdown and three more online interviews. My offline interview lasted almost twice as much time as my online interviews. In terms of the interview setting, the first interview was held in the healer's house, where I was welcomed by her. Other two online interviews were held using the mobile application called "WhatsApp". All three interviews were recorded by my phone and laptop. Further I will provide some information about my interviewees. A detailed analysis of my interviewees' specializations are offered in Chapter 2.

Raikhan. Raikhan was my first interviewee with whom I had a chance to meet personally. She is 69 years old healer with about 35 years of experience in folk medicine. However, Raikhan officially started her healer's journey in 1992. Her main specialization is spiritual healing. She classifies herself as *emshi*⁸. She was recognized as one of the world's most powerful healers in 1994. She has five children and lots of grandchildren. She spent her childhood in a village called

⁸ Folk healer in Kazakh; from Privratskiy's classification of the Kazakhstani healers, I put her into the category of *tawip*, one of the five main types of Kazakhstani healers (see Chapter 2.2).

Amangeldi, later her family moved to the city of Zhezkazgan, Karaganda region, in Central Kazakhstan where she still lives. Throughout her life, she changed different jobs. She worked as a nurse for some time and then became a teacher in a local school in Zhezkazgan. Working in official institutions did not disturb her from providing spiritual treatments. After some time, she left teaching too as she wanted to dedicate her life to the healer's path. In times of need, she also worked as a seamstress to make a living and, as she claims, she was very good at it. Now she is retired and her main occupation became her family. Nevertheless, folk healing is a very important part of her life and she still heals people who come to her.

When I came to her house, there was not anything special at first. Then I noticed various things like ritualistic whips⁹, knives and a *dombyra*¹⁰. We went to living room where she gave me an interview for about 100 minutes. It seemed like an oral history rather than an interview. She was glad to path me through her life and happily provided answers to all my questions and even more.

Altai. Altai is an herbalist and bioenergotherapist. He is 62 years old with an experience of about 30 years, though he discovered his gift of healing at the age of 15. He was born and raised in Shymkent. Now he lives in Turkestan, Southern Kazakhstan. Turkestan is famous for its popularity of folk medicine, especially spiritual healing practices. He has four children and grandchildren. As a young adult, Altai worked as a professional photographer. This was his main occupation for many years until he joined the Association of Folk Healers in Kazakhstan. Now he is still a member of that organization which is approved by Ministry of Health of Kazakhstan.

Yuliya. Yuliya is a body healer and specialist in inner human energies (e.g. bio currents, chakra). She is 36 years old, comparatively young as opposed to other respondents. She has a husband and two children. She officially became a traditional healer in 2011 when she joined the

⁹ This whip should be a horsewhip, which means it has to be used on horses for at least three years so that it can draw power from horses and be used to drive the evil forces away.

¹⁰ a Kazakh national musical instrument

Association of Folk Healers in Kazakhstan. Yuliya is from in Kostanay, Northern Kazakhstan. Her main occupation is working as a masseur, so her healing rituals often overlap with her work and sometimes they complement each other.

Salamat. Salamat is a *molda*, Muslim healer. He is 53 and has family and four children. His main area of specialization is healing by prayers, verses from Quran. He is from a small town called Zhanarka in Central Kazakhstan. Now he lives in Karaganda city, Central Kazakhstan and works in a central regional mosque in Karaganda. Like Yuliya, his work also overlaps with his folk healing practices as he works as a mullah and reads prayers on a daily basis. Nevertheless, while providing folk treatment, methods differ and more objects are employed.

Instead of transcribing the interview responses, I used coding analysis of the collected data as this would save me a lot of time and let me concentrate on my theoretical framework, the concepts of Weberian legitimacy. Coding is one of the most efficient tools for analyzing qualitative data. It is a “data condensation” practice that helps find certain distinguished patterns and identify the most meaningful information in a material further to be converted into analyzable units (Miles & Huberman & Saldana, 2014, p. 80). Another implication is that it will already take a considerable amount of time to translate the interview data into English as the whole information will be taken in the native language, which is Kazakh, or Russian. That is why it may be too difficult and timely to transcript the whole speech of my interviewees.

Ethnography. Participant observation, which is synonymous with the term participant ethnography, is the process of “spending long periods watching people, coupled with talking to them about what they are doing, thinking and saying, designed to see how they understand their world” (Delamont, 2004, p. 206). There were two types of ethnography that I conducted: participant observation and digital ethnography. These two are not necessarily connected directly

to each other or conducted in a special sequence but they both greatly contributed to the general data collection.

The participant observation included the process of undergoing the actual healing ritual. Here, I am the source of the data, and this data would come directly from my interpretation of the practice. As a representative of the patients, I tried transfer my experience to the paper as accurately as possible. By accurate, I mean avoiding any types of bias and prejudices that may have been in me before or those that may occur during the fieldwork. The relief on that issue can be found through my theoretical framework, as I have a particular perspective and do not need to spend too much energy on capturing every aspect of my experience and thoughts. After being under the process of provision of folk medicine, I needed to write down a wide range of information, looking at the issue from various angles but the primary focus should be covered in detail. I would first concentrate my effort on the theoretical framework of Weberian legitimacy types and the tools in use, such as physical objects, symbolic drawings, prayers, etc. This is not to say that the Weberian concepts of legitimacy are the only things that matter, but that while I try to capture all the process of the healing ritual, the main focus of the research is given a higher priority during data collection. So this type of participant observation is a short but important part of the ethnographic data. This observation is important for revealing the insight data from the role of the patients who undergo such alternative medicine treatments. However, I had a chance to conduct participant observation only one time with the first healer because of the restrictions imposed by the government due to the pandemic.

After that I had to switch to online data collection. That is where digital ethnography comes. This type of ethnography included analyzing the available media content. After spending 10 hours of media observation and watching more than 15 different videos on folk healing in Kazakhstan, I found the video-film by a popular official YouTube channel called “My Planet”. So my digital ethnography is based on the video from the YouTube platform that thoroughly

describes the process of healing ritual in Kazakhstan. The video is quite popular, with more than 500 thousand views, and lasts for almost 44 minutes, including the video cuts. It contains the process of health provision to two villagers by a *baqsi* (Central Asian shaman) named Magomed.

The influence of the Covid-19 on the research project.

This situation with the Covid-19 has not bypassed the way researchers conduct their projects. My research project has not been an exception. The methodological part was the biggest contributor to those changes that have been made to adapt to the new standards of doing research. Although there were not any huge methodological alterations, those small adaptations were quite tangible. This section of the project deals with the nature of those adaptations and covers the original plan of the data collection process during the summer fieldwork.

Obviously, the main change was in the way how the research was conducted. Instead physically going to the places and having chats with the healers, I had to limit myself to online interviews and digital ethnography. One of my primary intentions was visiting some rural areas, specifically the countryside called Shetsk (Aksu-Ayuly) and the village (*aul*) Tumsyk, where my grandparents used to live. They are located near each other. However, due to the circumstances I could not manage to make that trip, which otherwise would have greatly contributed the scope of the ethnographic data on the influence of Weberian traditional legitimacy as Kazakh *auls* are the places where the various types of traditions in different spheres are kept intact. As far as methodology is concerned, the planned types of the methodologies were the same: semi-structured interviews and ethnography. However, there were several quite significant changes in terms of application of those methods. Those changes are to be explained below.

In the ethnography part, the original plan was to make two types of observation: ethnography and participant observation. The former type of observation was about

understanding the world of the healers and looking at this world through their lenses. In this type, I would have tried to discover the most basic information about them, like what do they like, what do they do in their leisure time, do they have another job, etc. I was planning to spend around a week with each of the healers. During that period, I would have been seeing them on a regular basis, having casual and informal conversations with them and visiting their therapies, if there were any. This part was important for comparative analysis with the interview answers and for identifying the patterns in daily activities and speeches, which would have been useful for coding analysis. This week of observation would have been the period of the first type of participant observation while the second type would have been about my personal experience of undergoing the rite, participant observation. This type is described in my main methodology part. The only setback is that there could have been collected a lot more data from each healer and their specific type of health provision.

As far as interviews are concerned, there should have been two rounds of interviews. As I noted in the main methodological part, the main task in my semi-structured qualitative interview is to let the respondents speak freely about the topics provided. The researcher's role is only directive, making sure the important points are covered. However, those "important points" may not be the same information for the researcher and the healer. So in this case, the interview questions may need some adaptations and those adaptations might be only after the interview itself. That is why I needed two sets of interviews. The first interview, an important one, would have been conducted in the beginning of the acquaintanceship with the healer. It would have covered all the important points and let me collect some ideas for the adaptations for the follow-up interviews, the second round of interviews. This flexibility in terms of structure would have been achieved through some brainstorming after the first set of interviews so that the second interview could have better adjusted to the context and special needs of the interviewees or the researcher. The main idea was to let the interview questionnaire undergo some adaptations and possible changes after the first interview and during the ethnography and then conduct a follow-

up or final interview about the matters that may have been arisen in that period. This follow-up interview was significant for the data collection as it would be mostly designed during the period of meetings with the healer and adapted to the healer's environment and knowledge. We must not forget that every healer has his/her own peculiar way of health provision and an adaptation to the limits and/or opportunities of the modern days. This is not only true for every different type of healer, e.g. shamans, religious healers, bioenergetics healers, but also for the healers within the same category of traditional health provision. So, some moderations during the period of ethnography would have provided more comparative information.

Thesis organization.

The research project is divided into three consecutive chapters. The first chapter will discuss the representation of folk healing practices by the state, society, and healers themselves. It will describe the historiography of changes in the government attitude and legislation concerning folk medicine sector and the reality of abidance of that legislation. The chapter will also engage with the development of commercialization of folk medical services, covering the ways in which healers express competition and exchange their knowledge and skill with money. The second chapter will give a thorough classification of the different types of healers in Kazakhstan. It will include both old types and new types of folk healer categories, though the main focus will be given to old types as they are the most prevalent type in the context of Kazakhstan. The last chapter will discuss how folk practitioners and their treatments stay popular in today's world. It will discuss the dynamics behind the traditional healing practices and analyze the implication of the Weberian legitimacies. This chapter will measure the scope of influence of each legitimacy type and give appropriate comparisons between them to understand the main factors in providing authority to folk medicine in Kazakhstan.

Chapter 1. Representation of traditional healing in Kazakhstan in the past and now

The ways in which healers demonstrate legitimacy and authority in Central Asia have changed over time. In the past, in the seventeenth and eighteenth centuries, Kazakh healers used to wear special costumes, drum/*qobyz*¹¹ ritualistic music and have the society to watch the spectacular performance, mostly of *baqsis*. Nowadays, a provision of folk medicine is a highly domesticized activity, which means that performance details have shifted from spectacular to mundane. There is huge body of evidence that this is the effect of the Soviet rule, when folk medicine was strictly regulated and forced to go underground (Beller-Hann, 2001:72). This chapter will evaluate how the representation and perception of folk medicine changed through different periods of the historiography of Kazakhstan and how it became commercialized over the years. The timeline is divided into two main parts: the status of traditional medicine before the independence in 1991 and the “reimagination” of traditional medical practices in Kazakhstan after gaining independence. In addition, this chapter will describe the process of commercialization of folk medicine in Kazakhstan. This section is crucial for understanding the state of traditional medical beliefs and practices in Kazakhstan and its relationship with the state.

1.1. The state of traditional healing before the independence

In pre-Soviet time, medical care has been largely neglected by the tsarist administration (Privratsky, 1998:322). After coming to power in October 1917, the Soviets tried to make biomedicine available to the general masses on the Kazakh steppe. It is suggested that this change has increased the living standards and overall health of the Kazakh population. The Soviets deemed traditional folk medicine primitive and considered it as a symbol of backwardness based on religious and folk bias (Grzywacz, 2010:42). Therefore, the government

¹¹ Kazakh national musical instrument

imposed a lot of regulations and policies regarding the traditional healing practices in Central Asia. *Baqsiliq* (shamanism) practices, for instance, became strictly prohibited under the Soviet rule. *Baqsis* could even get a death sentence for their practices (Privratsky, 1998:360).

The pressure on traditional healing practices that was in a form of forbiddance and control was the product of two distinct policies. Firstly, the Soviets wanted to create the Kazakh proletariat class out of nomadic population (Payne, 2001). For this purpose, they took actions to undermine the traditional steppe culture and lifestyle, including local means of medical care. Secondly, the Soviet government put a lot of effort into making a perfect Communist society which meant the rule of the working class. By taking a Marxist ideology, the Soviet regime denied religion in all its forms and promoted atheist ideas (Soskovets et al., 2015:2). So the policy of suppressing the folk medical practices was just a small part of a larger antireligious campaigns and atheist propaganda. The Soviet government worked hard to influence identity-construction in Central Asia, though different means, propaganda being the main tool. The “Soviet” *muzhik* (man) was portrayed as a strong head of his family honestly making earnings on a factory and having a collective mindset and thinking “reasonably”, e.g. non-superstitious and not believing in supernatural (Etkind, 2011).

The meaning of the term “religion” in that context stretched far beyond the conventional understanding of the word. According to Raikhan, aside from Islam, Christianity and other dominant types of religions, “religion” included everything associated with the supernatural world and any sign of spiritual or supernatural practices could lead to harsh consequences, e.g. huge fines, arrests, exiles and even death sentences:

Raikhan: *Совет Үкіметінің дінге қарсы политикасында, дін деп бүкіл біздің [Қазақтардың] емиілік және де тағы басқа әдет-ғұрыптардың көбісін діннің ішіне кіргізген. Олар [совет әкімшілігі] дін деп қарапаңым логикаға бағынбайтын заттардың барлығын жатқызды. Сөйтіп, Қазақ халқының көптеген ырымдарын, дінге қатысты болса да болмаса да, жоққа шығарды. Ондай заттармен әкімшілікке ұсталу өте қауіпті болды.*

Raikhan: In the anti-religious policy of the Soviet Government, religion included many of our [Kazakhs'] healing and other customs as part of religion. They [the Soviets] considered religion to be anything that did not follow "rational" thought. Thus, they refuted many superstitions and traditions of the Kazakh people, whether religious or not. It was very dangerous to be caught by the police with practicing anything that would not comply with common logic.

Nevertheless, the efforts undertaken by the Soviet system to eliminate the traditional forms of health provision were not effective fully as they did not succeed in eliminating the national features and reshaping the Kazakh-Soviet identity. This policy attempted to undermine the Kazakh (Central Asian) tribal-nomadic way of life, traditions and customs that are common in different regions of Kazakhstan (Payne, 2001). On the medical front, the Soviet government tried to push the biomedicine into the superstitious Kazakh society where folk healing was already a popular option, sometimes the only one, among the Kazaks.

However, the efforts to substitute traditional medicine with biomedicine proved to be inefficient. There were several reasons for it. One of the main setbacks was the inadequate management of the modern medicine in the Kazakh steppe. Under the Soviet bureaucracy, it was not a simple straightforward process to get the needed medical care, especially in rural areas. The process would involve registering and filling out a lot of different documents (Muminova, 2017:35). While getting to the doctor was not an easy task for an ordinary person, it took much less time and effort to get to the traditional healer. Therefore, people attended folk healers in order to get the medical care without the documentation, long queues, high prices or any other obstacles. So the traditional means of medical care were inexpensive and available for the Kazakhs (Penkala-Grawecka, 2014:39). As Farideh Heyat puts it: "There is no doubt that in the post-Soviet era, deteriorating health services, inability of most people to purchase professional medical care, and lack of social welfare generally, have greatly increased vulnerabilities in the population and encouraged many people to resort to traditional means of combating physical and psychological ailments" (Heyat, 279). In a global context, the services of traditional healers and folk remedies have always been cheaper than modern medical care (Press, 1978:74). In a Kazakh

society, healers had the same political rights and social status as any other member of the society. However, since people approached healers in their most difficult times, during severe illnesses and health problems, healers enjoyed special respect and attention from the public. They were regarded as guides through healthy life and called “usta” (master) (Muminova, 2017:37).

Although the persecution has been a huge hindrance to healing practices in general, traditional healing has gone underground and continued performing its ritual in a cautious and restricted manner (Beller-Hann, 2001:72). *Baqsis*, for example, could not make “big” performances as they used to before the tsarist (and then Soviet) colonization (Humphrey, 1999:8). Since most of the forms of folk healing practices were banned by the Soviet antireligious policies, it has become a domestic activity and ordinary people started practicing the comparatively easier forms of folk medicine, such as *tuzdau* (salt circling above head three times) and reading the most basic prayers against the evil spirits, on a regular basis:

Raikhan: *Адамдар көп рәсімдерді өздері ақ істей беруге үйренді. Тұздау және кейде аластаудың да қарапайым түрлерін халық өзі істей береді. Кеңес өкіметі кезіндегі қуғын-сүргінге байланысты емшілерді шақыру өте қауіпті болды. Сондықтан қарапайым адамдарға қиын уақытта бір-біріне көмектесу үшін қарапайым халықтық емдеу әдістерін үйренуге тура келді.*

Raikhan: People became used to doing a lot of different practices themselves. *Tuzdau*, *ushyktau* and sometimes even simple forms of *alastau* (exorcism) are performed by ordinary people from the public. Because of the persecutions under the Soviet rule, it was too risky to call for healers. So ordinary people had to learn simple healing techniques to help each other in times of need.

Those practices may not have necessarily been the complex set of healing rituals but still most of these practices featured the techniques of the healers. This factor may have downplayed the demand for healers in an already independent Kazakhstan as people needed healers for more complicated rituals than the basic ones that they can perform themselves. This trend, however, has not made the unconventional methods of treatment less popular in Kazakhstan:

Raikhan: *Олардың [Совет үкіметінің] дәстүрлі халық медицинасына тыйым салуы өзінің отбасы мүшелеріне керек жағдайда көмек көрсету үшін көптеген қарапайым адамдардың емшінің қасиетті емдеу дағдыларын үйренуіне алып келді. Бұл жағдай дәстүрлі медицинаның қарапайым түрлерін*

жаттықтыратын адамдардың санын көбейтті. Сондықтан, бұл халықтық медицинаның қазақ мәдениетіндегі рөлін төмендететін фактор бола алмайды. Негізі, бұл дәстүрлі медицина тәжірибелерінің танымалдылығын және таралуын арттыра түсті десекте болатын шығар.

Raikhan: The fact that they [the Soviet government] banned traditional forms of health provision meant more people acquiring the healer’s “skills” to take care of their family members. This has given rise to the number of ordinary people practicing more or less simple rituals for their close ones. Thus, this process could not have been the factor that downplayed the role of folk medicine in a Kazakh culture. In fact, it could have even increased the popularity of those practices.

1.2. The revival of traditional healing in Post-Soviet Kazakhstan.

Although the influence of folk medicine in Kazakhstan was significant even before the independence, medical pluralism has not been officially recognized and equaled to conventional biomedicine (Penkala-Grawecka, 2006:133). The changed circumstances after the collapse of the Soviet Union in 1991 gave rise to medical pluralism in post-Soviet Central Asia and the providers of folk medicine got out from underground. The activities of the healers were no longer condemned or considered backward by the government officials. Newly appointed government wanted to promote the national identity, culture and tradition, and traditional healing was a big part of that culture. Folk healing practices became legal. This is the process known as the “revival” of all of the Kazakh traditions that have been destroyed by the Soviet system (Penkala-Grawecka, 2014:38).

This “coming out” of the shadow provided new opportunities for the traditional medicine. The local folk medicine has “opened its borders” to different types of healing practices from abroad. Many healers adapted to a sort of “globalization” and learned new techniques, resulting in an even more variety of techniques used by a healer. The body healers, for example, absorbed the modern eastern Asian types of body healing, e.g. bioenergotherapies (Grzywacz, 2010:24). That way, the popularity of traditional medical treatments has been increasing and there were a number of reasons for it. As Farideh Heyat puts it: “There is no doubt that in the post-Soviet era,

deteriorating health services, inability of most people to purchase professional medical care, and lack of social welfare generally, have greatly increased vulnerabilities in the population and encouraged many people to resort to traditional means of combating physical and psychological ailments” (Heyat, 2004:279). Being subject to much bureaucracy during the Soviet era, the (bio)medical services became even less available to people in independent Central Asian republics (Penkala-Grawecka, 2014:39). The main reason was the matter of money. While medicine was generally free for public under the Soviet rule, it became quite costly in post-Soviet states after gaining independence. What is more, the costs were raising. Most people just could not afford the medicines they were prescribed. There is an evidence that the culture of out-of-pocket payments for better quality medical care during the Soviet regime have increased the costs of medical services in Kazakhstan (Mckee, et al., 2002:52). These factors suggest the growth of the popularity of traditional healing practices as opposed to conventional modern medicine in Kazakhstan at the turn of the twenty-first century.

Nevertheless, the provision of folk medicine has stayed in the “domesticized manner”, the concept I have created to explain the influence of the Soviet government to reshaping the folk healing infrastructure in Kazakhstan. The concept of “domesticizing”¹² stands for the process of changing from a public performance of healers to a “shadow” business of health provision in domestic conditions (e.g. private houses, apartments, specially rented places) without the public show. As Caroline Humphrey writes about Central Asian shamanism: ‘elaborate costumes, drumming, and above all the presence and participation of an audience – the “society” which according to some theories of shamanism is supposed to be so essential to validating the shaman’s efforts – have all gone’ (Humphrey, 1999:8). It is now rare to see the ecstatic performances of a *baqsi* as even they became accustomed to treating patients behind closed doors:

¹² One should not confuse the term “domesticizing” with “domestication” as the latter one would mean that folk medicine is tamed by the officials while the responses provided by my interviewees prove otherwise.

- Altai: *В период до Советской эпохи, традиционная духовная медицина была очень хорошо развита в Казахстане. В Казахстане было больше шаманов и других целителей, особенно шаманов. Ритуалы в основном проводились перед зрителями, которая обычно состояла из их ближайшего сообщества. А вот в наше время сейчас, хоть народная медицина и стала популярной отраслью в медицине, оно во многом изменилось. Практики целительства уже не выставляются на всеобщее обозрение. Они проводятся в “тени”. Целители принимают либо в своих маленьких кабинетах или дома, без лишних глаз.*
- Altai: During the pre-Soviet era, traditional spiritual practices were developed well in Kazakhstan. There were more healers, especially more shamans in Kazakhstan. The rituals were mainly performed in front of the audience, which usually consisted of their immediate society. But in our time now, although traditional medicine has become a popular branch in medicine, it had undergone significant changes. Healing practices are no longer publicly displayed. They are held in the “shadow”. Healers accept patients in their small working offices or at home, without being observed by prying eyes.

This suggests that the effects of the Soviet anti-religiosity programs and ideologies were not capable of truly wiping out these practices.

As I pointed out, the independence of the Central Asian states meant the revival of dormant (at least officially) local traditions and customs of the titular nations that were forced to go underground under the Soviet regime. This rehabilitation process was generously met and promoted by the officials of those newly admitted independent countries. Since the beginning of the independent Kazakhstan, folk medicine was considered as an integral part of medical care, being recognized as a legitimate complementary practice to conventional medicine (Penkala-Grawecka, 2014:38). As medical pluralism has gained popularity in independent Kazakhstan, the quantity of folk healers increased steadily. Thus, along with recognition and promotion, the government of Kazakhstan has put enormous effort to regulate and control the traditional form of treatment and the activities of its practitioners. The main development was the usage of special licenses providing the right to practice traditional healing methods.



Picture 1. Example of a license.



Picture 1. Example of a license.

It was considered illegal to provide folk medical services without a special license and a background education in conventional medicine (Lindquist, 2001:25). However, this policy has changed and now healers without medical training but who have necessary certifications and diplomas verifying the usefulness of their methods can also provide folk medicine (Dzhumagalieva, 2020:124). The licensing has divided the healer community into two: (1) licensed, those who follow the government narratives and work through special organizations and (2) non-licensed, those who work independently from the government confinements, not necessarily legally. Both are subject to different kinds of inspections from the government as there are a lot of “fake” healers or charlatans nowadays. The consequences of such inspections can be harsh for unlicensed healers, ranging from small fines to imprisonment.

This portrayal is only the case from the perspective of the government. When reality is concerned, the rules and regulations are often disobeyed by healers (Grzywacz, 2010:45). The consequences for inappropriate healing or fraud can rarely be detected and is it highly unlikely that a healer get imprisoned for ill treatment (Prokhorov, 2019). However, here is how it gets complicated. In Kazakhstan, healers can practice the types of folk medicine that were termed as “traditional medicine”, which includes manual therapy, bioenergotherapy, acupuncture, needle therapy, homeopathy (healing with a diluted substance), osteopathy (massage) and etc. However, the practices like *alastau* (exorcism), *tuzdau*, prayers against evil eye, *baqsiliq*¹³ (shamanism) and other types of spiritual healing practices were termed as “folk medicine” (Penkala-Grawecka, 2018:82). “Traditional medicine” has got support from the government as a valuable complementary medicine while “folk medicine” has not been given much attention. Licenses are issued on the basis of the “traditional” forms of healing (Zakon.kz). It means that a healer cannot

¹³ *Baqsiliq* here stands for the types of “eccentric” spiritual healing practices that normally include going into trance and other different performances.

become a certified *alastaushi*, *baqsi*, or *koripkel*. As it was mentioned in 2.1., the competences and practices of folk healers often mix with each other, so it is often the case when a healer uses the techniques from both of these sections. Kazakhstani healers who have the license practice different techniques, and not all of those techniques are necessarily within the legal boundaries. It is believed to be a way for many healers to practice the historically shaped ancient techniques without breaking the laws as healers who provide “traditional” and “folk” medicine usually have all the necessary documents:

Raikhan: *Менің білетін бүкіл емшілердің лицензиясы және өздерінің әр түрлі сертификат дипломдары бар, менде де бар. Бірақ біз жаңағы бұрынғы заманнан келе жатқан халықтық медицинаның түрлерін де береміз. Қазақстандығы дәстүрлі халық медицинасына жанағы халықтық та бұрынғы дәстүрлі медицина да кіреді. Өзіміздің әдет-ғұрпымызды қалай ұмытамыз. Нағыз халық емшісі екі түрін де алып жүреді.*

Raikhan: All the healers I know have licenses and different certificates and diplomas, I have the documents too. But we also provide old forms of traditional medicine. The Kazakh traditional medicine includes both “traditional” and “folk” healing. How can we forget our customs? A real folk healer practices both types of healing practices.

The licenses are issued by certain organizations that were responsible for assessing the healer’s skills by providing special examinations and trials. For this purpose, the Centre of Folk Medicine, founded in 1990 in Almaty, was tasked with the initiative to train, educate and license healers. The centre provides legal grounds for healers to treat patients using folk healing methods (Grzywacz, 2010:35). Another organization worthy of notice is the Association of Traditional Kazakh Healers (Association of Traditional Healers of Kazakhstan) that was founded in 1993 in Almaty with a similar purpose (Grzywacz, 2010:37). There are many other organizations nowadays but these two seem to be the oldest operating institutions that have a long history and knowledge in folk medicine practices. Both of the organizations issue licenses, certificates, and diplomas. The difference is in the objectives of their functioning. Such organizations are regulated by the government and private courses of healing techniques are banned unless an organization or a healer is licensed by the Ministry of Health. Centre of Folk Medicine (further – Centre) is a place for training or “making” healers whereas Association of Traditional Kazakh

Healers (further – Association) is a sort of research institution aimed at reading literature and exploring the folk medicine practices. The members of the latter organization are encouraged to share knowledge and experience with other healers and conduct researches. There are representatives of different nationalities in those organizations. The membership is not usually limited to race, gender or nationality (Grzywacz, 2010:39).

Nowadays, folk healing practices are quite popular in Kazakhstan. Among the several countries¹⁴ where folk healing methods are popular, Kazakhstan takes the third place after Kyrgyzstan and Moldova. It appears that Kazakhstanis tend to approach folk practitioners when they have certain illnesses and symptoms that include: warts (18.8%), unusual lump under the skin (8.5%), chest pain (2.7%), problems with breath (2.4%), abdominal pain (2.2%), headache (1.3%), bad cough (1.3%), fever (1.1%), diarrhea (1%), and vomiting (0.8%) (Stickley et.al, 2013). These are the most popular symptoms. Although the percentages do not seem significant, these numbers play a huge role in sustaining the whole industry of traditional medicine. For example, if we think more broadly, every 100th person experiencing diarrhea would approach a folk healer and that is an ailment taking up one of the smallest percentages. In the case when people have warts or when other kinds of lumps rise on the skin, almost 19 people out of 100 use the services of folk practitioners to deal with it.

1.3. Commercialization of traditional healing.

In the aftermath of the independence, the competition among the healers of Kazakhstan has increased dramatically (Grzywacz, 2010:36). There were two main factors for this. First, as I mentioned, the rise of traditional values and nationalistic discourse after the decay of the Soviet Union has increased the popularity of traditional medicine in a Kazakhstani society. Healers

¹⁴ Those countries include: Kazakhstan, Kyrgyzstan, Russia, Ukraine, Belarus, Moldova, Georgia, and Armenia.

started providing their services legally without any persecutions and neglect. Second, various organizations opened to legitimize folk healing practices were quite successful in recruiting a variety of healers with different specializations. For example, there were 2700 graduates from the Association in 2008 (Grzywacz, 2010:46). That way, the organizations offered a broad range of healing therapies. The combination of these factors has led to a high level of competition between practitioners of folk medicine.

Rivalry has given ways to improvisation and innovation to attract more patients and earn reputation and money. After all, being a traditional healer has become a professional job. So the provision of folk medicine has become commodified in a capitalist economy country where goods and services are exchanged with money (Marx, 1977). Due to the competition, healers have started making advertisements and promoting their services through various methods. In the past, healers used to pin their certificates, diplomas or any other significant achievements on the walls of their rooms which they usually rented in the official centres of traditional medicine. These days, the methods of advertising in the traditional healing section, as in many other sections, has adapted to the needs of the modern world. Nowadays, you can easily find the advertisements on the Internet and in almost any type of social network (e.g. Instagram, Facebook, VK). One of my informants, Altai, finds his clients via the Internet and social networking sites:

Altai: *Большинство моих клиентов обычно находят меня через интернет. Там есть мои контакты и потенциальные пациенты звонят прямо на мобильный номер или пишут на Vamcan (WhatsApp).*

Altai: Most of my clients usually find me on the Internet. They can find my contacts there, and my potential patients call directly to my phone number or text me in WhatsApp.

Nevertheless, the public knowledge of the healer's experience and abilities seem to serve even better than the modern means of attraction:

Yuliya: *Я не люблю рекламировать себя в Интернете и социальных сетях. Все что про меня есть это маленькая статья с моими данными на сайте Ассоциации Народных Целителей Казахстана. В основном ко мне приходят те, кому я уже показала результат и их знакомые, друзья и члены семьи.*

Yuliya: I do not like advertising myself on the Internet or social networks. All the digital information that people can find about me is a small article about me with my contacts on the website of the Association of Traditional Healers of Kazakhstan. People who come to me are usually the ones who have already seen the results of my work or their acquaintances, friends and family members.

Yuliya's position is shared by Salamat and Raikhan. They also do not advertise their practices but all of their relatives, friends and neighbors are aware of their healing practices. Their clientele mainly consists of people from the neighborhood and friends. But sometimes patients can come from distant places:

Raikhan: *Емиілердің емдейтін адамдары көбінесе олардың жақын жерлерінен болады. Маған да келетін адамдардың көбісі осы Жезқазған қаласы немесе оның айналасындағы аймақтардан, ауылдардан келеді. Мысалы Ұлытаудан келетіндер көп. Бірақ кейде маған жан жақтан адамдар келетін кездерде болады. Оңтүстік Қазақстан халық медицинасының танымал орны, сондықтан адамдар сол жақтан жиі келеді. Қазақстанның басқа да қалаларынан неше түрлі ауруларымен науқастар келіп тұрады.*

Raikhan: Healers' patients are usually from nearby areas. Most of the people who come to me are from Zhezkazgan or the villages nearby. For example, many people come from Ulytau (a town near Zhezkazgan). But sometimes I have patients from distant places. Southern Kazakhstan is a popular place for healing practices, so people come from more often. Patients with various diseases also come from other cities of Kazakhstan.

Being a member of a healer institution provides many advantages for healers. Healers can upgrade their skills and deepen their knowledge by learning from the best healers in Kazakhstan through a wide range of courses and studies (Grzywacz, 2010:41). In the end, healers get certification and awards from the institution that verify their abilities. There is a belief that the more awards, certificates and diplomas a healer has, the more valued are his practices in a market of traditional medicine. However, becoming a member of the institution is not a simple process. A healer needs to apply for it with all the necessary documentation concerning the healer's abilities and awards. After careful consideration of the necessary credentials, the committee provides examination so that the healer can prove his/her abilities (Grzywacz, 2010:44). Also, after getting accepted, the healer has to pay an annual fee for the membership, though small amount, to cover basic needs of the association (Association website/Yuliya):

Yuliya: *За членство мы платим маленький взнос чтобы покрывать какие-то административные расходы. Они могут включать поддержание главных*

здании Ассоциации и филиалов, рекламирование услуг, поддержку вебсайта Ассоциации в интернете и тд.

Yuliya: We have to pay an annual membership contribution to cover some administrative expenses. Those can include the maintenance of the main Association buildings and branches, advertising the members' services, support of the Association website, and etc.

If a healer wants to work outside of the institution, he has to apply for certification and then get approved by a healing organization. For the application, a healer also needs to state his list of practices along with the price list (Grzywacz, 2010:45).

Healers working in the healer organizations get a sort of salary depending on the number of patients they have treated. However, they do not usually get payments directly from their patients. The bureaucracy imposed by the government forces patients to go through several steps before getting started with the therapy. Those steps include pre-treatment conversation, checking for venereal disease presence and the payment at the reception (Grzywacz, 2010:45). This uncomfortable and time-consuming bureaucracy was not pleasant for many, healers and patients alike. Among my informants, Raikhan was very critical in her judgement of the Association:

Raikhan: *Ассоциация арқылы жұмыс істеу дегеніміз оның бүкіл заңдарына бағыну деген сөз. Оның әлгі тесттерінен өтіп отыру керек. Науқастарды қабылдау жыр болып кетеді. Көптеген қарапайым заттар узақ уақыт алып кетеді. Көп клиенттер оның бәрін қатты түсіне қоймайды да басқа емшілерге кетіп қалады. Сосын барып әлгі еш білігі жоқ шарлатандарға ұрынады да халықтық медицина туралы жаман ойда қалады.*

Raikhan: Healing people through the Association means that you need to follow its rules. You have to pass through its tests and examinations. Accepting patients can become a long process. Many simple procedures connected to bureaucracy may take a long time to complete. Not all patients understand this process and therefore they go to other healers. Then the patient may approach charlatans without any qualifications and would think bad about traditional medicine.

So, some amount of the payment goes to the institution. This was recognized to be one of the biggest disadvantages of working through the Association by Raikhan, the former member of the Association:

Raikhan: *Ассоциация құрамында болғанмын. Бірақ ол жерде көп жұмыс істей алмадым. Неге десең, ол ұйым дегеніміз сплошная коррупция дейді зой, нағыз адам ниетінің коррупциясы және де емшіліктің ең негізгі мақсатының, ол яғни осы дүниеде адамдарға таза ниетпен жақсылық жасау, соның барлығының*

бұзылуы. Бүкіл емдеу ақша үшін ғана істелінеді. Ассоциацияда ең бастысы ақша болып кетті. Келген клиенттерден міндетті түрде ақша алу керек қана емес, және ол ақшаның барлығын жаңағы организацияға өткізу міндетті болды. Содан кейін, біздің Ассоциацияға өткізген ақшамызға бастықтар үй салып алады.

Raikhan: I was a member of the Association once. But I could not work much in this place. If you asked me why, I would only say one word – corruption, a corruption of the human intention and of the essential purpose of healing, that is to do some good for people in this world. Everything in healing is around money. Money has become the main thing in the Association. We have to take money from all patients coming to us. What is more, we have to give that money to the organization. After that, the money goes to building new houses for our committee members.

The costs of the popular healing therapies, such as manual therapy, energotherapy, rites against various types of hexes (*koz-til tiyu*), spiritual cleansing by reading prayers and etc., ranged between 750 to 2000 tenge (about 5-12 EUR at that time) in 2010 (Grzywacz, 2010:37). Nowadays, the prices seem to have risen five-seven times, ranging between 3000 and 10000 tenge (about 6-20 EUR) per séance¹⁵. While these system of costs are related to appropriate healing organizations, there are a lot of independent healers that determine the prices of their work themselves. Among my informants, Altai charges 4000 tenge (around 8 EUR) per session, and his whole treatment course normally contains 12 sessions. However, other respondents (healers), as they claim, do not have price tags on their healing practices. Salamat does not take payment from his patients:

Salamat: *Науқастарды көбінесе мешітте қабылдаймын. Келгендер мешітке өздерінің қалағанындай не қалдырғысы келсе де өздері біледі. Кішкене ақша болса мешіттегі қайырымдылық қорларына сала салады. Ол жалпы мешітті ұстауға және басқа да қайырымдылық қорларына жұмсалатын ақша. Өз басым ешкімнің қолынан ақша алмаймын.*

Salamat: I usually accept patients in the mosque. The patients may or may not leave some “gifts”, it is up to them. If it is some money, they can throw it to the charity boxes inside the mosque. This money is normally spent on the maintenance of the mosque or transferred to charity foundations. I personally do not take money for the hands of my patients.

Raikhan also does not charge her patients but people usually give something in return for the healer’s efforts, as is customary in a traditional Kazakh culture:

¹⁵ Taken from the website with the prices of the traditional healing procedures in Kazakhstan.

Raikhan: *Мен ешкімге міне, мынандай ақшаға емдеймін деп айтпаймын. Менің жұмысымның нәтижелерін бақылай отырып, науқастар ризашылық білдіру үшін ақша немесе басқа «сыйлықтар» беруді өздері шешеді. Бұл қазақтарда қалыптасқан ырым – емшіге рахметіңді айтып кету. Беретін дымы жоқ болса, бермей ақ қойсын. Қиын жағдай барлығымызда болады, түсінемін ғой.*

Raikhan: I never tell people that I am going to treat them for this or that specific payment. Observing the results of my work, patients decide for themselves whether to donate some money or any other “gifts” to express gratitude. This is a Kazakh custom – to pay tribute to the healer. If the patient has nothing to offer, it is absolutely ok. We all have difficult situations in our lives.

Yuliya, though being a member of the Association, does not take money for her treatments but, like Raikhan, she highlights the custom of leaving some donations after the treatment.

The reasons for charging or not charging patients appears to vary. While it seems obvious why some healers have a price list for the assortment of their treatments, that is to earn a living and provide for their family, it is interesting to deep into the initiatives of not charging. Aside from healing, Salamat, a mullah healer, reads prayers to people on a daily basis. So what he does for healing is pretty much similar to his everyday occupation, e.g. spiritual healing using Quranic verses. So there is almost no clear distinction between his main job and healing treatments. For Raikhan, the most important motivation is, and should be, the intention to help other people and money has the ability to spoil this good will:

Raikhan: *Ақша жүрген жерде адам ниеті бұзылады. Мен жақсы емшілерді білгем, ақша ортасына түсіп кеткен. Ақшаң жоқ болып алдында өліп жатсаң да қарамайтын адамдарға айналып кетті. Олар өз жолын жоғалтып алған, емшілік жолын. Халықтық емшілік олар үшін бизнеске айналып кеткен, мұқтаж жандарға көмектесуге қатысы жоқ оның.*

Raikhan: Where money is included, the very core of the person’s intentions can become corrupt. I have known some good healers who fell into that “money-trap”. They would not care even if you are dying in front of them unless you make a payment. They lost their way, the healer’s way. Folk medicine has become a profitable business for them, which has nothing to do with helping the ones in need.

Yuliya has almost the same attitude as Raikhan. They claim that having the power to heal people is a huge responsibility and one with such a power is tasked to use that power to cure people.

They both consider healing treatment as a way of service to the God (Allah for Raikhan and the God-Creator for Yuliya):

Yuliya: *Исцеляя других, я лучше узнаю себя. Это позволяет мне заглядывать внутрь себя и следовать своему сердцу. А мое сердце ведет меня на путь помощи другим людям.*

Yuliya: By healing others I get to know yourself better. That allows me to see inside myself and follow my heart. And my heart leads me towards helping other people.

While Salamat and Yuliya remain neutral towards the commercialization of their practice, Raikhan criticizes this approach by saying that it corrupts “true” healers. Dzhumagalieva, (2020:125) also argues that the commercialization process increases the numbers of charlatans as many people would want to profit from superstitious Kazakhs.

Overall, folk healing in Kazakhstan has different dynamics developing through different time periods. Although it was quite popular in pre-Soviet period, it had to go underground during the Soviet rule. The “way” of a healer became unsafe because of the Soviet anti-religious campaigns. Nevertheless, the “industry” has grown significantly after the Kazakhstan’s independence in 1991 as the government promoted traditional and cultural values, including traditional ways of health provision, of the country. As a result, folk healing in Kazakhstan became commercialized and divided into official (legal)¹⁶ and independent healers¹⁷. This distinction and commercialization have changed the shape of healing practices from public events without much connection to the state to domestic practices both within and outside of the government regulations. Although the government control was intensive in the beginning of the independence, it has become weaker over the period, and now healers¹⁸ generally do not experience any troubles with the government. Understanding the context and historiography of the region is vital for the examination of legitimacy techniques, legal legitimacy being the main figure as the chapter mainly deals with the interrelationship between the government and traditional medicine. The next chapter will describe different types of healers and their

¹⁶ Those healers who work under the official medical organizations and hold membership.

¹⁷ Those healers who are not members of the official organizations. They may or may not have healers’ certifications.

¹⁸ Here I am referring to my respondents.

specializations in the context of Kazakhstan, the discussion of which greatly contributes to the legitimation techniques that healers use to wield legitimacy into their practices.

Chapter 2. Classification of the healers and their practices.

Folk medicine is an inseparable piece of the Kazakh culture. However, it is difficult to establish certain key features of the Kazakh traditional healing practices due to the lack of information, especially in the past times when the knowledge was mainly transmitted orally. What is more, nomadic people of Central Asia were often considered illiterate, superstitious and ignorant, and therefore many papers written in this field could be biased. It is also hard to distinguish what kinds of healing practices are genuinely Kazakh and which are borrowed from or significantly influenced by the neighboring countries as it was common among Kazakhs to adopt new elements from other cultures and adjust them to their own traditions (Grzywacz, 2010:6-8). One more problem with identifying the specifics of “Kazakh” traditional medicine is that the whole Central Asian populations had more or less similar healing practices (Beller-Hann, 2001:72). Nevertheless, traditional healing practices in Kazakhstan comprises of two main factors: indigenous traditions and Muslim therapeutic elements (Privratsky, 1998:384). The purpose of this chapter is to classify the types of folk healers and describe their treatments in the context of Kazakhstan.

A Kazakh healer is usually called *emshi*. In the Kazakh language: *em* – (1) therapy, treatment, (2) drug, medicine; *shi* – a suffix denoting the agent. There many different types of *emshi* in Kazakhstan. They vary according to their competences and specialization. Different sources classify the providers of Kazakh folk medicine differently. Privratsky (1998:322-323) divided them into four distinct categories: (1) a *molda* (mullah) – a Quran reader, (3) a *palshi* – a fortune teller or a clairvoyant, (3) a *tawip* – a prevalent type of healers, and (4) a *baqsi* or a shaman. Zuzanna Grzywacz (2010:18) distinguishes another type – a body healer – a masseur. Despite the classification, competencies and practices of various types of healers often overlap with each other, meaning that the same rituals can be performed by different healers. In fact, it is a rare phenomenon for a healer to have a narrow specialization with only a couple of rituals

against certain ailments (Grzywacz, 2010:17). Most of them usually perform a wide range of healing practices against different illnesses, physical and spiritual.

2.1. Molda.

The representatives of the first group are regarded as religious healers. The traditional in Central Asia is Islam and a *molda* is a Muslim priest. Thus, *moldas* are only represented by men as the religious position of a mullah is available only to the male population. Islam has always been an integral part of traditional Kazakh healing. In the past times, in the eighteenth and nineteenth centuries, Qojas, a lineage that claims to be Arab descendants of the prophet Muhammed, were thought to have true healing powers in a pure Islamic form. So the Qoja lineage was usually the representative of the *moldas* who use Muslim therapeutic practices (Grzywacz, 2010:17). However, what we call folk healing in Kazakhstan today is the mix of Islamic beliefs and old and innovated Kazakh traditions. Nowadays, it is believed that any Kazakh could become a healer if that person has a strong connection with the spirits of ancestors (*aruqs*) (Privratsky, 1998:321). That is why folk medicine in Kazakhstan is often called “spiritual healing”. That is one significant feature of Kazakh alternative medicine. In the need of help, healers, and ordinary people as well, approach not only God but also the spirits.

Mullahs usually accept patients in their homes and sometimes in the mosque. So the place of the healing ritual does not have to be a sacred place (Privratsky, 1998:327). Faith is the main tool of mullahs. Mullahs mostly use prayers from the sacred books in their healing rituals. Although their belief in Allah (the Muslim God) is considered the main source of their power, they also use other elements from pre-Islamic customs and beliefs in their healing practices. As it was mentioned, *moldas* in Kazakhstan often approach ancestor-spirits to help them boost their powers during rituals. Along with the prayers and the help of the spirits, *moldas* also use

different physical objects. The most common objects used in healing rituals are a whip and a knife (Privratsky, 1998:341). A whip used in healing practices is a Kazakh traditional whip called *kamshi*, a braided leather whip normally used by the nomads for horse-riding. A handle of *kamshi* is made of horn or bones and a lash is made of rawhide. A knife used in a rite normally looks different from ordinary knives. Old ritual knives are usually transferred from generation to generation. These tools are used to show their authority over the *aruaqs*. Also, they are the weapons of the *aruaqs* in a fight against the evil forces (Privratsky, 1998:328).



Picture 3. Salamat's ritualistic knife.



Picture 4. Raikhan's horsewhip.

Mullah healers are famous for making amulets. The most common amulet is called *tumar*. *Tumar* contains handwritten Quran verses sewed into a small triangular leather bag. A string is attached to it so that *tumar* can be hung around the neck or on the wall in a house. In Muslim culture, amulets transfer the spiritual power of the mullah to the patient. There

are multiple purposes of amulets. The most popular one is the protection from the evil spirits (*jinn*), bad luck, sickness, sorcery and other types of danger. Sorcery includes curses from other people, evil eye caused by strong envy, etc. It is also believed that *tumar* emits positive energy on its carrier and helps succeed in life in general (Privratsky, 1998:332).

2.2. Palshi/balger.

In a typical Kazakh society *palshis* are called “*koripkel* (seer). *Palshis* are fortune-tellers or diviners as their practices include foreseeing the future and warning the dangers of potential diseases. This group is not directly related to folk healing as they do not necessarily cure the illness but foretell it. Like in *tawips*, there are several subtypes of *palshi* but they all perform more or less the same function of predicting future misfortunes and prescribing preventive measures to cope with the issue. In terms of how they do it, the traditional implement is 41 *qumalaqs* (sheep manure). *Qumalaq* is a small pellet made of sheep dung. However, nowadays healers use beads or beans for *qumalaqs*. A clairvoyant using this tool is normally called *qumalaqshi*. (Privratsky, 1998:353). In the process of foretelling the future, a *palshi* (*qumalaqshi*) chaotically distributes those *qumalaqs* and then, playing around with them, somehow finds out the right information. The most common technique is distributing *qumalaqs* into three columns, representing past, present and future, and taking out four *qumalaqs* from each of the columns. If there is an even amount of *qumalaqs* left, it shows troubles and mischiefs, and vice versa. These 41 *qumalaqs* mean 40 soldiers and their leader in classic old Turkic literature and legends, where *qumalaqs* were used in magic and witchcraft to see the unknown. So the usage of *qumalaqs* to foresee the future has been the most widespread technique among Kazakh and other Turkic peoples. Another method, though less popular, is performed by a *jawirinshi* (*jawirin* – a shoulder blade in Kazakh). In their practice, *jawirinshis* use a ram or deer shoulder blade to predict the future. They put it into the

fire and carefully observe the cracks appearing on the surface of the item. One more technique in use is foretelling the problems related to weather. This group of *palshis* is usually addressed as *juldizshi* (*juldiz* – a star in Kazakh). A *juldizshi* forecasts the possible weather changes by observing the stars and watching over the natural processes in the environment (Grzywacz, 2010:19).

Fortune-tellers mainly consist of women, so it is rare to meet a *palshi* man. Also, it is not popular for men to visit *palshis*. Their “patients” or clients are also mostly women. The reason can be that *palshis* mostly predict abstract future and their forecasts may seem obscure or elusive when it comes to specific matters. That is why most people approaching *palshis* are women interested in the fate of their newborn child (e.g. whether he/she is going to be happy and healthy) or how their university-aged children doing in a distant place. Such requests do not require any factual information. The most common place to find a *palshi* is in bazaars, Central Asian marketplaces. So instead of going to the mullah in a mosque, Kazakh women prefer going to the bazaar or the *palshi*’s house to meet her and search for the answers. In fact, bazaars and households are the centers of Kazakh female spirituality (Privratsky, 1998:355).

2.3. Tawip.

Tawips have a lot of similarities with *moldas*. Like *moldas*, *tawips* mostly accept their patients in their homes (Privratsky, 1998:336). They also use Quran prayers and ancestor-spirits. Their most common tools are also a ritual knife and *kamshi*, spiritual weapons against *jinns*, though the usage of these objects in an unconventional medical treatment is true for almost all of the spiritual healers. Thus, *tawips* use the combination of Muslim spiritual healing and the Kazakh culture and traditions. Unlike the mullah healers, *tawips* consist of both genders. In fact, there are more female *tawips* than male. Another distinguishing characteristic between the two is

that *tawips* are illiterate in Arabic. So if a patient wants some recital of the prayers, they normally go visit a *molda*. Because of this, *tawips* also cannot make *tumars* with Quranic verses in it as they know the verses orally but cannot write them (Privratsky, 1998:342). Nevertheless, this category of healers, *tawips*, is the most diverse one among the other groups. *Tawip* is a general term used to describe the majority of the Kazakh healers. Many *tawips* prefer to be named as *emshi*, which is an even more general term used to describe all Kazakh healers, because *tawips* are sometimes associated with charlatans (Privratsky, 1998:335). *Tawips* Inside *tawips* we can identify different names of the healers. They vary according to their specialization and skills. The most common *tawips* are *dem salushi* (breath putter), *tukirushi* (spitter), *tamirshi* (veiner), *alastaushi* (exorcist) (Grzywacz, 2010:17).

Tawips mostly concentrate on spiritual healing, meaning the practice of healing of the inner soul of a person rather than an external pain. *Dem salushi* is the healer who recites the Quran verses above a patient and breathes at him whereas *tukirushi* is the one who heals through spitting on the patient's face and blowing at a patient usually after the *dem salu* process. Spitting is a popular measure against children's ailments. It is more considered as a blessing from an older member of a society than a form of healing art (Privratsky, 1998:348). *Tamirshi* (*tamir* is a vein in Kazakh) checks patients by touching their veins (*tamir ustau*) and feeling the pulse to observe the coldness and hotness of the body organs. After that, a *tamirshi* selects a treatment. Sometimes, *tamirshi* can predict the future health problems by the patient's heartbeat (Grzywacz, 2010:18). Another practice performed by *tawips* is *alastau* (exorcism). *Alastau* is needed when a person is attacked by the evil spirits that occupy a patient's body through the evil eye (*koz tiyu*), the bitter tongue (*til tiyu*) or the actual curse (*dua*) from other people. All of them are curses that bring misfortune, illness, and sometimes even death. The difference is in their application. Although the ordinary cursing is performed by another healer hired to curse the specific person, the hexes of *koz tiyu* and *til tiyu* can be activated by people's strong positive (excessive admiration, for example, of the beauty of the newborn child) and negative emotions (a strong

feeling of envy and anger). Both usually happen unintentionally. Jealousy is thought to be the most popular cause of unintentional affliction of a curse. Although there are various types of *tawips*, most of the *tawips* usually specialize in multiple healing methods. For example, *dem salushi* can also perform spitting after the process of *dem salu* (Privratsky, 1998:340).

2.4. Baqsi.

This group of healers is the most popular one in Central Asia. They are usually referred to as Central Asian shamans. A *baqsi* is a well-respected member of society who is able to drive the evil forces away by performing special rituals. They are thought to have a special connection to the spirits who can endow them with the power of their ancestors (Penkala-Grawecka, 2014). In the Kazakh discourse, there are two types of forces in a spiritual world: good spirits (*aruaqs*, angels) and evil spirits (*jinns*, *shaitans*). The *baqsi*'s task is to cure those who are afflicted by the evil spirits with the help of the ancestor-spirits (good spirits). Evil spirits are believed to be the source of all illnesses and misfortunes. It is believed that the evil forces dwell in specific places such as abandoned houses, cemeteries and forests as they are not inhabited by people (Grzywacz, 2010:21). Being a *baqsi* is not a matter of choice. *Baqsis* get their shamanic powers from the spirits of the ancestors, *ata-baba aruagy* (*aruaqs*). They appear in the *baqsi*'s dream and command him to come into the path of the healer. This dream is called *ayan* (revelation). The *baqsi* falls sick and recovers only after he accepts the healing power and his further healer destiny with it. Some examples of the *baqsi*'s traumatic experience are paralysis, mental damage and clinical death. They can even get sent to psychiatric clinics because of the mental illness (Penkala-Grawecka, 2014:44). Refusing may bring a wide range of negative consequences (e.g. illness, bad luck) not only to the chosen candidate (the *baqsi*) but also to his family and relatives. Another way for the *baqsi* is to delay his answer to the *aruaqs*' "calling", but this is acceptable only when the *baqsi* is young, a child (Penkala-Grawecka,

2006:237). Most *baqsis* eventually accept their destiny and become a healer. After falling into the healing path, the *baqsi* isolates himself from society and devotes most of his time to the disturbing ancestor-spirits. Thus, healing is a gift and a burden at the same time. When the *baqsi* approves the decision of the *aruaqs*, he would miraculously recover from the severe illness he had, and that way he would earn the community's respect. This whole process is associated with the resurrection and rebirth of a new person, a *baqsi*, with supernatural abilities to heal others. Other healers also get their powers from ancestor spirits through *ayan* but the sacrifices are not that extreme (e.g. serious illness and isolation from the society) as with the way of the *baqsi*.

As a rule, the "calling" happens to those whose ancestors were also *baqsis*, so it is a legacy transmitted from generation to generation (Penkala-Grawecka, 2014:44). As it was mentioned, *baqsis* can delay their "calling" by passing it to their older relatives if they are too young. But the *ayan* usually comes to *baqsis* in his adolescence, mostly in their middle ages. Those people may not have any idea of their abilities until *aruaqs* visit them in their dreams (Penkala-Grawecka, 2014:45). Also, a *baqsi* never learns from other *baqsis* but only can get *bata* (blessing) from elderly *baqsis*. He learns from the spiritual contacts with the *ata-baba aruagy* (ancestor spirits) (Grzywacz, 2010:22).

Baqsis have a lot of similarities with *tawips*. In fact, a *baqsi* is considered more efficient than a *tawip*. Therefore, *baqsis* stand at a higher level in a healer hierarchy. That is because *baqsis* have rare extraordinary abilities allow them to perform the most extreme healing rituals curing the incurable (Penkala-Grawecka, 2014:40). Some *tawips* consider being a *baqsi* as the next level in a healer's path, but not all of them wish to ascend to *baqsiliq* as it is not an easy path for a healer (Privratsky, 1998:383). Most of the practices described above in sections of other healer classifications are also performed by *baqsis*. The common rituals that *baqsis* undertake include burning special herbs and going around the place to protect it from

demons (*saytans*) and evil spirits (*jinnns*), reading prayers (*duga*) to shelter oneself from evil forces or bad luck, divination practices to prevent future illnesses and making amulets to protect its carrier (Grzywacz, 2010:8). Nevertheless, not all of the practices of the *baqsis* are performed by other kinds of healers, perhaps because *baqsis* often perform the rituals in a different manner. Their techniques can include shoutings, eccentric and demonic movements and other “strange” behaviors as they enter some sort of ecstatic trance during the ritual. The entrance to this ecstatic trance is called *zikir* (Privratsky, 1998:377). Because of this manner of health provision, *baqsis* became an easy target for the Soviet antireligious campaigns in the past, whereas *moldas* and *tawips* practiced simple and short healing rituals, such as *tamir ustau*, *tuzdau* and *dem salu*, in a quiet manner, without taking much public attention (Privratsky, 1998:360). The Soviet repressions in the 1930s banned the shamanic rituals and expropriated the ritualistic tools such as ceremonial knives, whips, costumes, drums, etc. (Sundstrom, 2014). These days it is not common to seek help from the *baqsi*. There are two reasons for this. The main reason is that there are not so many *baqsis* left. Kazakhs in rural areas usually say that they know some *baqsis* in some distant places but not many of them have encountered *baqsis* in person (Privratsky, 1998:361). Another reason may be the decreased interest in being a *baqsi*. Since the way of the *baqsi* is a difficult journey, not many are ready take up the “calling”

(Raikhan):

Raikhan: *Бақсы болу оңай емес, бақсы жолы қиын. Қазіргі заманда нағыз бақсыны бүкіл Қазақстаннан издесең де таппайсың. Нағыз бақсыны айтамын, қаладағы анаубір колдун секілділерді емес.*

Raikhan: It is not easy to become a *baqsi*, the way of the *baqsi* is a difficult one. Nowadays you may not find a proper and traditional *baqsi* even if you search all over Kazakhstan. I am talking about a real *baqsi*, not some pretentious sorcerers.

The state of *zikir* is not popular among the modern *emshis*. In fact, *zikir* is considered as something archaic, as well as many other shamanic practices (Privratsky, 1998:377/Raikhan):

Raikhan: *Бақсыны тапқанның өзінде, бұрынғыдай жалпырып адам тамсандыратын, неше түрлі қарулар, киімдер, барабандар және тағы басқа заттарды қолданатын рәсімдерін қойған. Зікірлік, мысалы, қазіргі заманда емиілердің ортасында өте сирек кездеседі. Ол қазіргі ғылыми дамыған және де логикаға*

бағынатын заманға сай емес сияқты. Қазіргі адамдар ондай қатты интензивті бақсылыққа сенім артпайды.

Raikhan: Even if you manage to find a *baqsi*, it is unlikely that you would see the ancient eccentric rituals using different tools, drums, and costumes. *Zikir*, for example, is rarely practiced among modern *emshis*. It does not seem to comply with the rules of the modern world based on science and logic. Modern people have no faith in such intense witchcraft.

Aside from evil jinns and *saytans*, there are other spirits in traditional Kazakh discourse. *Albasti* is an evil female spirit that can kidnap a child and drown him in the river. Only a *baqsi* can deal with the hauntings of *albasti* and rescue the child. *Peri* and *daw* can be good and bad spirits. These two are considered the essential spirits that help the *baqsi* heal patients. *Peri* (*su peri*) spirits are also female spirits that can appear in the shape of beautiful women, luring and bewitching men, while *daw* spirits are underworld demons with seven legs that kidnap girls (Grzywacz, 2010:20). In some discourses, it is believed that *baqsis* can have different spirits and that sometimes their ancestor-spirits may be possessed by *jinns*, the most powerful one among other spirits in a Kazakh, or maybe even whole Central Asian culture. That could explain the *baqsi*'s "demonic behavior" during his séances (Privratsky, 1998:370).

As it was mentioned, *baqsis* are considered as shamans of Central Asia. Bruce G. Privratsky (1998:361) does not consider shamanism as religion, saying that it can easily coexist with different religions. In Kazakhstan, this religion is Islam. Therefore, we may infer that the Kazakh shamans adapted to the Muslim culture and thought as the authority and legitimacy of their healing practices depended on the social ideology, and Islam was the Kazakh ideology. So the shamans came to be known as *baqsis*. *Baqsis* are sometimes even called Islamized shamans (Garrone, 1999:15). Being a *baqsi* does not disturb one from being a Muslim. In fact, these two could even complement each other in a *baqsi*'s healing methods. For example, it is not a rare practice for a *baqsi* to incorporate the prayers from the Quran along with the spiritual shoutings and violent movements during the rite or to advise the patient to visit the *molda* for the prayers. Despite this smooth combination of religious elements and traditional beliefs, the extent to which

the Kazakh *baqsiliq* is influenced by Islam needs further research. Although some of the features of the Kazakh *baqsis*, such as shamanic sickness, were also observed among Malaysian and Siberian shamans, societies also influenced by Muslim culture, there is no evidence that Kazakh *baqsis* entered ecstatic trance because the Siberian shamans did (Privratsky, 1998:384). In fact, some researchers even resembled the Kazakh *baqsiliq* to Mongolian shamanism rather than Central Asian Muslim culture. Chokan Valikhanov (1864) argued that shamanism is a natural component of the Kazakh culture the same way as Mongolian shamanism is natural of a Mongolian society. The reason was that, aside from many other Central Asian communities, the Kazakhs and the Mongols led a nomadic lifestyle ((Privratsky, 1998:37).

2.5. Body healers.

All of the four types of healers described above can be classified as spiritual healers. A body healer is a healer who performs treatment using a specific touching and massaging the damaged area to cure physical ailments. The body healers of the past were traditional masseurs like *siniqshi* (bonesetter), *ukalaushi* (rubber), *isqilaushi* (rubber). The last two use almost the same technique: while the *ukalaushi* touches upon the injured place gently moving their hands, the *isqilaushi* rubs the damaged place in an aggressive and impulsive manner in order to create heat. They mostly use animal fat to warm up the body of the patient and then heal with the massaging therapy. One of the most popular types is *siniqshi* (bonesetter). His services were in particular need in the past when medical care was not widely available. His job description is basically how it sounds like – observing the bone fractures and joint injuries, then setting the bone and putting it into the right place. They were believed to get their anatomical knowledge from the ancestors and *aruaqs* in the past but now they get that knowledge from the medical courses. (Grzywacz, 2010:18). I have named this category as “physical body healers”. So the

healing techniques of this type of body healers are often supported as they have a biomedical base.

Nowadays, there are modern types of body healing practices as this category of healers has been exposed to significant foreign influence. Thus, these healers incorporate both the old traditional massage therapies and the new techniques that came from abroad. The majority of them claim to have an inherited “gift”, supernatural powers, to heal other people. I would name this category as “spiritual body healers” but not all of them rely on spirits during their healing treatments (Yuliya):

Yuliya: Я часто лечу людей с помощью энергетических токов. ... Свой способности я получила от моей бабушки. Это родословное. Знания развиваю сама, учусь и практикую.

Yuliya: I often heal my patients by using electric currents. ... I have got my abilities from my grandmother. It is genealogical. I develop my knowledge in this field through learning and practicing myself.

Modern body healers use different strategies to treat their patients. Some of the most common techniques include using the “energy fields”. This is all done by touching. The therapy is called “bioenergotherapy”. It is done by transmitting the bioenergy at the damaged organs through the healer’s palms. The healer’s inner energy can get into the patient’s body and fight the illness. This practice is also sometimes used by spiritual healers (e.g. *baqsis, tawips*) (Grzywacz, 2010:25).

This category of healers is quite popular in today’s Kazakhstan. A lot of traditional healing organizations provide many different types of healing procedures that I classify as body healing. These modern body healing also include the techniques that are not necessarily based on supernatural powers. The most popular ones include manual therapy, acupuncture, homeopathy, osteopathy, etc. Although these techniques seem to have legal approval from biomedical institutions, they take their roots from folk knowledge and they are regarded as part of folk healing.

Overall, the presented classification covers the main typologies of healers in Kazakhstan. Many rituals are generally performed by different *emshis*¹⁹. This indicates that the specializations of different healers often overlap with each other. Although this is the case with a number rituals, there are also cases when some healers cannot practice certain rituals while other healers have legitimacy²⁰ to perform those rituals. Therefore, it is important to understand the differences between them as some healers are perceived as more legitimate in specific cases than others depending on the trouble (e.g. illness) and specialization of the healer. This way, examining the dynamics behind different types of folk practitioners contributes to the measurement of the legitimation techniques. The next chapter is devoted to measuring those instruments of getting legitimation and comparing them with each other in order to find out which factors play crucial roles when patients choose to approach a folk healer.

¹⁹ A Kazakh healer

²⁰ Because of their classification that identifies their specialization.

Chapter 3. Wielding legitimacy into folk medicine.

Folk healing practices have always been a significant part of the Kazakh culture and lifestyle. Those practices have been preserved and developed through history and changing politics around the way people think of and use medicine. Although the Kazakhstani biomedicine sector has significantly improved over the years, folk medicine still remains a popular option in times of illness (Dzhumagalieva, 2020). A wide array of traditional healing therapies is available to public. Kazakhstan is among the countries where ordinary people more are likely to approach a folk healer for certain illnesses and symptoms than people in many other countries, with almost 20 percent of people who have unusual lumps or warts on the skin usually preferring to approach a traditional healer over a conventional doctor (Stickley et.al, 2013). However, it is not always clear how folk healing still come to be a valuable option that ordinary people choose to approach in times of need.

There are three main agents in folk medicine provision. First, a person who is undergoing a treatment procedure – a patient. This person is the one who willingly comes to a folk healing practitioner to get appropriate treatment. Second, a person who is providing treatment – a healer. That person is the main figure who decides what kind of treatment to be used and how everything should process. Third, in any interaction between the individuals where service is involved, especially if it is commercial, there is always a third actor – the state. This is an institution operating through its smaller branches (e.g. the Association) that controls and regulates services and decides whether a particular service complies with the rules and norms of the state.

This chapter is dedicated to understanding all of those three agents and the scope of their role in providing legitimacy to folk medicine. The three agents are consistent with the Weberian concepts of legitimacy: traditional, charismatic and legal. Each of these three legitimacy concepts are represented by those agents. The first actor, patients, is the main representative of

traditional legitimacy as folk practitioners have historically a formed authority in a Kazakh society. Charismatic legitimacy is mostly indicated by healers, variety of their skills, different approaches in the provision of medicine and adaptations to the modern world. Lastly, the laws and regulations of the state of Kazakhstan represent legal legitimacy as the interference of the government has always played a crucial role in the development and representation of traditional healing practices. The concepts of legitimacy and their appropriate agents can sometimes overlap with each other and the same actions or techniques can be used to define different legitimacy types. The chapter will measure the extent of influence of each of the legitimacy types and discuss the dynamics behind the traditional medical care in the context of Kazakhstan. The purpose of this chapter is to understand how and why people submit themselves to the authority of certain individuals – traditional healers, who are believed to have the knowledge and power of folk healing treatments they represent. I will analyze the processes of gaining legitimacy and achieving authority of folk medicine practitioners in post-Soviet Kazakhstan.

The indication of “traditional” legitimacy

The collapse of the Soviet Union resulted in an increased proliferation of different folk medical therapies that coexist with the conventional biomedicine in the republic of Kazakhstan²¹ (Penkala-Grawecka, 2018). Despite the improvements in biomedicine sphere, folk healing is still very popular in Kazakhstan. People can easily obtain the services of traditional healers through both official channels of communication (medical organizations and healer associations) and unofficial channels (family members, relatives, neighbors or other people). So how does folk medicine gain legitimacy and authority in today’s society? One of the biggest factors is the role of traditions and customs. As in other Central Asian states, those play an important role in the

²¹ Turn to cultural and national values and traditions in order to self-identify and distinguish from the previous state regime (USSR) where cultural values and lifestyle, which included folk healing practices, were downplayed.

way the society functions in Kazakhstan. This section will cover certain types of healers and healing practices and discuss which “tradition” their healer’s authority refers to while achieving traditional grounds for the provision of folk treatment. The concept of traditional legitimacy in this research project is based around the idea that “legitimacy” is achieved through and justified by the traditional and social norms of the Kazakh society.

Traditional legitimacy in the context of Kazakh folk medicine is about the common belief in the society that was experienced and “traditionalized” with time (Lindquist, 2001). During the Soviet period, traditional authority of folk healing was the main driving force behind the “survival” of traditional healing practices from the attacks of the Soviet antireligious and atheist campaigners. In Kazakh society, when there are individual, familial or social disorders in a person’s life, it is usually attributed to evil spirits (*jinnns*), and the only one who can help in such situations is *emshis*, traditionally *baqsis* (Vuillemenot, 2017:63). The *baqsi* can perform some sort of exorcism and drive the evil forces away. This common belief among Kazakhs is a powerful demonstration of traditional legitimacy, the legitimacy that has been forged through centuries, left a legacy and kept in people’s memories. This is also supported by the custom that the status of *baqsi* is usually inherited. So if there was a respected *baqsi* in a community, it is expected that the *baqsi*’s kinship lineage would continue producing the next generation of *baqsis* and with time it becomes the community’s tradition to regard the representatives of that particular bloodline as *baqsis* (Grzywacz, 2010:21). This process, according to Yuliya, a body healer, relates to other healers as well, not only *baqsis*. Also, powerful literature pieces on the topic, such as Privratsky (1998), Grzywacz (2010) and Penkala-Grawecka (2013), seem to provide solid grounds for the inheritance of powers for all *emshis*. However, in today’s world this view of power transition is challenged. As I pointed out in Chapter 1.1, the role of the healer as the arbiter and mediator of spiritual life became de-emphasized and people had to start practicing these rituals themselves because the Soviet state was dismantling the structures of traditional medical sector (Beller-Hann, 2001). This had two opposite effects. On the one hand,

this process supported the traditional techniques of healing and helped to keep faith in folk medicine while being practiced “underground”. On the other hand, it devalued the role of healers themselves as some people did not need healers for their treatments. They performed those simple treatments themselves:

Salamat: *Ел өзінің қиындықтарын өздері шеше бастады өйткені емшілерден көмек сұрау қиындатып кетті. Олар [ел] тұзбен ұшықтау, аластау дегендерді, кейбір Құран аяттарын, яғни қазақтың ең өзі көп қолданған емшілік түрлерін өздері істей берді. Бұл бір жағынан, қазақтардың емшілікке деген ниетін және де білімін арттыра түсті. Бірақ екінші жағынан, емшілердің қажеттілігіне күмән тудыра бастады өйткені олар [емшілер] тек күрделі жағдайларда ғана шақырылды.*

Salamat: People began to solve their own health problems as it became more difficult to seek help from healers. They [Kazakhs] started practicing ushyktau, alastau, reading some verses of the Quran, the most common forms of healing used by the Kazakhs. Although this increased the Kazakhs' experience and knowledge about traditional medicine, the need for healers began to be questioned because they [healers] were called only in difficult cases and often considered as a last resort.

We can see how one of the results of the Soviet restrictions, that is legal legitimacy, had a controversial influence over traditional legitimacy. While this development resulted in an increased awareness of the public of the folk healing “traditions” in general, it undermined the traditional authority of Kazakh healers.

The fact that ordinary people could perform healing rituals suggested the growth in the numbers of healing practitioners as people started getting education and qualifying for healers without the notion of being chosen by the spirits. The prevalence of traditional healing practices has led to the shift of authority in spiritual healing. In a global context, the main sources of divine power have moved from saints, mages and sages to the province of ordinary individuals in the society (Cohen, 2002-2003). The gift of health provision has become accessible to the public. Grzywacz (2010:41), for instance, emphasizes that a range of different courses and programs produce a lot of qualified healers in Kazakhstan, despite the opposing local traditions. Those who would like to pursue the path of a healer may acquire the necessary skills through training in

special institutions. This trend has drawn a line between religious/spiritual healing practices and traditional medicine, untying the latter one from the former one²².

Although this trend was the main development in an alternative medicine discourse globally, folk healing in Central Asian states remains under the umbrella of “religion”, not “medicine”, especially when it comes to spiritual healing practices (Cohen, 2002-2003:382). In spite of the various alternative medicine organizations and traditional healing training and education centers, the majority of Kazakhstani healers still hold the traditional position that spiritual healing abilities are not something that everyone can learn but an ancestral gift. My informants support this belief. They posit that ordinary people can learn some techniques of traditional medicine methods concerning herbal medicine, manual therapy and etc. However, when it comes to spiritual healing, e.g. *alastau* (exorcism), expulsion of *jinn*s, it is not possible to gain such kind of powers by studying and training because one cannot learn the “gift”. All my informants claim that their healing powers transcended to them through their lineage. Their healing abilities were passed down from their grandparents. Raikhan, Altai and Salamat got their powers from their father’s side while Yuliya from her mother’s side. According to Salamat, he obtained his healing powers from his grandfather as an oldest grandchild in their extended family:

Salamat: *Бұл емдеу қасиеті көбінесе ата-бабадан үлкен немерелеріне барады. Мен де өз үйімнің үлкенімін. Бірақ емшілік қасиет тек үлкен немерелерге барады деп ойламаймын. Ол өзі көбінесе солай болады өйткені үлкен немерелер қазақта ата жолын қууға бел буады. Менің артымдағы бауырым мысалы емшілік дегенге жоқ. Қасиеті бар деп сенем, бірақ ол өзі осы жолды таңдап, сеніп, осы жолға туспегелі, ол емші бола алмайды.*

Salamat: This healing ability is often passed down from ancestors to their older grandchildren. I am also the eldest in my family among grandchildren. But I do not think that healing powers go only to older grandchildren. This is often the case because the oldest grandchildren in a Kazakh community usually decide to follow in the footsteps of their grandparents. For example, I have a younger brother but he is not a healer. I think he has the gift but in order to harness his power and become a healer, he has to choose a healer’s path, believe in it and follow it.

²² The implications can be seen in Chapter 1.2.

Raikhan, on the contrary, is the youngest daughter in her family, so she is far from being the oldest grandchild. Yuliya adds that the extent of a healer's powers can depend on other healers in the family and one person from the lineage usually has the most of powers while those powers are weaker or dormant in other healers or ordinary people from the healer's direct family:

Yuliya: *Целительские способности у нас передаются по родословной со стороны матери по женской линии. Мои способности раскрылись еще в детстве. Но они усилились после смерти моей матери. Мне тогда было примерно 25 лет.*

Yuliya: My healing abilities are passed down through our genealogy from my mother's side and it is passed through the female line. My abilities were already revealed in childhood. But my powers became a lot stronger after my mother's passing. I was about 25 then.

Thus, she believes that her powers are limited and only one from the lineage has the most of it.

This system of power transmission also means that sometimes healers may gain legitimacy based on the community's traditional thought about the healer's lineage even without much folk knowledge or healing expertise:

Yuliya: *Моя бабушка была очень популярной. Она была сильной целительницей. Многие люди из нашей деревни обращались к ней во время бед, и она всем помогала. Позже люди также начали обращаться за помощью к моей маме, но у нее не было такого же дара как у бабушки. Я думаю у нее [у мамы] были способности, но она их не развивала. Поэтому моя мама не обладала такими же целительскими способностями как моя бабушка. Но к ней часто приходили люди с просьбой помочь им с исцелением их близких. Им было сложно понимать, что моя мама не обладала такой же силой какой обладала моя бабушка. Они думали, что по традиции моя мама примет целительство и будет также как моя бабушка проводить целительские сеансы всем нуждающимся. Ну вы знаете, традиции и вот это традиционное восприятие вещей это абсолютно все в наших краях.*

Yuliya: My grandmother was very popular. She was a powerful healer. Many people from our village approached her in times of trouble, and she helped everyone. Later, people also began to turn to my mother for help, but she did not have the same gift as my grandmother. I think she [my mother] had abilities, but she did not develop them. Therefore, my mother did not have the same healing abilities as my grandmother. But people often came to her with a request to help them cure their loved ones. It was difficult for them to understand that my mother did not have the same powers as did my grandmother. They thought that my mother would traditionally inherit healing powers and would be just like my grandmother conducting healing sessions for everyone in need. Well, you know, traditions and the traditional perception of things is absolutely everything in our Kazakhstan.

Although being constantly under attack of the modern means of getting healing powers, in a form of medical qualification and certificates, this chapter argues that the notion of the power inheritance in a folk healing world is one of the most powerful expressions of traditional legitimacy.

Tumar is a common tool against the evil spirits. It is a triangular amulet made of leather with the special prayer inside written by a *molda*. It is widely used among Kazakhs to protect people, usually children, from the *koz tiyu* (evil eye) – that is, when someone is overly fascinated by a particular child and praises him/her too much that it can induce a curse or bad luck – or any kind of spells (Grzywacz, 2010:10). Because this amulet has divine powers, it is normally taken good care of and tearing it to see what is inside is considered an immoral act of blasphemy. I posit that *tumar* is a good example of the Weberian traditional legitimacy as people would not question the authority of the *moldas* and seek rational answers for their practices, especially those who take prayers and order *tumars* from them. The application of traditional legitimacy into *tumar* has a powerful influence on charismatic legitimacy of certain healers. *Tumar* is considered as a religious object. It is a *molda*'s “tool” or source of attaining legitimacy, which is gained through traditional norms, religion and history:

Salamat: *Тұмар тағу дегеніміз ол біздің бұрыннан келе жатқан дәстүрлі затымыз. Оны адамдар жамандықтан аулақ жүру үшін тағып жүреді. Тұмарды негізі Ислам жолындағы қазақтардан кездестіруге болады, өйткені оның, яғни тұмар қалташасының, ішіне арнайы Құран аяттары оқылып, жазылып қойылады. Сондықтан да, тұмарды жасау ол Араб тілін меңгерген молдаларға тиесілі деп ойлаймын. Өйткені олар Құранның дұғаларды тұмарға жазып, ішіне оқып салуға қабілетті. Басқа емшілер тұмар жасайды деп ойламаймын.*

Salamat: Wearing *tumar* is one of our old and long-standing traditions. People wear it to avoid the *jinn*s. *Tumar* is mainly worn by those Kazakhs who follow the way of Islam because the amulet contains special written verses from the Quran inside. Therefore, I think that the task of creating *tumars* belongs to the *moldas* who know Arabic as they are the only ones capable of writing and reading Quranic prayers into *tumars*. I don't think other healers make *tumars*.

Healing practices often overlap with each other and healers provide a wide variety of treatments from different “areas” (Grzywacz, 2010). Nevertheless, while other *emshis*, especially *tawips*,

can also be considered as religious healers who offer treatments with Quranic prayers and etc., no healer can make *tumars* except *moldas* who are adept at Arabic (Privratsky, 1998:342). Thus, other types of healers, though practicing similar treatments, are deprived of the opportunity to widen their expertise by including making *tumars* into their assortment. So traditional legitimacy given to *moldas* to make *tumars* cannot be taken away from them as there is no competition on this practice. That way, traditional legitimacy limits personal abilities of certain healers, non-*moldas* in this case, the abilities which I attribute to charismatic legitimacy.

The indication of charismatic legitimacy

In this chapter, a healer's charismatic legitimacy comes from the usage of a healer's individual attributes, skills and objects to gain legitimacy in the eyes of their patients and maintain their social status (Lindquist, 2001). The core of charismatic legitimacy is the "charisma" of a certain person, in this chapter – healers. It is not an easy task to elicit the extent of influence of charisma of a healer in a healing ritual. However, it can be a powerful type of legitimation strategy for certain healers. For example, *baqsis* are usually represented as charismatic healers because they use ecstatic trances, eccentric noises and other types of unordinary techniques in their rites (Penkala-Grawecka, 2013:25).

When the patient is ill and needs a treatment procedure, a healer performs a ritual purifying the body and the soul of the patient by various methods, such as beating with a Kazakh traditional horsewhip called *qamsi*, spitting to the face, whispering the prayer standing above the patient, making a patient spit into the glass of salt three times after it was circled above the head of the patient three times, etc. (Grzywacz, 2010:14). Many of these rituals can be unpleasant for ordinary people. Therefore, such practices usually require not only a healer's experience and skills but also his confidence. This is where the theory of charismatic legitimacy can be applied.

A healer needs to be able to make the patient have faith in his treatment. As it was previously mentioned, folk healing in the context of charismatic legitimacy is exposed to regional and personal varieties. It means that a single healing ceremony might be performed differently by different healers using a variety of approaches. Charismatic legitimacy is the representation of that difference. Also, charismatic legitimacy includes individual promotion methods, such as advertising through social networks or other Internet sources, physical distribution of pamphlets, decorating the healing room with a variety of objects, putting certificates and awards on screen.

An individual example of this type of legitimacy comes from an ethnographic piece by Anne-Marie Vuillemenot (1994). She observed a Kazakh *baqsi* named Kuat, who conducted the rite, *zikir*, for two boys. One was a stutter and another was mute. In the process, he was at the center of a circle of people. Behind him, there was a table with “holy” books – the Quran and the ones he acquired from older shamans. Next to the books, he had other ritual objects like cloths and a bag with 41 divinatory beans (*qumalaqs*), and the umbilical cord of a sheep, which was the only thing used in the performance. From the pictures she [Vuillemenot (1994)] provided, I could see that Kuat is fully dressed in white and so were the boys undergoing the rite. The whole ritual was based on his systematic movements around the fire at the center of the circle of attendants. In the culmination part, Kuat stabbed the hen with a skewer through her throat. The whole performance has given a deep impression on the audience. So the question arises: Why would Kuat put objects unnecessary for the ritual in the scene? Do such items add legitimacy to his ritual? This chapter argues that those “holy” objects and spectacular performances serve to provide the individual, charismatic, legitimacy into folk healing practices.

Magomed. From my fieldwork, the perfect example of a charismatic healer is Magomed, a Central Asian *baqsi* whose treating procedure I was able to observe in my digital ethnography. In his healing rituals, Magomed integrates the old steppe traditions with the Islamic suras (chapters from Quran). For instance, he helped a man, who was endlessly seeing nightmares, by covering

him with a white shroud/cerement (a funerary blanket used in Islamic burial) and reading religious prayers in a cemetery, believing that he should face his *shaitans* (demons) in order to drive them away. This blanket is then burned under the shamanic musical performance with the special drum rhythms going around the burning tissue.

The main attention in the digital ethnography was given to treatment of Daniyar and Zhazira, a couple that had problems with conceiving a child. Magomed's séances are so popular that his patients in the video, Daniyar and Zhazira, travelled 400 kilometers to meet him. They approached the shaman in the daytime and they entered his room where he usually holds his séances. It looked like a usual small rectangular room with the heads of stuffed animals (it was not specified whether they are real) in the walls, which, according to the *baqsi*, fill his house with power. The couple sat down at the low table and the *baqsi* sat on the opposite side of the table. When the husband just started talking about their problem, the *baqsy* stopped him and continued talking about their issue instead of Daniyar, mentioning the facts that are only known to the couple. The *baqsi* started his ritual with predicting the future with 41 *qumalaqs* (see Chapter 2) that showed that the couple Daniyar and Zhazira were under the *shaitan*'s influence. The *baqsi* concluded that Daniyar's soul was more damaged by the evil spirits than that of his wife's, even though the disapproval of Zhazira's father on their marriage was identified as the main reason of their bad luck. When Daniyar performed bride kidnapping, an old steppe tradition of family-building institution, he went against the will of her father and took responsibility for the creation of a new family. That is how his soul became more susceptible to the *shaitans*. So the main reason of the couple's bad luck with bearing a child was that they got married without her father's blessing.

After the small chat with the couple, the *baqsy* started his ritual with the husband. Daniyar went down the room and sat near the entrance. Magomed sat near him and started reading some prayers, which seemed very Islamic-related, then he raised his right hand and started convulsing

and vibrating making wild sounds that resembled the barking of a dog. At last, he said “*ket shaitan*”, which means “leave, get out *shaitan*” in Kazakh. This process continued for about five minutes. Then Magomed went out to bring the tools. He brought a flatware (big flat plate), eggs, different types of knives and scissors, snuffers (forceps), fetters, and the metallic end of a shovel. The husband was commanded to lay down on belly. The *baqsi* heated the shovel’s metal in a gas stove and put it in the plate. He ran with eggs along Daniyar’s body, slightly touching it. He explained that eggs symbolize the beginning of a new life and can absorb all the negative energy from the human body. He then crashed those eggs into the heated metal from shovel. This metal was so hot that the eggs instantly turned into an omelet. Mogamed did not feel While smashing this scrambled eggs with his right foot, Mogamed did not feel any pain because he was in a shamanic trance. The *baqsi* was running with this foot smeared with eggs/omelet along Daniyar’s body, slightly burning his skin and touching the special points of his back and front, from where, as he thinks, the bad or evil energy could penetrate. During the process, Mogamed was asking him every time “Ketti ma?”, basically asking Daniyar if the demon has left. After that, Daniyar was told to sit on a chair and not to move while the *baqsi* performs the second ritual. The next ritual looked even more dangerous for an untrained eye. Mogamed was running with two dull (not honed) knives through Daniyar’s hair and, at the same time, spitting the water, which he was drinking from a cup. He then grabbed Daniyar’s tongue with the knife-looking special scissors and waved it three times by saying, as far as I heard, “*Allahuakbar*”, which is a typical Islamic saying that means “Allah is great”. The question of “Ketti ma?” was also repeated over and over here. Undergoing such a process, Daniyar barely could say anything.

These two rituals went one after another and, I would say, were the complementing parts of each other. Firstly, there was not a gap between those two, one went immediately after the other. Secondly, during both of the rituals, Mogamed was saying the same words (“ketti ma?” and “*Allahuakbar*”) and making the similar sounds. Looking at the first example of performing a ritual in a cemetery and the one with Daniyar, the differences are difficult to overlook, whereas

the purposes of both of them were quite similar: to drive away the evil spirits. This difference between two distinct practices is the indication of charismatic legitimacy. Although I cannot argue that Magomed has his own unique ways of treatment, he definitely achieved legitimization of his practices to Daniyar and Zhazira. This can be noticed from Zhazira's happy tears at the end of the video. Daniyar also said that he felt relieved, as if he underwent a shock therapy that took his burden off his shoulders and became reborn. This project argues that Magomed's ritual tools and a special (shamanic) behavior, including words, shouts and sounds – all of these in combination – serve as contributors of the display of the Weberian charismatic legitimacy.

The high level of popularity of folk medical treatments in today's society was something I had doubts about. Although I interacted with folk healing a couple of times in my childhood (2008-2012), it has not been a common practice among my friends to go see a folk practitioner when there is a health problem. I used to think that younger generation do not use healers' services as often as older people. So I hypothesized that folk healing is not so popular nowadays as it was in the past, meaning the cultural and nationalist boost after getting independence in the 1990s (see Chapter 1.2).

Sharing the same cultural background, I was surprised to receive positive responses in terms of the development and popularity of folk healing in Kazakhstan. As it turns out, my hypothesis was not met by my respondents. In fact, many emphasized that it became even more popular than in the 1990s. Obviously, people can access traditional medicine (manual therapy, bioenergotherapy, acupuncture, needle therapy, etc.) in specific medical centres that provide those services. They can also access the services of folk healers who provide spiritual healing techniques (*alastau*, *ushyktau*, reading prayers against *koz tiyu*, *til tiyu*, *baqsiliq* séances, etc.). In most of the cases, both of these types of traditional medicine are performed by the same healer (see Chapter 2). For example, Altai mentions at least three different techniques from different “schools” of traditional medicine:

Altai: *Вообще я знаток трав, и начинал свой путь леча людей с помощью трав и настоек. Этому меня научили мои предки. Позже я прошел курсы и отучился на массажиста, сейчас вроде называются мануальный терапевт. У меня это очень хорошо получалось, и я стал профессиональным мануальным терапевтом. Но все же, я с детства знал, что у меня есть дар целительства. И я позже начал этот дар развивать. Это меня привело к биоэнерготерапии. У человека разные органы имеют разные цвета энергии. У нормального человека 1 внутренний генератор – мозг, а у человека с даром есть 2 генератора – мозг и ладони. Так вот, во время биоэнерготерапии я могу чувствовать разные энергетические потоки людей и диагностировать болезнь. Когда я их лечу, я перенаправляю энергию из своей ладони к больному органу и через определенное количество таких сеансов человеку становится намного легче и боль проходит. ... Сейчас я так же занимаюсь травяными настойками, мануальной терапией и биоэнерготерапией. И чаще всего я применяю две или более техники вместе.*

Altai: In fact, I am connoisseur of herbs, and began my journey by treating people with herbs and tinctures. My ancestors taught me all of that knowledge about herbs. Later in my life I took courses in massages and learned to be a massage therapist, now I think they are called manual therapists. I did massages quite well and became a professional manual therapist. But still, I knew from childhood that I have the gift of healing. And I later began to develop this gift. This led me to bioenergotherapy. People have different colors of energy for different organs. A normal person has 1 generator inside – the brain, and a person with the gift has 2 generators – the brain and palms. So, during bioenergotherapy, I can feel different energy flows and diagnose a disease. When I treat them, I redirect the energy from my palm to the diseased organ. After a certain number of such sessions, the patient becomes healthier and the pain or stiffness fades away. ... Nowadays I practice herbal therapy, manual therapy and bioenergotherapy. And in most cases, I apply two or more techniques together.

This “hybridization” of traditional medical practices has been the product of an increased competition between healers. Rivalry and competition were produced from different factors, such as foreign influence (e.g. inclusion of Eastern medical techniques), growing popularity of folk healing techniques, etc. The main push was the country’s socio-economic and political situation after the independence. At that time there was not a steady health care program in Kazakhstan, so the services of folk practitioners were widely used by the population and appreciated by the government (Penkala-Grawecka, 2018:82). The hybridization then developed and became as something common in today’s healing practices.

Nevertheless, the “charisma” of a healer is not only measured by the factor of how effective a healer did the job and the healer’s ability to perform healing techniques from different

areas. Another powerful tool for charismatic legitimation is the healer's individual image in society. In other word, how well does a healer represent himself for public. This image is described in the advertisement. Healers use different types of advertisement and means of communication. Their potential patients can sometimes find the "portfolio" of a healer's work with comments from other patients on the Internet (see Chapter 1.3). This usage of modern tools is quite widespread these days.

The indication of "legal" legitimacy

Rational-legal legitimacy is the type of legitimation of a healer's practice on a legal basis. This kind of legitimacy depend on the context, in this case the laws of a certain country. The state rules have always played a significant role in traditional healing practices in Kazakhstan. During the pre-Soviet period, the ethnographic pieces by Russian tsarist researchers dating back to eighteenth and nineteenth centuries described Kazakh folk healing practices as "tricks" that are backward and often harmful. Central Asian shamans²³ were viewed as either charlatans or people with mental disorder problems (Privratsky, 1998). Under the Soviet rule, the Soviet anti-religious campaigns and atheist propaganda were launched to eliminate folk healing techniques, delegating most of the practices, especially the spectacular and unordinary performances of the *baqsis* (Soskovets, 2016). This shows that the Russian government had a negative attitude towards shamanism, and perhaps towards other healing methods as well, even before the Soviet era (Michaels, 2003). The discourse of backward folk healing methods was present in both government official journals and biomedical approach before the independence in 1991 (Penkala-Grawecka, 2013:39).

²³ The main attention was given to them among others at that period

Although this initiative to destroy the traditional forms of health provision was not fully successful, it forced folk medicine to go underground, resulting in a smaller number of healing rituals provided by healers over that period (Beller-Hann, 2001:72). The outcome was that ordinary people started practicing simple healing rituals because many could not access folk healers. This, in combination with the government ban, shaped the domesticized manner of healing practices. Here I argue that this practice resultant of the legal boundaries has diminished the role of traditional legitimacy by undermining the role of healers in a society. Traditional authority of Kazakh healers was undermined because they could not help people by providing healing services and share their knowledge and wisdom as explicitly as before. Many healers struggled with the policy of restricting them from helping people:

Raikhan: *Совет Үкіметі біздің халықтық медицинамызды заңдылықтан алып тастады да, Қазақ емшілігінің күл талқанын шығарды. Көптеген жақсы және де атағы шыққан емшілерді милиция жазалады. Емшілерге қиын болды. Біз емшілер халыққа көмек беріп қол ұшымызды тигізіп жүру үшін жүрміз емес па, бұл бұрынғы заманнан бері салт дәстүрімізде қалыптасқан нарсе. Ал Совет Үкіметі емшілерді ондай мүмкіндіктерінен айырды. Емшілер дәстүрлі құқықтарынан айырылды және мұқтаж науқастарды емдеуге арналған табиғи еріктерінен айырылды.*

Raikhan: The Soviet government removed our traditional medicine from legal medical services and attempted to destroy Kazakh folk medicine. Many famous and skillful healers were punished by the police. It was difficult for the healers. We, healers, live to help people, it's something that has been a part of our traditional nature since ancient times. The Soviet government deprived, at least legally, the healers of such an opportunity. Healers were deprived of their traditional rights and natural will to heal those in need.

The pressure put on traditional authority of healers by the law was a part of a larger Soviet program that was aimed at eliminating the traditional values and lifestyle of the Kazakhs and creating the working class out of Kazakh shepherds (Payne, 2001). So the attack on folk Kazakh folk medicine was a part of the attack on Kazakh tradition in general.

Nowadays, there are some restrictions in law concerning the provision of folk healing practices. First of all, a healer needs to obtain a special license from the official healthcare organization where a healer passes some sort of examination to prove his healing abilities (see chapter 1.2). Also, it is prohibited for healers to perform mass rituals. For violation of those

rules, healers can get an administrative fine up to 150 monthly notional units²⁴ (Prokhorov, 2019). Aside from the administrative responsibility, there is also a criminal law on the adverse effects of folk medical treatment. However, since this law is attributed to the “fraud” section, it is very difficult to indicate the cases of fraud in folk medicine. Therefore, this criminal law can hardly be observed in action. For instance, there was not any registration of fraud by folk healers in 2019. Considering that a lot of Kazakhstanis approach folk healers on a regular basis annually, this situation does not seem to be right. Prokhorov (2019) emphasizes that the lack of government control and proper legislation has led to this situation of uncertainty. By uncertainty, he means that nowadays people do not know which healers can be trusted and which ones are providing “fake” healing treatments, though it does not stop them from approaching folk medical care. Raikhan also supports this view:

Raikhan: *Қазір бұрынғындай, яғни тәуелсіздік алғаннан кейінгі бастапқы жылдардағындай, мемлекет тарапынан тексерістер мен қадағалаулер жоқ. Ең алғаш жылдарда халық медицинасының бәрі қатты қадағаланатын еді. Былайша айтқанда, заң бар бірақ ол заңның ұсталымын қадағалайтын адам жоқ. Қазір әркім өзін емші деп атап, интернетке өзін жарнамалай алады. Оның жақсы да, жаман да жағы бар. Бір жағынан, бізге [емшілерге] өз жұмысымызды ешқандай бас ауруынсыз, яғни анау бюрократия шаруаларынсыз және үнемі документтерімізді жаңартуынсыз, атқара аламыз. Ал енді екінші жағынан, жағымсыз жағынан, мемлекеттің назары дәстүрлі медицинаға аз аударылғандықтан, қазір өтірік айтып жасанды қызмет көрсетіп, ақшаңды сыпырып алатын алаяқтар да көбейіп кетті.*

Raikhan: Now there are no inspections and strict regulations by the state as before, like in the early years after independence. In the early years, all folk medicine was closely monitored. In other words, there is a law, but there is no one who monitors its obedience. Now everyone can call themselves a healer and advertise their services all over the Internet. This attitude has both advantages and drawbacks. On the one hand, we [healers] can do our job without unnecessary headaches, e.g. going through bureaucratic processes and updating the documents all the time. But on the other hand, on the negative side, since the state pays less attention to traditional medicine, there are more and more scammers and charlatans who provide fake treatments and take people's money. I have a degree medicine. I have a lot of certificates and diplomas in traditional medicine sphere. However, to be honest, my license expired. But I do not think it is important nowadays, because, for example, when patients come to me, they have no doubt about my healing abilities. None of my patients ever asked to see any certificates or a license.

²⁴ 437 550 Kazakhstani Tenge, which is about 870 EUR.

As a result, while there are some laws and regulations in Kazakhstan, they are often overlooked by healers and patients alike. This notion undermines the scope of influence of legal (bureaucratic) legitimacy and indicates that nowadays it is not as great as it was under the Soviet government. What is more, according to Raikhan, patients come to see her and ask for guidance without asking for any documentation:

Raikhan: *Мен медицина саласында оқу оқығанмын. Дәстүрлі медицинасында менің көптеген сертификаттарым мен дипломдарым бар. Бірақ шынымды айтсам лицензиямның мерзімі өтіп кеткен. Ол бірақ қазір өте маңызды деп ойламаймын өйткені мысалы науқастар маған келгенде менің емшілік қасиетіме күмәні жоқ болып келеді. Маған келген науқастардың ешқайсысы ондай сертификат немесе лицензиямды көрсетуге сұраған емес.*

Raikhan: I have a degree medicine. I have a lot of certificates and diplomas in traditional medicine sphere. However, to be honest, my license expired. But I do not think it is important nowadays, because, for example, when patients come to me, they have no doubt about my healing abilities. None of my patients ever asked to see any certificates or a license.

This can indicate that the scope of influence of legal (bureaucratic) legitimacy nowadays is not as great as it was under the Soviet government and during the beginning of the independence in 1991. While there is a huge amount of advertisement of folk healing practices, quite a big clientele and news about the harsh consequences from undergoing folk treatment, there are no news of the laws²⁵ in action or anyone being caught under the act of fraud (Prokhorov, 2019).

Following this thought, we could suggest that the influence of traditional and charismatic legitimacy types is quite stronger than that of legal legitimacy both for healers and patients. As Raikhan explained, her authority is the result of her successful work as a folk healer, and approaching her in times of need has become a “tradition” for those who know her (e.g. family members, neighbors and locals). In her case, traditional approach seems to play a bigger role than the charismatic one in legitimation process, and the implication of rational-legal legitimacy proves to be weak.

²⁵ Laws connected to the provision of folk medicine, violations of which would (hardly) lead to harsh consequences.

Conclusion.

Traditional medicine, both traditional and folk healing methods, have been a significant part of Kazakhstan's healthcare historiography. This historiography has been greatly influenced by the country's political and socio-economic situation in different historic periods. One of the most notable was the influence of Soviet anti-religious policies. It has shaped the modern ways of traditional health provision by making the healing ritual a more domestic and silent activity rather than a big public display that was the case in pre-Soviet period. Traditional healing sector was officially recognized and supported by the government of Kazakhstan after gaining independence as part of a cultural and traditional "revival" programme, leading to popularity of folk medical practices. The popularity of traditional medicine has resulted in the institutionalization of folk medicine. The government of Kazakhstan took control of this medical sector and established legal organizations to regulate the activities of Kazakhstani healers. During the same period, the popularity of folk treatments led to an increased level of competition between healers. That is how the folk healing sector has become commercialized. The official institutions of folk healing supported this development as they required from healers and folk healing organizations to put a price list of their healing services. Although the government greatly supported traditional medicine as a part of a wider national program in the beginning years of the independence in 1991, these days the government does not pay as much attention to folk healing as in those years (Penkala-Grawecka, 2017:24). Nevertheless, folk medicine still remains popular among Kazakhstani people. All of my respondents generally highlighted that it is becoming even more popular nowadays and that the future of folk healing sector in Kazakhstan looks promising.

The described types of healers are mainly what I gathered on genuine Kazakh folk healing. Nowadays, however, one can access different types of healing procedures from various backgrounds. The foreign influence and the overall development of medical pluralism has

become the main reasons for such an addition. Although modern types of traditional medicine, which bases its legitimacy on both ancestral knowledge and biomedicine, are quite prevalent in Kazakhstan, folk healing in Kazakhstan is still associated with spiritual healing and the usage of supernatural powers. That is why the focus is given to healers who use “supernatural” forces and non-scientific methods to cure ailments and diseases. They are called “folk” or spiritual healers because they heal the inner soul of the ill. Nevertheless, the paper covers both of these types of healers. Although this classification into five categories seems to be quite an accurate division, the borders of their specialization are crossed over and over. Healers of Kazakhstan tend to have different specializations and develop various healing techniques. Although healers can be classified into certain groups according to their specialization, skills, and knowledge, one should not wonder if a *palshi* takes a ritualistic knife and starts performing *alastau*. Healers’ specializations often overlap with each other and, when there is a need, any Kazakh healer will be ready to fight against the evil forces.

In this research project, I applied the concepts of Weberian legitimacy to understand the dynamics behind folk healing practices and see how great is the impact of each of them. While legal boundaries played a big role in controlling and regulating folk healing during the first years after the independence, this type of legitimacy does not seem to play a significant role now because of the lack of enough government attention and general disobedience or unawareness of those rules by healers and patients. Although charismatic legitimacy is the type that is hard to detect and measure exactly, the scope of its influence is so great that every healer uses some techniques from it in order to be competitive, and this type is the one where a healer’s legitimacy is never taken effortlessly. Nevertheless, the thesis argues that the general public is the main source of legitimacy for folk healers in Kazakhstan. This public is represented by traditional legitimacy. The majority of healers enjoy legitimation through traditions (e.g. public rumors, historical background of a certain community, cultural and traditional characteristics of Kazakhstanis). Their practices are not usually questioned by their patients because folk healing

in Kazakhstan is rooted in traditions and customs that were formed through historic, political and social events.

This thesis would be a good addition to the scholarship on folk healing practices in Central Asian region. Within the global anthropological and sociological research on folk healing, this work can be considered as a case study based on qualitative research. According to this work, the implications of the theoretical part shows that the influence of the traditional legitimacy is the strongest one in Kazakhstan while the legal legitimacy, contrary to the state's position, plays an insignificant role in providing legitimacy. Charismatic legitimacy also has a significant influence in folk healing, and this type is very versatile in terms of its display, varying from one healer to another. Nevertheless, the analysis of the interview responses indicates that traditional legitimation holds the most authentic value in a Kazakhstani society. This conclusion is the most critical insight of this thesis project.

In light of the above, certain points can be suggested for further research on this topic. The present study demonstrated that the hierarchy of the legitimation types that healers use to construct legitimacy. However, there is a lack of systemic studies on the topic with more sampling. This is needed to add value and enforce the statements and conclusions made in this thesis. Further research could concentrate on the issues of gender and ethnicity, the significant factors that have not been the focus in this vignette.

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