

“Please Ask the Priest to Pray for Dana, the Sick One”

Health-Seeking, Religion and Decline of the Public Sector in Post-Communist Romania

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Introduction

“I’LL FEEL better for months after the trip,” the retired man told me. “I know this,” he continued “because I made a trip like this before and felt good for a long time afterward.” He was reflecting on an excursion we were on along with nearly 50 other mostly retired people to several venerated Romanian Orthodox monasteries in the districts of Neamț and Suceava, specifically Văratec, Agapia, Neamț, Secu, Sihăstria, Humor, Voroneț, Moldovița, Sucevița and Putna. The trip, which was sponsored by a local organization that provided services to the elderly in the city of Galați, took place in July 2004. I had been invited to participate in the three-day tour because I was carrying out an anthropological research project that had commenced at the organization earlier that year. My focus was on how older women and men were managing health and illness in a changing society.

The experience proved instructive for many reasons. It afforded me the opportunity to directly witness the value Romanian Orthodox religious practices held to at least some pensioners. This was evident in people’s behavior at the monasteries. At each of them most of the retirees went before icons in order to say prayers and to kiss the images. Many wrote lists of names of people (*pomelnice*) whom they wanted priests to acknowledge. Some purchased long, thin candles, which they lighted and placed in separate containers marked for the living (*vii*) and the dead (*morți*) as a means of recognizing people important to them. And filling vessels with holy water (*agheasmă*) from the monasteries was indispensable to many.

In addition to detecting the significance of spiritual belief to the retirees by observing these customary practices, I developed a deeper understanding of their faith-based experiences through the casual everyday interactions I had with them. When people discovered that I had brought a camera with me, many asked that I take photographs of them at the monasteries, and for weeks after the pilgrimage I distributed copies of them, which people said they cherished. Some also commented on the impact of the

excursion on their health and well-being. Not only was the one man certain that exposure to the monasteries would do him good, but an elderly woman remarked that her usual pangs of hunger had disappeared because of the visits we were making. To be sure, such reactions among some people were not necessarily solely—or perhaps in some cases at all—a result of the spiritual nature of the trip; the camaraderie and physical activity made possible by the experience meant a lot to people too. Still, the value of the sacred was not far from at least some participants' minds.

The journey altogether seemed to be a strategy that older women and men used to attenuate the strain they felt from the dramatic transformation of their society in the post-communist era. True, a few complained about the rapid pace at which the tour ensued, but in general it was both a welcome break for many from relentless privation and a way to respond to intolerable changes that had occurred in Romania after 1989, including the crippling of the public healthcare system, upon which many continued to be reliant. The sacred was an aegis that helped them to deflect some of the forces assailing society in the long post-communist years.

The purpose of this paper is to explore the part that religious practices play as health-seeking behaviors among pensioners and their kin in Romania after communism. My central point is that the spiritual realm is a context in which at least some retired women and men and their family members gain a degree of relief from physical and mental ailments they suffer. Although this was certainly possible under communism too, the sacred has undergone a reawakening after the revolution. Troubling, however, is that while religion has flourished in these years, the public sector, including healthcare institutions, has languished, making it increasingly difficult for marginalized people, such as those I came to know, to fully manage their health needs within that environment. The sacred, in other words, is not enough, a reality captured in inauspicious health statistics in Romania. These include that life expectancy for men and women was approximately 73 years in 2006, a rate similar to some other Eastern European countries but considerably lower than in Western Europe, and the frequency of infant mortality was an estimated two to three times higher in Romania than was the average for the 27 countries that were members of the EU in 2009.¹ I argue in conclusion that a healthier society would be possible were more revenue targeted at healthcare services for everyone, especially the most vulnerable, as had been policy during part of the socialist period.²

Post-communist disruptions

THE POST-COMMUNIST transformation of Romania has been characterized by a multitude of pervasive social, economic and political disruptions, my understanding of which has formed to a considerable extent from the countless interactions in different settings I have had with working-class retirees and their kin in Galați. I embarked on a research project examining healthcare management among pensioners because I had already discovered from living in the country for approximately three years in the 1990s that retirees were among the most disadvantaged social groups in the

country. I based the research in Galați because few ethnographic studies had been completed in Moldavia, I had made contact with the organization mentioned earlier that offered support services to older women and men and Moldavia was being particularly hard hit by the shift from communism to capitalism.

The reversals about which people have objected over the years have been profound, following a pattern of change documented globally.³ The evaporation of gainful employment in a city that had expanded at an impressive clip in the 1960s and 1970s through industrial development⁴ was one of the greatest dilemmas facing families—Galați’s allure as a place where one could find relatively well-paid work with solid benefits was fading fast. A major cause of this was the abrupt need after 1989 for Romania to compete in the global capitalist economy. This led to the privatization and restructuring, or complete liquidation, of many factories, including the mammoth steel manufacturing plant, now named *Arcelor-Mittal Galați*. As a result, thousands were laid off or offered paltry severance packages, compelling people to move to other parts of Romania or to other countries for secure employment. It did not help that policy under Nicolae Ceaușescu in the 1980s favoring austerity and severely curbed investment in the economy had set the stage for the post-communist contraction, which was propelled further under his regime by the profligate lavishing of public resources on urban renewal projects, arguably the most contemptible being the gargantuan “Palace of the Parliament” (*Palatul Parlamentului*) in the capital.⁵

I have seen the ramifications of this up to my most recent research trip to Galați in 2015. Many of the young and middle-aged people who have remained in the city earn incomes that are at best adequate for meeting basic needs. When unforeseen expenditures come their way—e.g., charges for medical treatment—the impact can be very adverse. Even without such crises, some of them lean heavily on parents on a regular basis for shelter, staples and other basics. This was the case in 2015 for a man in his 30s I came to know. His mother, a retired laborer in her 60s, worked on the informal market in order to supplement a pension from thirty years working in industry, while his father was too disabled to contribute more than his similarly minuscule retirement income to the household. She supported her son with housing and meals since his work in the commercial sector failed to fully sustain him. Meanwhile, those who have departed Galați for work have often left behind kin—including elderly and ailing parents—who largely have to care for themselves unless their children can send remittances that they can use to hire someone’s services. This is by no means always possible since many labor migrants do not earn enough to cover even their own expenses.

For retirees, protracted desolation in the post-communist era has stemmed in good measure from the withering of retirement income just as prices for staples, utilities, building maintenance, healthcare services, pharmaceutical medications, transportation and more soared, in certain periods at inflationary rates. Over the approximately 20 months I have spent in Galați from 2004 to 2015, older women and men have repeatedly recounted the hardship this has introduced into their lives, causing them chronic stress, a matter about which I have written elsewhere.⁶ This is especially so for women, who in many cases did not earn their own pension, instead raising children, providing for husbands and maintaining households. As a result, poverty among retirees in Romania is

gendered, women who did not work outside the home suffering the greatest material deprivation among pensioners, particularly if their husbands die before they do, which leaves them to rely upon a survivor's pension (*pensia de urmaș*).

The social contract formulated during the communist period has been breached in other ways too: unemployment insurance is very limited; benefits for disability are patchy; and, although women are able to take lengthy periods of time off work relative to those available in some Western societies following the birth of a child, paid family leave is often inadequate for even a basic standard of living. The cutbacks to entitlements, as with the lasting joblessness, are in part a result of the inability I have already mentioned of Romania to successfully compete globally against far more powerful economies. But other issues have vexed the country since 1989, including an explosion of unregulated black market (*la negru*) work that does not contribute to the social insurance system, and then there is corruption, which has drained funds from public coffers.

The unemployment and cutbacks in entitlements have had myriad implications beyond the fragmentation of kin and community and the encroachment of stress into pensioners' everyday lives. I have learned about many elderly people simply doing without necessities due to the harshness and uncertainty of this historical period (which in itself can of course also be a stressor). When it comes to healthcare, this has meant for some postponing, or entirely relinquishing, visits to medical professionals because the expense, given in the form of gratuities in cash and/or in kind, may be far beyond their means. I have also been privy to retirees deciding not to fill prescriptions because they could not afford them even when they were partially subsidized. Many older working-class women and men likewise curtail usage of electricity and winter heat; surreptitiously accumulate water by waiting for it to drip into containers without being recorded on meters; and buckle under unwieldy sums of debt for services they cannot do without. The repercussions here, too, are many. For example, beginning in April 2015, heat to the municipal water supply in Galați was shut off, a predicament that persisted into the summer. It was reported that Romgaz, the company which supplied natural gas to heat the water, had sent a letter to the local generators of heat indicating that it would halt delivery of its product due to exorbitant arrears.⁷

The accessibility of free and affordable educational services has also dwindled in the post-communist years. Primary and secondary education officially remain available to all at no charge, a policy that was implemented during the communist period. But cost-free post-secondary education, which was expanded enormously under communism, has become more scarce, private institutions that require one to pay tuition and fees being founded after 1989 and public colleges and universities beginning over time to charge some students. This is a barrier for people with circumscribed means given that they often do not have the funds to pay for degrees, which can thwart social class mobility. A young man I know who left Galați for the capital because of the absence of opportunity there has found it close to impossible to complete a program in psychology due to the expense; instead, he works in the low-paying service sector.

Another consequential disruption has been in housing. The man mentioned earlier who lived with his parents in part because he could not afford rent or a mortgage was hardly an atypical case. Other young and middle-aged people I know did the same, being

grateful that their parents at least had a roof over their heads and that they could share it with them. This was so because under communism housing in Galați was constructed and made available to families from villages at reasonable rates, if it were not directly given to them at no charge by the industries in which they were employed. The post-communist period has seen a fundamental shift in this regard. Although housing has become more plentiful because so many residents have emigrated—resulting in a decline by nearly a third in the city’s population⁸—the expense of a mortgage or rent is too prohibitive for many, and housing underwritten by the state is not widespread.

As if all of this were not enough, urban infrastructure in Galați has deteriorated due to the economic downturn and disappearance of such a large segment of the tax base. This is visible merely by walking or driving in the city—many sidewalks are in disrepair and streets are ridden with potholes. But less obvious infrastructural problems as well demonstrate the neglect of this era. Challenges that utility companies face providing winter heat and hot water to the population are not solely the result of people not being able to pay their bills. Lax upkeep of infrastructure has as well been deleterious. The same is true of public hospitals and clinics, which are not allocated the resources needed to offer much more than rudimentary services to the population. The latter is a key reason that people are expected to purchase medical supplies essential to their own or their family members’ treatment at hospitals and clinics. It also partly explains many people’s aversion to the conditions in public health facilities.

Revitalization of religious institutions

IN CONTRAST to the dissolution of the public sector since 1989, religious institutions have undergone a resurgence in this period. This follows decades under communism of tight state control, a state of affairs that, however, was by no means entirely oppressive, the Romanian Orthodox Church, for example, being both a “victim” and “beneficiary” of policies under the Romanian Communist Party according to some scholars.⁹ From the late 1940s to the early 1960s, many priests were imprisoned and killed because of their resistance to communist authorities and monasteries were shuttered.¹⁰ Yet beginning in the early 1960s, the Romanian Orthodox Church in particular gained a relatively favorable position within the state apparatus because of the use the communist vanguard determined they could make of the institution in shoring up national sentiment so as to further drive a wedge between Romania and the U.S.S.R.¹¹

Tokens of the post-communist renaissance exist in many forms. Andreescu,¹² for example, has documented the swiftness with which the number of Romanian Orthodox Churches has proliferated since 1989. He estimates that between 1990 and 2004 approximately 2,200 Romanian Orthodox Churches were constructed in Romania. I have seen this process unfolding to an extent in Galați, where several new Romanian Orthodox Churches have been built or have been under construction in the post-communist era. In addition, Andreescu¹³ points out that the Orthodox Church has established a presence in the public domain, including correctional facilities, the army, hospitals and schools. This flows partly from the fact that Romanian Orthodoxy is the religion to which

nearly 86% of people in Romania are affiliated according to the most recent national census,¹⁴ a percentage that is even higher in the south and east of the country. In the district of Galați the figure was close to 97%.¹⁵ To no surprise, just about everyone I came to know in the city was Romanian Orthodox and, with but one exception of which I am aware, maintained their association over the years I have known them. Such identification may not, however, indicate fidelity with the church's doctrine or result in participation in rituals associated with it; many declare themselves as Romanian Orthodox because of their baptism into the religion rather than because they attend mass regularly and strictly follow Orthodox precepts.

Stan and Turcescu¹⁶ have similarly tracked the rising political influence of the Romanian Orthodox Church since 1989. They scrutinize the part the church has increasingly played in electoral politics, in changes to school curricula and in the formulation of laws governing contraception, abortion and same-sex behavior, pointing out that, although the church's sway in these areas has heightened since the revolution, it has not been uniform or gone unchallenged. For example, the Orthodox synod officially declared in 2004, for the fifth time since the end of communist rule, that all Orthodox clergy must be politically neutral. Simultaneously, politicians have more and more adopted religious symbolism in their campaigning—in April 2004, a postcard was put in my mailbox depicting an unidentified image of Jesus Christ, with Easter greetings from Adrian Năstase, the prime minister who was running for the presidency—and the Romanian Orthodox Church has mustered more political clout than other religious denominations. Stan and Turcescu conclude that while the gradual consolidation of democracy in Romania since 1989 has opened space for people to engage more freely in the sacred than had been possible under communism, there is concern that the rich religious heritage of the country may become compromised by skewed influence of Romanian Orthodoxy.

Participating intimately in the lives of working-class pensioners and their families has allowed me to observe many religious rituals, offering me insights into the significance of traditional practices to many people. For example, I have recurrently been invited to attend masses. They have almost always been held at Romanian Orthodox Churches. Usually they have been typical Sunday proceedings, but I have also been invited to observances on special occasions and on principal holidays in the Romanian Orthodox calendar, such as Easter (*Paști*), the Assumption of the Virgin Mary (*Adormirea Maicii Domnului*) on August 15 and the presentation of a sacred icon known as the Miracle Worker (*Făcătoare de Minuni*) on its annual pilgrimage. Later, I describe a few of these experiences as a means of illustrating that some people interpret participation in mass as good for the body and the mind.

Mortuary ceremonies (*pomeni*) are another element of people's spiritual lives in which I have likewise periodically been asked to join. Performed in people's homes, at Romanian Orthodox Churches, in cemeteries and in other locations, these elaborate rituals pay homage to someone who has passed away. They include priests and deacons (*dascăli*), who read prayers and sing chants on behalf of the deceased, and food and drink are distributed by family of the deceased to people who partake in the ceremony, the purpose of which is to provide for the one who is no longer living. As with the masses, these rituals are not new to Romania. Still, the distinction associated with them and the person-

al finances spent to pay for the services of clergy and to buy food and beverages remind us again of the value of the sacred to people. Even a strapped retiree will hold a *pomană* for a loved one despite the cost involved. To many people, caring for the deceased is as vital as caring for the living.

Also emblematic of the salience of religion to women and men in Galați have been the frequent and varied references that they have made to the sacred in informal conversations and interviews. Just as with the observations I have made of religious practices and beliefs, these exchanges have at times been portals onto the role the sacred plays in people's strategies for managing their physical and mental health. In the next sections, I present some of this ethnography, juxtaposing it with what I have learned from people about the effects of the upheaval that has occurred since 1989. Although these portrayals are not fully representative of the experiences all blue collar people have had in the post-communist period—and of the sentiments they harbor about sacred practices—they nonetheless offer an illuminating perspective on what some have suffered through in this era and why religion is a respected source of coherence, meaning and psychosocial support.

Confessor as therapist

EVEN BLUE collar workers who have maintained a position in the manufacturing sector in Galați after privatization and restructuring have not had it easy. This includes one of the sons-in-law of a retired couple I have come to know quite well. Developing a connection with them opened up the possibility of becoming fairly well acquainted with the son-in-law, Adrian,¹⁷ and his family, one of the retired couple's daughters and their two daughters, because they also live in the city and maintain close ties with one another. Adrian has been employed at the steel manufacturing plant since I first met him in 2005, when he was in his 30s. That year he earned a salary of around \$300 per month, which was combined with income, albeit little, that his wife earned in retail, together offering them a very modest standard of living.

But post-communism was replete with impediments to a better life. Adrian took issue—like many working-class people—with a deduction from his monthly salary to help fund the National Health Insurance System (*Casa Națională de Asigurări de Sănătate*). 11% was withdrawn, he proclaimed, challenging my understanding that employee contributions were fixed at 7%. The salary reduction was particularly unnerving given that one still had to pay under-the-table for services rendered at health facilities, as I mentioned earlier. Making matters worse in Adrian's opinion was that he worked in a "toxic" environment, as he put it, and was unable to adequately protect himself from its effects with the shoddy masks his employers gave him. He concluded in part from this that the corporation viewed its employees as disposable. Although I never learned whether the facility had an in-house clinic that directly served the workers, Adrian's complaints suggested that occupational health standards were not particularly stringent there. Adrian's residence was also quite small for the family he had, but purchasing another home was not within his reach. On the positive side, he had access to land in a village, where he

gardened and grew grapes, the yield from which I saw one afternoon when we went there to pick grape-vine leaves and gather vegetables. This work added, though, to an already rather strenuous schedule, making it hard for him to get enough sleep. As if these “every-day” concerns were not enough, when I first met Adrian he had just succeeded in fighting off tuberculosis, a disease which has been difficult to wipe out in Romania.¹⁸ He was convinced he had become infected with TB at work. Regardless of how it was spread, overcoming it had required lengthy leave from work.

One tactic upon which Adrian seized in order to persevere in such an unrewarding and capricious environment was to turn to religion. Early in our relationship, I began to learn that his faith in a higher being was unbending when he showed me photographs a friend had taken during an excursion to Mt. Athos and we watched a video a cousin had made of a visit to a shrine in Jerusalem. But these were just glimpses at Adrian’s unflagging commitment to a life closer to God. Later in our acquaintanceship he announced that he had settled on a confessor (*dubovnic*), a priest whom he could formally approach to share his troubles, errors and perceived weaknesses. Adrian sought his confessor out, for instance, after a child on a bicycle struck his car while he was driving. Although the accident was not his fault, disclosing it to his confessor had calmed his nerves because he told Adrian to keep his chin up since it could have been much worse. Without using the word therapy, Adrian was describing an encounter in which his stress was dispelled by the supportive words of an esteemed figure of some authority, which was unquestionably psychologically beneficial to him. The interactions with the priest were, in other words, akin to a form of therapy, and such therapy was effective for Adrian because it corresponded with his belief that one’s relationship with God was the most crucial bond one would form in this life. How unique or commonplace such a relationship with a priest was—particularly for a man in his 30s—I never fully ascertained. I did also know, however, a similarly aged woman who told me as well that she was eager to build a connection with a confessor to whom she could turn. Both appeared to be striking examples of welcome therapy in an uncertain world.

An entire decade later, Adrian continued to maintain a very critical perspective on his place of employment, arguing that workers like himself still had little control over their circumstances in the enterprise, which he said then had a mere 4,500 employees, a shadow of its communist-era workforce. And he also held firmly to his religious convictions, telling me he attended mass weekly and that loving God was more important than anything else in the world, including loving oneself or one’s family. One may be quick to interpret such commitment to the sacred as a distraction from strategizing to bring about lasting change to a very unsatisfactory situation and a broken society. Yet what I have perceived overall from interacting with Adrian has been the psychosocial salve that religious practices and church leaders are to a person living in a place that has been drastically and profoundly reshaped to their detriment by powerful forces often at breakneck speed.

Prayer for relief

ADRIAN'S MOTHER-IN-LAW, Dana, also trusted in the sacred for support in turbulent times. "Please ask the priest to pray for Dana, the sick one," she requested in summer 2015 after I told her I had been invited to Sunday mass by a priest I had met at her residence several years earlier when he performed a blessing of their home.

Dana was feeling quite unwell at the time, and she was getting little relief from the medical establishment. Repeat visits to her family doctor seemed to be going nowhere in her quest to uncover the source of chronic discomfort in her abdomen. "They just keep giving me different antibiotics," she told me, a treatment regimen that had persisted with so little positive effect that at one point she even asked the doctor whether the drugs were being tested on her. "I need an MRI," she insisted, believing this would finally shed light on the problem, but the expense was beyond her and her husband. Even after she succeeded in amassing the money needed to enter the hospital and undergo examinations that summer, a diagnosis was elusive—after several days in the hospital, she was released feeling better due to medication she had been administered but the underlying condition had not been addressed. The doctor who was most capable of determining what was bothering her was not available at the time. When a few weeks later it appeared the doctor could be seen, Dana headed to the hospital again, spending money on a taxi as public transit did not serve the area, only to leave hours later without having consulted with the doctor since her schedule had been too overloaded.

It was an all-too-familiar tale about an encounter with the public healthcare system by an indigent, working-class pensioner. Because of her husband's negligible retirement income despite decades laboring in industry and Dana's complete lack of a pension even though she had worked for some years on an agricultural collective when they lived in the countryside, availing themselves of needed medical services and paying for pharmaceutical drugs were more often than not out of the question. Consequently, their health concerns were chronically left unattended. Over the months that I lived with them, Dana showed me unfilled prescriptions for disorders with which she had been diagnosed, and, although he spoke less about gaps in consultations and treatment, Sorin at times described as well the implications of not having the personal resources to pay for healthcare services. One summer he in fact showed me a tooth he had extracted from his own mouth because he could not afford to go to the dentist, and he complained that summer about not being able to purchase much-needed dentures.

But even when they were able to pull together the finances to pay for services, which Dana did on at least one occasion in order to undergo physical therapy, it meant forgoing outlays for other necessities, such as utilities. This put them into formidable debt, making Dana anxious. Yet having the cash was not itself a guarantee one would get the treatment one sought. In a clear sign of the ruined state of the public healthcare system in Romania, older people often objected about long waits to see doctors—one elderly woman I knew who had broken an arm in a fall went so far as to remove her cast on her own because she grew so tired one day waiting to see the doctor. It was no

wonder that I often observed Dana drinking teas that she had brewed from medicinal plants in order to treat her ailments, and when I told her on one occasion that I was experiencing some discomfort in my left kidney she prepared a tea for me. As is the case for people in developing societies, medicinal plants were often viewed as a first line of defense against illness.

Contact with the spiritual further helped Dana withstand the pain she felt. Not only did she ask me to have the priest pray for her, but she also devoutly attended masses in spite of—indeed, because of—her infirmity at a partially constructed Romanian Orthodox Church located not far from their home. She was enthusiastic about the young priest who presided over the church. His manner was soothing, she said, but many rituals themselves were a comfort to her, as I observed when I joined her and her husband at masses on two very warm Sundays that summer.

On both occasions we participated in the masses for more than two hours, which gave us the opportunity to engage in many components of the services, much of which occurred in the church courtyard. The priest recited homilies; water was sanctified and distributed; and the Eucharist was offered to congregants who had confessed their sins. The church itself was open, allowing people to enter, prostrate themselves before sacred icons and say prayers. There were about 100 people in attendance at both masses, older people modestly outnumbering the young and middle-aged.

Dana steadfastly participated, taking me along with her at times. We went into the church together, where she prayed before and kissed the icons. She also insisted I be blessed by the priest because I would soon be traveling back to the United States, and she wanted to ensure that my journey would be safe. This involved standing in a line in the courtyard until we reached the priest, who gave me a blessing and crossed my forehead. We also heard the priest's sermons, through which he conveyed several inspiring messages. Among the most encouraging was his telling us that God never encumbers us with "burdens" that are too weighty. Whatever comes our way we will be able to handle so long as we are faithful, he assured us. He also urged us to give more attention to our "souls" than to our "bodies," explaining that the soul will last while the body is ephemeral. Taken as a whole, these were words promoting resilience in an era when it was easy to feel deeply disheartened.

Dana was invigorated by the masses, which I had anticipated. I already knew that she prayed alone in her bedroom and that a calendar showing the main holidays in Romanian Orthodoxy was displayed on a wall in the kitchen, the room in which most household activity occurred. We had been to church together before, during which I had observed her devotion, and I witnessed the solemnness of the benediction of their home. The sacred was a haven—however temporary—for Dana. It helped her defend herself against the persistent onslaught of blows that living in a transforming and increasingly unequal society pummeled at her. This included the health conditions for which she struggled to get adequate treatment.

Turning to the Miracle Worker

THEFT WAS on the minds of several men in the courtyard of the Romanian Orthodox Church in the village. It was August 2011, and I had been invited there, a short drive from Galați, to participate for the second time (in 2009, I observed the same event) in celebrating the arrival of a beloved icon known as the Miracle Worker (*Încătoare de Minuni*) by a retired man in his 60s, Mihai, with whom I had been acquainted for some years. He had moved to the village from Galați after retiring from the steel plant, purchasing land and beginning to construct a home. But it was not a case of petty theft in the village that was on the men's minds. Instead it was the marauding of the state by political leaders that grieved them. One of the men told me that all politicians pilfered in order to enhance their own quality of life, stranding elderly, retired people and other vulnerable members of society in poverty. This seemed especially true to him at that point because a string of austerity measures had been enacted in the wake of the global financial crisis that had begun in 2008 and had sent the economy of Romania into a tailspin. They included most notably a 5% increase in the V.A.T. from 19 to 24% and major cuts in personnel and salaries within the public sector, disproportionately affecting the underclass.

It was a potent diatribe that left me with many questions. One that initially nagged at me was why working-class retirees and their kin were not protesting publically about their circumstances as they had the previous year, efforts that appeared to make a difference because plans to reduce some pensions were subsequently rescinded. Aside from hearing about a demonstration of postal workers in the capital that summer, little overt political activity against the policies of the regime was visible. Yet what I observed that day was in actuality a response, one which was quite forceful in its own right. Not only did the arrival of the icon provide people in the village an opportunity to coalesce and share thoughts on matters important to them, but it also gave them a chance to have contact with the sacrosanct, taking from it what they believed it offered, including hope and protection, both of which were highly valued.

The presentation of the icon was as impressive as had been the case two years prior. I was invited to take a privileged position at the front of the small church along with a group of local men. We watched many dozens of people, mostly women, passionately say prayers to the icon, kiss it and rub purses, towels, clothing and other items against it, the motivation behind which was to obtain its healing powers. Many performed these acts three times, in each case going to the end of the line to begin the procession to the icon anew. It was only after more than an hour that I was escorted to join other men to do the same.

I was not able to interview people about their experiences, my sense that it mattered profoundly to them to be in the presence of the icon arising from the observations I made. But I did know well that for Mihai the event was an imperative. He had had significant health problems about a decade earlier that caused him to be admitted to a local hospital for an extended period. He was certain that those issues had developed because of stress from low income and injustices in the calculation of different people's

pensions. Later, getting his feet on the ground in the countryside—in particular, building a house—was not as easy as he had anticipated. To keep himself healthy, he was careful what he ate and completely avoided pharmaceutical drugs. And he also cultivated a strong connection with God, attending mass regularly, and being present annually when the Miracle Worker arrived.

Conclusion

DURING THE approximately 20 months that I have conducted anthropological research among retirees and their kin in Galați I have made numerous observations of religious life and people have confided in me about their beliefs in the spiritual. There are many ways to interpret the insights I have gained. In this paper I have primarily focused on the sacred as a sphere in which people seek support for managing or resolving physical and mental health concerns affecting them in the here and now. I have argued that the fact that people feel free to engage in such behavior is a sign of the increasing democratization of Romanian society, even if some analysts have expressed concern about the broad influence of the Romanian Orthodox Church in political life. Yet such commitment to religion is also a manifestation of the instability of Romanian society throughout the post-communist period. Because of the community and meaning it provides, people seek out the sacred. It gives them some sense of control over the seemingly endless material and social uncertainties impinging upon them, including fragmentation of kin and community networks, loss of viable employment, near collapse of the public healthcare system, contraction of pensions and other entitlements, overwhelming costs for staples, utilities and transportation and many other deficits.

Religion is not, however, enough to stave off the threat that erosion of the public healthcare system is to many sectors of the population in Romania. It cannot, that is, be the prominent solution for the health concerns plaguing retirees and their kin. We see this in data on morbidity and mortality of the population that is gathered regularly. Relative to many other European countries, as noted Romania lags considerably in life expectancy, and its rates of morbidity from some diseases are relatively high. For example, in the post-communist period mortality from chronic obstructive pulmonary disease has been significantly more common among males in Romania than in many other European countries, chronic liver disease and cirrhosis have been prevalent illnesses within the population and, as pointed out, tuberculosis has stubbornly persisted in Romania.¹⁹ These are red flags signaling the need for a redirection of policy in Romania that will reverse decline in the healthcare system and the wider public domain. A more viable society and brighter future are possible by restoring a commitment to provide medical services to disadvantaged groups at little or no cost.



Notes

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Abstract

**“Please Ask the Priest to Pray for Dana, the Sick One”
Health-Seeking, Religion and Decline of the Public Sector in Post-Communist
Romania**

This paper explores the role that the sacred plays in the health-seeking strategies of working-class pensioners and their kin in post-communist Galați, Romania. Working-class retirees are among the most disadvantaged groups in Romania. Their pensions have not kept up with the cost of living since the end of communism, a condition made worse by protracted decline in the public sector. Unable to access private healthcare services, they are reliant upon the state system, which often fails them. Religion has meanwhile experienced a reawakening, and pensioners have drawn upon this for support in managing their health concerns. They attend masses, pray to icons and develop ties with priests in an attempt to exercise control over their health. The paper concludes that the state needs to enact policy reinvigorating the public healthcare system since the sacred cannot, however, fully address the population’s healthcare needs.

Keywords

health-seeking, religion, public sector, post-communism, Romania, pensioners