The Way of the Shaman 
and the Revival of Spiritual Healing 
in Post-Soviet Kazakhstan and Kyrgyzstan

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Despite many years of Soviet rule in Central Asia, traditional medical beliefs and practices were not eradicated and their revival has been noticeable in the independent republics of Kazakhstan and Kyrgyzstan. Religious and magical healing, including shamanism, are important parts of this renewed tradition. This article, based on extensive fieldwork conducted in Almaty, Kazakhstan, and its vicinity between 1996 and 2000, and in Bishkek, the capital of Kyrgyzstan, between 2011 and 2013, examines the revival of healing, including shamanism. It focuses on the way of a shaman and of other spiritual healers—the process of recognizing the call of spirits and gaining skills and power, peculiarities of their spiritual development and its social conditions. Additionally, I present this kind of healing in the context of complementary medicine in Kazakhstan and Kyrgyzstan, which, generally, has achieved a strong position in these countries. I discuss complex factors that influence its popularity and official recognition, as well as observable fluctuations in the attitude of the authorities to non-biomedical methods of treatment. On the basis of my analysis I conclude that tradition plays a crucial role in the revival of spiritual healing.

Introduction

This paper discusses the importance of spiritual healing, including shamanism, in post-Soviet Kazakhstan and Kyrgyzstan. Referring to the context of economic, political and social changes following the collapse of the Soviet Union, I present this phenomenon as a significant part of the Kazakh, Kyrgyz and other Turkic groups’ traditions that have been gaining growing in popularity in the independent states of Kazakhstan and Kyrgyzstan. I focus here on the process of becoming a shaman or other spiritual healer, “the way of a shaman,” which has retained its gen-
eral pattern despite some changes that reflect influences of the overall transformations.

The general object of the research that I carried out in Kazakhstan between 1995 and 2000\(^1\) was medical pluralism and the role of complementary medicine in this new post-Soviet state. My further research in Kyrgyzstan in 2011, 2012 and 2013\(^2\) was focused on health-seeking strategies of the inhabitants of the capital city, Bishkek. I studied the reasons for the growing interest in complementary medicine among the public, but was also interested in the attitude of the authorities to different non-biomedical methods of treatment. Spiritual healing belongs to those complementary methods that are highly valued and commonly used in both countries. Although the degree of official recognition differs according to a particular branch of complementary medicine and undergoes some fluctuations, the general stance of the authorities may be characterized as positive or—from time to time—even supportive. This policy contrasts sharply with the previous condemnation and long struggle of the Soviet regime against traditional Kazakh and Kyrgyz medicine and religious healing practices in particular.\(^3\) One of the questions that I address in this context concerns the continuity of tradition. Has it survived despite many years of persecution directed against mullahs, shamans and other religious/spiritual healers? Or is what we observe today in fact quite new phenomena that may be regarded as “invented tradition,” to use Eric Hobsbawm’s (1983) term?\(^4\) The main

\(^{1}\) I conducted fieldwork in Almaty and its vicinity. Almaty (previously Alma-Ata) had been the capital city of the Republic of Kazakhstan until the end of 1997 when the capital was transferred to Akmola (former Tselinograd), now renamed Astana.

\(^{2}\) Research in Kyrgyzstan was funded by the National Center of Science in Poland (Narodowe Centrum Nauki) through a grant N N109 186440.

\(^{3}\) In her pioneering book Paula Michaels (2003) discusses thoroughly the issues of the communist campaign against traditional religious and medical practitioners, especially mullahs and shamans, during the first decades of the Soviet regime in Kazakhstan. She also addresses the efforts of Soviet medical propaganda to persuade the local population to distrust traditional healers.

\(^{4}\) This concept has become fashionable among anthropologists and is often misused. Alain Babadzan (2000: 141) reasonably emphasises that “... the adaptation of traditions need not be confused with the invented traditions.” He notes that according to Hobsbawm’s (1983) ideas, “evolved traditions” (adapted traditions, syncretism, borrowings, reinterpretation or transformation of tradition) should be distinguished from the invented traditions.
object of my analysis is the process of becoming a healer. I argue here that in the case of spiritual healers, although the continuity of local traditions was disrupted, special strategies have been developed to reconnect the links of that broken chain, so that this process may reasonably be called “the revival of tradition.”

Complementary Medicine and its Official Status in Kazakhstan and Kyrgyzstan

Before I present my arguments in more detail, let me map briefly the local field of complementary medicine. Complementary medicine has many forms in Kazakhstan and in Kyrgyzstan which may be roughly grouped into the following categories. First, treatments rooted in what can be generally named local “small medical traditions,” comprising such diverse methods as folk practices of herbalists, midwives and bone-setters as well as spiritual healing of pre-Islamic origins, like shamanic séances or divination combined with healing. There are additionally religious Islamic methods, practiced mainly by mullahs, interwoven with other kinds of spiritual assistance. Another category of complementary therapies consists of numerous practices derived from the various so-called “great medical traditions” of Asian origins, namely Unani, Chinese and Tibetan medicine, Indian Ayurveda and recently adopted Korean medicine, closely related to Chinese practices. Their reception and adaptations well exemplify the process of glocaliza-

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5 I use the term “spiritual healers” in reference to those practitioners who appeal to the spirits (mainly spirits of ancestors and saints) in their activities and whose healing methods are generally of religious-magical nature.

6 Such practices were widely described by Argynbaev 1995; interesting data are published in a collection edited by Sharmanov and Atchabarov 1978, see also Penkala-Gawęcka 2009.

7 Apart from the earlier ethnographic sources from the nineteenth and the beginning of the twentieth century, materials on Kazakh and Kyrgyz shamanism can be found in, among others: Gonopolskiĭ and Alimkhanov 1978; Basilov 1992; Mustafina 1992; Toleubaev 1997; Garrone 2000; Privratsky 2001.

8 The well-known differentiation between great and small medical traditions (Leslie ed. 1976) seems suitable in this context.
tion (Robertson 1995). Third, we should mention medical traditions of various ethnic groups who immigrated or were deported to this region during the times of imperial Russia and then, on a much larger scale, during the Soviet period. Because of their mutual contacts, it is often difficult to differentiate the origins of particular treatments, however, there are some traits characteristic respectively to Turkic and Slavonic groups. Fourth, there are many new or relatively new methods of treatment and self-treatment that have arrived in recent decades and continue to arrive from Russia and other countries of the former USSR as well as from the West.

There are no clear boundaries between these categories, as practitioners eagerly draw on different sources. Parts of the great medical traditions, recognized officially as “traditional medicine,” have been incorporated into the state system of medical services and are taught at some medical universities in Kazakhstan as well as at the Almaty Institute for the Advancement of Physicians. In Kyrgyzstan medical doctors can get additional training in acupuncture or manual therapy at the Department of Physiotherapy and Traditional Medicine of the Kyrgyz National Medical University in Bishkek. Folk medical practices, including spiritual ones, have also been accepted and even promoted, although doctors are not as unanimous about their value as in the case of so-called traditional medicine. Nevertheless, the acts of parliament About the Health of the Nation of the Republic of Kazakhstan of 1992, 1997 and 2003 confirmed the positive official policy on folk medicine. As for Kyrgyzstan, presently the act of 2007 About Preservation of Traditional Knowledge seems to be especially important for recognition of such methods of treatment. This attitude is clearly associated with the overall rehabilitation of local traditions of the titular nations; similar processes have been observed in other post-Soviet Central Asian states, e.g. in Uzbekistan (Kehl-Bodrogi 2006; 2008; Hohmann 2010).

Since the beginnings of independent Kazakhstan, folk healing has been recognized as an important complement to the state medical system and, at the same time, the Ministry of Health has devoted considerable effort to control and regulate the activities of healers. The Republican Center of Eastern and Contemporary Medicine in Almaty (founded in

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9 See Penkala-Gawęcka 2002 for a description of glocalization of various forms of Korean medicine in contemporary Kazakhstan.
1990 as the Center of Folk Medicine) has been entrusted with the task of training and licensing healers. The official approval of unconventional methods of treatment, supported in further programs and actions, substantiates the use of the term complementary medicine for this body of methods and practices in contemporary Kazakhstan. They are not only complementary from the point of view of patients but also from the perspective of the authorities. This attitude has been partly motivated by the nation-building policy, but practical reasons have also played an important role. Certainly, the dramatic deterioration of the health care system in Central Asia after the collapse of the Soviet Union influenced the turn to inexpensive and easily available non-biomedical methods of treatment. It is worth noting, however, that—as recent investigations in Kazakhstan reveal—although the situation of health care in Kazakhstan has improved, the position of complementary medicine and Kazakh folk medicine in particular remains strong (Grzywacz 2010: 43–47).

Similarly, the Center of Traditional Medicine “Beyish” (which means ‘paradise’) was organized in Frunze (now renamed Bishkek) already in 1990, before the proclamation of the independent Kyrgyz Republic. It was very popular among the people and its services ranged from acupuncture and herbal treatment practiced by Chinese doctors and their local followers, through Korean acupuncture, Ayurveda and various manual therapies, to folk healing, controlled and regulated by a special commission. Whereas methods used by medical professionals have received full legitimization, the present position of folk healers seems rather unstable, since the process of their professionalization has been interrupted. Although healers work and compete freely in the market, reorganization of the former “Beyish” into an Academy of Experimental and Traditional Medicine in 2011, which resulted in folk healers leaving this place, suggests that the official stand of the authorities towards folk medicine has been gradually changing.

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10 Ursula Sharma, who used the concept of complementary medicine in the context of British society, limited this field to “those forms of therapy which most nearly approximate to a form of medicine as that term is generally understood in western societies.” However, she noticed that there is no impermeable boundary between them and “other health-promoting activities.” (Sharma 1992: 4–5)

11 During the opening ceremony the Deputy Minister of Health at the time announced that a new academy should redirect the activities of the former center where “quacks, extrasensy and often common charlatans” had worked before.
An Outline of Spiritual Healing in Kazakhstan and Kyrgyzstan

In this part of the paper I briefly focus on spiritual healing practiced in Kazakhstan, mainly by Kazakhs and Uyghurs, and in Kyrgyzstan by Kyrgyz healers. Such methods, with the addition of divination with the help of spirits, enjoy great popularity among the public. As stated above, the source of the official recognition of this kind of healing lay in the politics of the authorities of the new state, promoting traditions considered the national treasure, the core of the Kazakh and Kyrgyz identities. Together with other methods of treatment perceived as belonging to the national heritage, spiritual healing was practiced openly and even encouraged. The interest and confidence in spiritual methods of dealing with illnesses and other aspects of misfortune grew during the 1990s. Significantly, at the Republican Center of Eastern and Contemporary Medicine in Almaty it was just Kazakh folk medicine, and spiritual healing in particular, that was in the repertoire of the majority of practitioners.

Spiritual healing can be clearly distinguished from other traditional kinds of treatment. Methods as herbal therapies or bone-setting are regarded as practical skills which can be acquired by learning, whereas spiritual methods are attainable only by people with special abilities. There are two main categories of such healers. First, there are shamans (called in Kazakh baqsı,12 Uyghur baksbi, Kyrgyz bakshi or bübü13) whose power is considered extraordinary and rare. Second, there are “weaker” healers (Kazakh täwip, Kyrgyz tabip) who usually combine spiritual healing with fortune-telling. They use a traditional method of divination with beans or small stones (previously sheep droppings) called qumalaq in Kazakh and Kyrgyz, qumilaq in Uyghur, and therefore people often refer to them, respectively, as qumalaqshı, qumilaqchı, qumilaqchi (fig. I).

What all spiritual healers have in common is their presumed ability to contact spirits and use their help in treatment. They invoke spirits of the ancestors and Muslim saints; they also recite incantations to God and prayers from the Qur’an as part of their treatment, which clearly illustrates the process of Islamization of this sort of healing. While the qualities necessary to become an “ordinary” spiritual healer are not uncommon,

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12 I use the transliteration of Kazakh words as proposed by Privratsky 2001.
13 This term is sometimes used to refer to a female shaman.
the shamanic gift (which is called, together with shamanic practices, baqsılıq, bakshılıq) is supposed to be extremely rare and valuable. Shamans are thought to have special connections to the spirit world. As one of my informants put it, “they act as a bridge between earth and heaven.” They can obtain the help of many powerful spirits. It was traditionally believed that the strength of a shaman depended on the amount of spirits he/she was able to collect. Shamans may also have the gift of clairvoyance, but usually do not practice divination like qumalaqsı. Moreover, the uniqueness of their healing séances makes them exceptional.

Bruce Privratsky (2001: 216 ff.) maintains that baqsılıq is not a living tradition anymore among the Kazakh. He made only brief references to “living Kazak shamans” and in most cases expressed doubt over their shamanic identities. He also stresses that the healers (tawił) whom he met “... think in Islamic terms and display therapies that are similar to curing styles in other Muslim societies” (Privratsky 2004: 573). Contrary to his experiences, I encountered a few healers who called themselves baqsı and were recognized as shamans. Paweł Jessa (2006) and Zuzanna Grzywacz (2010) mention others whom they met during their fieldwork in Kazakhstan. In my opinion, Privratsky’s skepticism springs from his tendency to search for
“the authentic baqsı” (and he tends to identify him as a figure similar to Siberian shamans). A visible Islamization of shamanic practices induces him to regard them as “. . . faint images of archaic practice vaguely understood by Kazak healers themselves” (Privratsky 2001: 227). It should be remembered, however, that the process of Islamization of shamanic practices was well advanced already in the nineteenth century, and Privratsky (2004: 571) himself quotes shamans who lived and practiced in the second half of the twentieth century. In my opinion, we should adopt an emic perspective and not disqualify people’s opinions about who is and who is not a shaman.

Shamans were and still are highly esteemed, which contrasts with the popular attitude to other spiritual healers. The latter are usually treated with respect mixed with disapproval because people are aware that divination is forbidden by orthodox Islam as connected with black magic. Nevertheless, this ambivalent attitude to spiritual healers does not seem to decrease the popularity of such practitioners. People ask them for help, especially if they have health problems that they attribute to “evil eye” (Kazakh, Kyrgyz köz tiyü, Russian sglaz) or spells and also in other kinds of misfortune. They search for a renowned shaman only in the case of serious and persistent troubles, especially if they are believed to be a result of the interference by evil spirits (like jìn or albastı in Kazakh, albarsti in Kyrgyz) or particularly harmful black magic, the so-called porcha (in Russian) which is widely feared. In common opinion today’s shamans are much weaker than those of earlier days and people maintain that many charlatans usurp the name of shaman. However, if someone who claims to be a shaman does not have particular charisma in the eyes of the community, she/he has no chance to establish a successful practice.

Although the role of shamans as mediators between the human world and the world of spirits is exceptional, beliefs about the process of becoming a shaman and a “weaker” spiritual healer reveal the same pattern. The recruitment of contemporary spiritual healers well exemplifies how the traditional ways come to life again.

14 For a description of the relationships between “ordinary” spiritual healers and shamans among Uyghurs in Almaty see Bellér-Hann 2001.

15 People always refer to this harmful magic and its deadly consequences using this Russian term.
On becoming a Shaman/Healer: Specificity of Spiritual Calling

I will examine a career of the spiritual healer in contemporary Kazakhstan and Kyrgyzstan, with some comparisons to the traditional shaman as described in the ethnographic sources from the nineteenth and early twentieth centuries. This discussion is based mainly on the narratives of a number of spiritual healers to whom I talked, mostly women of Kazakh, Kyrgyz, Uyghur, Tatar and Uzbek ethnic backgrounds. There were two bakhshe among them, an Uyghur woman in her late forties, Rakhilyam, and her daughter Mahira. They lived together in a village near Almaty.

The process of becoming a spiritual healer can be presented as a kind of initiation, a rite of passage, in accordance with Arnold van Gennep’s well-known scheme. It begins with an episode of “shamanic illness” which usually induces separation of the afflicted individual from the community. Such a sudden and acute illness may be provoked by a traumatic event. It is sometimes connected with serious physical afflictions, like the loss of sight or paralysis, as in the case of Rakhilyam. The signs often include strange dreams and visions, unusual behavior, and inexpressible suffering, together with a tendency to isolate oneself from other people. Sometimes the symptoms are not so violent, nevertheless they hardly ever fit into the frames of the biomedical disease classification. All in all, such ailments can be characterized as an “initiation illness,” in Mircea Eliade’s (1951) understanding.

Traditionally, shamanic illness was easily recognizable. The shaman’s abilities could be transmitted both patrilineally and matrilineally to someone who belonged to the next generation or to the generation of grandsons and granddaughters. Some researchers claim that the latter was more typical of Kazakhs. However, the tradition demanded that the

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16 Shamanic beliefs and practices of the Uyghur show similarity to those of the Kazakh and Kyrgyz, although, as Basilov (1992: 188 ff.) noticed, they reveal some peculiarities. In the opinion of Beller-Hann (2004b: 643), the use of the term “shamanism” to refer to the Uyghur “set of healing methods” is questionable. I agree that the same is true about the Kazakh or Kyrgyz spiritual healing, but it does not mean that we cannot observe the presence of shamans among spiritual healers.

17 Toleubaev (1997: 196), for example, maintains that the shamanic gift was more often transmitted to the generation of grandchildren.
successor should be chosen by spirits. According to Vladimir N. Basilov, a specialist in Central Asian shamanism, it was commonly believed that after a shaman’s death the ancestor spirits (Kazakh arūaq, Kyrgyz arbaq) should designate his/her successor. If someone from the shaman’s descendants fell seriously ill, it was taken as a sign given by the spirits (Basilov 1992: 128–129). People thought that during that particular illness a candidate was taken by the spirits to some isolated location, taught and put to severe tests. As we know from ethnographic sources, the future shaman had to endure painful experiences and it was believed that his body was cut up in pieces and then repaired and resurrected. Thanks to the continuity of tradition the signs of shamanic illness were clear and meaningful to both the future shaman and all members of the community. We may say that within that traditional frame just getting ill (with specific symptoms) marked entering the liminal phase of the rite of passage because it was synonymous with the recognition of this state as shamanic calling.

At present such signs are usually classified as symptoms of a mental illness and when doctors cannot find any organic disease, they send such a person to a psychiatric clinic. Otherwise an afflicted person stays at home, isolated because of strange behavior, and does not understand the nature and cause of those afflictions until she/he visits an experienced shaman or other spiritual healer. Such a specialist explains to the patient that she or he is a person chosen by spirits and those strange dreams and visions are revelations (ayan) of her/his ancestor spirits\footnote{For more about ayan as omens or signs sent by the ancestors in dreams, see Louw 2010 and Aldakeeva 2009.} who want to pass the healing gift to their descendant.\footnote{I describe in another paper how the traditional discourse on “shamanic illness” as the call of spirits—and not mental illness—has been revived in Kazakhstan (Penkala-Gawęcka 2013).} Then it is made clear that such a person—after a process of spiritual purification—should herself/himself become a healer, since the only way to recover is to comply with the spirits’ will. If someone ignores their orders, not only will this disobedient person be severely punished, but her/his close relatives may suffer and even die as well. This motif was constantly repeated in the stories of the spiritual healers to whom I talked. They described their intense sufferings, visions and recurring dreams in which they saw old men clothed in white. Doctors could not help them; illumination, relief
and then eventual recovery came only when they visited a healer, often on the advice of some close relative or friend.

Rakhilyam, for instance, had such illness episodes twice. The first time, after a short stay in a psychiatric clinic, she was treated with some success by an old Uyghur shaman. As she maintained, he had not revealed the truth about her abilities, because then, at the end of the 1980s, he was still afraid to talk about it. Rakhilyam worked as an accountant in a *kolkhoz* (a form of collective farm in the Soviet Union) and he felt that it would be improper to tell her such things. But when she visited the same shaman some years later, complaining of various strange symptoms again, he explained to her the meaning of her visions and sufferings. As a wise man, a bearer of tradition, that old shaman revealed to Rakhilyam that she had the shamanic gift, “shaman’s blood,” and the spirits wanted her to accept this gift and then act to help people in need. I heard similar stories from many spiritual healers (Kazakhs, Uyghurs, Uzbeks) working at the Center of Eastern and Contemporary Medicine in Almaty as well as from Kyrgyz healers in Bishkek. They differed in sex, age, and education. A number of them had higher education in such disciplines as history, medicine, economy, law or arts. Their special abilities were revealed either by a healer in the course of treatment or by a mullah (*molda*, *moldo*)\(^{20}\) or another deeply religious person. For instance, a young Kazakh woman, Bayan, was illuminated about her abilities by an old, pious woman whom she had met near the shrine of the famous Muslim saint Ahmad Yasawi in Turkistan.

Traditionally, shamanic illness occurred mostly during adolescence, especially in the case of “strong” shamans.\(^{21}\) Today it often strikes a person of middle age who lived many years having no idea of her/his potential. It is quite understandable considering that the shamanic traditions had been obscured. However, sometimes, as in the case of Mahira, the traditional pattern of an early revelation was observed. She had been offered a shamanic gift when she was only seventeen, but since she did not feel ready, she “passed that gift” to Rakhilyam, her mother and the transmission was postponed until her twenties. The motif of postponement is well known from the literature on shaman-

\(^{20}\) Mullahs also perform healing, mainly through reading Quranic verses.

\(^{21}\) According to Toleubaev (1997: 197), such exceptional candidates could be designated by spirits even in early childhood.
ism in Central Asia. Another healer, Ainagul from Bishkek, told me about her early experiences as a child, when she used to leave her home unknowingly at night and wander around without purpose, which made her relatives worry. It was much later that her vocation was recognized by an experienced healer.

When Rakhilyam established herself as a shaman, she began to follow the same pattern, this time as a wise, competent healer, able to distinguish a person with extraordinary qualities. Let me present some points of one of her healing sessions that I observed in the autumn of 1997, which resulted in the appointment of a patient as a prospective healer. Elmira, the patient, was a nineteen-year-old Uyghur girl, studying English and working for a foreign company in Almaty.

At the beginning of the séance, Rakhilyam summoned her helping spirits, entered a trance-like state and began to chant, whistle and laugh. She was also twisting, stamping, flapping her arms like a bird, and then she advanced her hands toward Elmira’s body as if to remove something. She repeated those gestures several times and after about twenty minutes finished the séance by expressing gratitude to her spirits and to God.

However, it was the shaman’s subsequent talk with Elmira that was particularly important, as it revealed the nature of the patient’s illness. Elmira came with complaints of a stomachache that she described as “a stone in her stomach” and referred to drinking too much soda water. Rakhilyam explained that the actual cause of the ailment was sglaz (evil eye) which had afflicted Elmira already in her childhood and had further consequences to her health. The bakhshi added that the girl was a “spiritual” person (which means that having close connections with spirits) and therefore she was particularly vulnerable. During her life “she had been collecting dirt” from other people and did not know how to clean herself, and this was the main cause of her troubles. The main point of the séance was to purify Elmira from the pollution, which was performed by the spirits through Rakhilyam’s actions. Next, the shaman explained that Elmira, as a person with special abilities, was offered two gifts. First, the spirits predicted that she would be able to heal people with prayers, second—she was promised to obtain, in heal-

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22 It is often explained by experienced healers that previously they had suffered because they did not know how to heal themselves and only then, in their further career, they learned that skill from their helping spirits. See also Privratsky 2001: 203.
ing, the help of the spirits who would come to her exclusively in the shape of birds. The shaman maintained that all those revelations were transmitted to her by the spirits during the séance, which had started with the diagnosis of Elmira’s illness. Rakhilyam tried to convince her patient to accept the gifts of the spirits, telling her that otherwise she would not recover and her illness would even get worse. Elmira had to attend a number of successive sessions, which she did. However, I do not know if she eventually accepted the offer. I have only heard that she was afraid and tried to avoid taking up the challenge.

I observed many other of Rakhilyam’s séances and two of them also revealed candidates for healers with special abilities: a young Uyghur man Parkhat, a journalist, and a Tatar woman, specialist in technology (fig. 2). They were more eager than Elmira to accept that they had been “chosen by spirits,” as Rakhilyam put it. When she mentioned that Parkhat must have had strong spiritual healers as his ancestors, he confirmed that immediately. Pointing to the ancestors—shamans or other spiritual healers, and also mullahs—is an important part of the procedure of revealing prospective healers. Usually they seem not to remember them and it is the shaman or other spiritual “master” who
makes them recall such predecessors. Such recognition of being lineal kin of a “spiritual person” is an important part of traditional legitimization of future practitioners. However, it is spirits of the ancestors who are believed to choose and appoint someone from their living descendants. It is worth stressing that, although the Kazakh and Kyrgyz trace descent patrilineally, they think that this spiritual gift can be transmitted in both filiation lines, which remains in accordance with the traditional notions.

To conclude this part of the discussion, I would argue that in post-Soviet Kazakhstan and Kyrgyzstan experienced healers play a crucial role in revealing and legitimizing spiritual healers, including shamans. They give meaning to the symptoms of an indefinite illness and it is their diagnosis, presented as the appointment by spirits, that marks separation as beginning a liminal phase of this rite of passage. They are also obligated to make a person chosen by spirits accept this calling.

Further Development of a Shaman/Healer: Strength of Tradition and Present Modifications

Once a candidate accepts the appointment, she/he should fulfill some further requirements. First, such a person has to pass through a series of healing séances usually performed by the same healer who had revealed her/his vocation. This is seen as a necessary process of purification. Moreover, the candidate’s status changes entirely. Usually future healers must abandon their former professions and it is not rare that entering the new path leads to dissolution of their marriages and other family ties. This was the case of Rakhilyam and her daughter who had to divorce their husbands. However, both women found new candidates for marriage, men who showed them much more understanding and support than their former husbands. My other informant, a fifty-year-old Kazakh woman named Katia, told me about the costs of her decision to pursue her recently discovered vocation for healing. She had to quit her job at the Institute of History and to leave her husband, who was against her plans. Strikingly, the traditional belief that a person chosen by spirits is obliged to sacrifice everything and begin a new life is still maintained, and this is also explained to a neophyte by an experienced healer in the process of preparation to the new role. Such was the case,
for example, of Kunduz, a healer from Bishkek, who had been satisfied with her work in a bank in Talas and did not want to accept the spirit call. She asked her master to take away that burden from her and was eager to offer her own spirits to this experienced healer. However, Kunduz eventually had to agree to take up her new appointment and after some months of purification and preparations she began to heal people.

This process may be called an apprenticeship, as a prospective healer must accompany, watch and, gradually, begin to help the master during healing sessions (fig. 3). Other obligations comprise giving sums of money or/and other gifts and accompanying the master healer in a series of pilgrimages to the shrines of saints and other sacred places (*mazar*) that serve as a means to get assistance of powerful helping spirits.\(^{23}\) As Rakhilyam said, a candidate should “follow her,” and comply with her instructions. The apprenticeship of a healer–diviner to the shaman and their common pilgrimages were described by Bellér-Hann (2001; 2006; Adylov 2006). Researchers often stress that healing at the *mazars* is considered more effective due to the close assistance of spirits, see Duyshembiyeva 2005; Aitpaeva 2006; Adylov 2007.

\(^{23}\) Researchers often stress that healing at the *mazars* is considered more effective due to the close assistance of spirits, see Duyshembiyeva 2005; Aitpaeva 2006; Adylov 2007.
I would like to add that according to the ethnographic sources, there was previously no such apprenticeship in the case of the shaman, contrary to, for instance, dārīger (herbalist). I would argue that, in the past, as collective séances were customary, all members of the community were well acquainted with the details of healing. The long period of Soviet rule brought about a considerable disruption to tradition; shamans and other spiritual healers went underground. Now they can practice openly, but séances are usually performed without an audience, except for close relatives of the patient. Ordinary people do not have knowledge about the conditions and demands of healing, thus the role of the master–teacher who introduces the newcomer into the profession has significantly increased. Although such apprenticeship seems obvious to the researcher, from the point of view of healers it is the spirits who actually teach and guide candidates, and the role of the master is limited to giving them some necessary assistance. This was also noticed by Bellér-Hann (2001: 88–89) who reported that two Uyghur healers in Almaty, staying in an apparent relationship of master and apprentice, denied any formal apprenticeship.

The process of preparation may continue for quite a long time and during that period a future healer remains in the transitional, liminal stage. As the healers themselves put it, a candidate should “open” herself/himself, and it seems to mean not a simple act but a process leading to the complete acceptance of the gift and submission to the spirits’ wishes. The end of this stage and the change of the status are clearly marked by a special rite, the blessing ceremony (Kazakh, Kyrgyz bata). As a rule, a future healer receives bata of her/his master. Then the healer can start independent work, however, it is desirable that she/he maintains contact with the master. Rakhilyam expressed her regret at the improper behavior of some of her apprentices who had not followed her advice and fallen under control of the adepts of black magic. Similarly Kunduz, the Kyrgyz healer, said that she decided not to take apprentices because they were often ungrateful and did not follow religious obligations. “Their sins are your shır,” her spirits warned her, and she obeyed

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24 This was confirmed by Basilov (1992: 119–121) who maintained that in Central Asian shamanism apprenticeship had been recorded only occasionally and, in general, a candidate was only obliged to get a blessing from an experienced shaman. Nevertheless, Bellér–Hann (2004b: 645) writes that healers could learn their profession as apprentices.

25 The word shır means here: ‘deadly, unforgivable sin’ (from Arabic sbirk)
their will.” Although it is important to receive the first, ceremonial blessing of a prestigious healer, *bata* from other persons might be added as well as blessings from spirits. It is noticeable that some ambitious healers, like Rakhilyam herself, understand their way as the process of continuous development and seek successive blessings of other strong, famous healers. As she explained, spirits of ancestors and saints might also bless the healer and their help could be obtained during pilgrimages to the shrines. The assistance of many mighty spirits is thought to be particularly valuable as a means to continue and develop healing.

In my opinion, the process of emergence of spiritual healers in Central Asia, although modified, has preserved its basic traditional scheme. Some motives have disappeared, for instance the belief in death and resurrection of the future shaman. However, we may say that during the liminal stage the candidate experiences the death of her/his previous life and enters a new life as an entirely new person. The crucial elements of this rite of passage have survived, namely the shamanic/healer’s illness and the blessing ceremony that mark transition to the next stage. This traditional method of recruitment of spiritual healers is decisive in establishing their credentials. Someone who independently proclaims herself/himself a healer is usually regarded with suspicion as a usurper. Also the new, bureaucratic way of legitimization at the Center of Eastern and Contemporary Medicine in Almaty is not valued. Healers tended to treat a certificate from the Center as a formal requirement if they wanted to practice legally, but it was the blessing ceremony that gave them social recognition. What is more, I also heard opinions that the official legitimization procedure might be an obstacle in the way of a shaman or another healer. For instance, Rakhilyam deeply regretted her earlier decision to strive for a certificate as a “theopsychotherapist,” which was an official name for the profession of spiritual healers, including shamans, at the Center. She claimed that the spirits had been strongly against that idea and her disobedience obstructed her further development as a shaman. In today’s Kyrgyzstan, two women healers to whom I talked told me that they had tried to comply with the official

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26 See also Kehl-Bodrogi 2008: 209–219. The author stresses the importance of such “initiatory illness” and a blessing among contemporary healers in Khorezm.

27 Bellér-Hann (2001: 91–93) gives an illustrative example of such unsuccessful attempt to get recognition as a healer made by a fifty-year-old Uyghur woman who did not respect the renowned healers and tried to discredit them.
demands, but were bitterly disappointed. They showed me certificates that confirmed that they completed a special course for nurses, and diplomas obtained in Almaty from the Association of Spiritual and Folk Healing of the World—as “specialists in spiritual healing.” The women complained that just after getting those documents they were expelled from the Center “Beyish.”

In my opinion, the way of recruitment of new healers is particularly illustrative of the strength of tradition in spiritual healing in Kazakhstan and Kyrgyzstan. The persistence of tradition is demonstrated in the etiological concepts and in the beliefs about the role of spirits, as well as in healing practices such as shamanic séances. Although the most characteristic attribute of the Kazakh shaman, a special musical instrument called \textit{qobiz}, is not used anymore, some other traditional utensils like the whip (Kazakh \textit{qamshi}, Kyrgyz \textit{qamchi}) and the knife (Kazakh \textit{pıshaq}, Kyrgyz \textit{bıchaq}) still belong to the equipment of the Kazakh as well as the Kyrgyz healer. Among other objects, the Qur’an and Islamic prayer beads (Kazakh \textit{täspi}, Kyrgyz \textit{tespe}) serve to emphasize the Muslim identity of healers and their methods (pls. 4, 5 a). In her outline of Kyrgyz healing Jipar Duyshembiyeva rightly points out: “Most of the healers today associate their healing power with Islam.” (Duyshembiyeva 2005: 38)

As I stated above, collective shamanic séances were abandoned, because of Soviet suppression and individual sessions seem typical of contemporary healing. However, there is some evidence for the revival of collective healing practices. They were introduced in Kazakhstan in the mid-nineties as part of the activities of new informal religious organizations called \textit{Aq Jol} (white/pure way). Their main purpose was the revitalization of Muslim religiosity at the grass-roots level, but this process was closely connected with séances of ritual purification and healing performed in groups of people by charismatic spiritual leaders-healers. Moreover, those leaders organized series of pilgrimages to the shrines of saints which served as a means to reinforce piety and moral values of the followers (Jessa 2006). It is interesting that at the meetings of \textit{Aq Jol} members the acts of revealing prospective healers by the experienced, prestigious leaders place this
on a larger scale (Jessa 2006: 363–366) and that could result in further increase in the number of healers.28

Obviously, through appointing new candidates for healers, experienced practitioners contribute to the revival of tradition of spiritual healing. It brings about, however, considerable tension between established healers and the candidates. On the one hand, it is crucial for the practitioner’s successful career to develop regular contacts with several chosen patients who may then become her/his apprentices. On the other hand, the emergence of new healers is likely to endanger their vital interests, especially if they work in the same neighborhood.29 A subtle interplay between these factors was insightfully presented by Bellér-Hann (2001: 87–88) who described the strategies used by a master–shaman to prevent candidates from starting independent practice. From my own research I learned that the main obstacles that the experienced healers usually stressed involved the young age of a candidate, insufficient potential, pressure of evil spirits or being “blocked.” The argument that someone cannot “open” herself/himself was used very often and the assistance of the master in the laborious process of “opening” (or “opening someone’s way,” i.e. healing way) is thought to be necessary. An effective means to limit the range of competitors is accusation of black magic. I heard numerous stories told by the healers about their rivals who had submitted to evil spirits, practiced black magic and tried to deprive others of their strength.

Hybridization of the Beliefs and Practices of Spiritual Healers

Contemporary spiritual healing in Kazakhstan and Kyrgyzstan does not repeat unchanged patterns of tradition; it may be rather called adopted or transformed tradition. The traditional frame has been preserved, but parts of tradition are forgotten and new elements have been constantly added.

28 In 2009, the Aq Jol movement was criminalized, which can be seen as evidence of a changing attitude of the Kazakh government to some local expressions of Muslim religiosity, especially if they take on more organized forms.

29 Practising complementary treatments, including spiritual healing, was quite a good option to earn a living, especially in a difficult period of transition to the market economy.
For instance, the pantheon of Rakhilyam’s helping spirits was enriched with new personalities like saints or gods of other religions, epic heroes or even heroes of popular culture. Caroline Humphrey quotes similar “innovations” that she met in her research on Buryat shamanism. As some researchers of Siberian shamanism, e.g. Marjorie M. Balzer (1999) and John Baker (1999) correctly point out, such innovations and eclecticism prove that today’s shamanism has strong adaptive abilities. The same may be said about Central Asian spiritual healing. In the case of Rakhilyam, who added to the Islamic saints and ancestor spirits several Christian saints and even Jesus Christ, that served as a means to widen the circle of her clientele. She claimed that thanks to such a wide range of helping spirits she was able to heal also Orthodox Russians or Catholic Germans and not restrict her activities only to Muslim patients. Moreover, she appealed to many other personalities, beginning with the spirit of a famous Bulgarian clairvoyant Vanga and finishing with Japanese karate fighters and an Indian male film star. She actively searched for their support, undertaking a series of pilgrimages not only to Mecca and numerous Central Asian shrines of Muslim saints, but also to the Holy Land, Bulgaria and to India, where she tried to obtain the blessing from a local guru, the “living saint” Sai Baba. In this way she strived after perfection in her performance and expected to gain worldwide fame some day. Rakhilyam was an excellent example of a shaman of the age of globalization and at the same time her beliefs and practices were deeply rooted in local tradition.

It should be mentioned that such a wide perspective on one’s healing mission is characteristic of strong, sometimes charismatic shamans/healers, while the majority seems rather modest in this respect. Mahira, who was a beginner in the profession then, declared that she had to limit her circle of helpers to Islamic spirits and she was not able to heal non-Muslims, as her mother did. Ainagul and Kunduz from Bishkek claimed that they could help also Russians and other non-Muslims (and I observed

30 According to Humphrey (1999: 7 ff.), Buryat female shamans have among their helping spirits such personalities as Archangel Michael, epic heroes and Japanese samurai.

31 I corresponded with Rakhilyam for some time after I came back to Poland—she wrote about her future plans as a shaman. In 2008 I received sad news from my M.A. student, Zuzanna Grzywacz, who tried to contact her in the village where she lived. Rakhilyam died of breast cancer and—as my student learned—before death she visited Sai Baba in hope of being healed.
séances with such patients), but the latter healer told me about her contacts with spirits of non-believers. She was sometimes offered additional gifts by spirits of Russian women who wanted to teach her chiromancy and other “alien” methods. She never accepted that, on the excuse of the difference in religious beliefs: “You are Russian . . . my faith is entirely different,” she answered when the spirit kept trying to persuade her.

The process of cultural hybridization is noticeable in the complex of methods and techniques used by spiritual healers. Their repertoire includes, besides invocations to spirits and Muslim prayers, practices characteristic of other traditional local healers, like massage or herbal treatment. However, that was also common among traditional shamans of “old times.” Contemporary healers eagerly introduce numerous techniques derived from alien traditions as well as various novelties. During my recent research in Bishkek I was surprised to meet a healer who combined traditional methods with bee sting therapy. Moreover, she put this kind of apitherapy into the traditional frames of healing, claiming that it was also a gift that ancestors passed to her in the same way as other healing abilities. Privratsky (2001: 207–209) described a female healer from Turkistan who practiced Muslim spiritual healing, Kazakh folk methods and Russian herbal treatments that she had learned from an old Russian woman, together with invocations to the name of Jesus. I observed, both in Kazakhstan and in Kyrgyzstan, that spiritual healers often used concepts and techniques of the so-called extrasensory treatment based on the belief in “bioenergy” (Russian biotok) that can be employed in healing. This kind of complementary therapy, conducted by healers called ekstrasensy, became very popular in the Soviet Union since the 1980s and is still widespread in post-Soviet Central Asia. Nevertheless, I noticed that some of my informants—Rakhilyam and her daughter in particular—did not use that method, and, on the whole, their séances looked more traditional. Presumably this may reflect a larger degree of tradition in shamanic healing, though it is difficult to generalize on the basis of this data. Besides, whereas Rakhilyam’s séances seemed to preserve more traditional traits, her “army of spirits,” as I described before, was extremely eclectic (pl. 5 b).

32 I use this term following Nederveen Pieterse (1994) who reasonably argued for viewing globalization as a process of hybridization, contrary to its understanding as westernization. The concept of cultural hybridization refers to “intercultural cross-over” blurring distinctions between categories of different cultures.
Conclusion

In my opinion, healers as “the agents of tradition” play a crucial role in the revival of shamanic practices and other forms of spiritual healing in contemporary Kazakhstan and Kyrgyzstan. This tradition was preserved by shamans and other healers who secretly continued to practice during the period of persecutions, but only its faint traces survived in common social consciousness. The majority of post-Soviet healers had not grown up within this tradition and accepted it recently as a revelation changing completely their lives. It is the experienced, wise healers who interpret the signs and designate those whom they consider “chosen by spirits.” They also play an important role in the liminal stage of the future healer’s career, which creates a kind of master–apprentice relationship, continued, in a way, even after ceremonial blessing. Such apprenticeship, as I tried to show, functions as a means to restore what was partly forgotten. Nevertheless, the revival of tradition has been possible, thanks to the persistence of some beliefs being a prerequisite of the existence of shamanic practices and other forms of spiritual healing. These are beliefs in the spirit world and especially in the spirits of ancestors who constantly interfere with the life of the living.33

While not engaging here in the discussions on the differentiation between “official” and “unofficial” Islam, I argue that healing practices or visiting sacred sites, deeply rooted in old Turkic traditions, should not be separated from other forms of Muslim religious practices. It is important that they are considered Islamic from the point of view of local people.

The persistence and adaptive abilities of the Turkic tradition of spiritual healing prove that it still meets the needs of some segments of the population in Kazakhstan and Kyrgyzstan. Certainly the poor condition of the state medical system in the post-Soviet Central Asian republics was one of the reasons for the wide use of various complementary methods of treatment. However, the factors that have brought about the popularity of particular branches of complementary medicine should be thoroughly examined and defined in each case. As for shamanic practices and other forms of spiritual healing, the force of tradition seems to be of primary importance.

References


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4 Healing session in Bishkek, combining prayers with burning candles, using a whip, a knife and prayer beads. Photo: Danuta Penkala-Gawęcka, 2012.

5b Mahira (on the left) conducts the purification séance for her mother, Rakhilyam, at their place in a village near Almaty. Photo: Danuta Penkala-Gawęcka, 2000.