

For a Sociology of Pilgrimage

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Miracle Cures: Saints, Pilgrimage, and the Healing Powers of Belief. Robert Scott. Berkeley, CA: University of California Press, 2010.

Pilgrimage can be thought of as a performative activity, social in nature, which allows individuals to practice their faith. This activity constitutes a set of practices which together generate a potential for self and collective transformation, that is, a possibility for individual and social change. Just what this transformative potential may entail has been difficult to grasp. We see that pilgrimage has been present in all world religions and a wide variety of indigenous religious traditions, dating as far back as antiquity and beyond (Coleman and Elsner 1995). This persistence of pilgrimage through time and across cultures encourages thinking about intrinsic characteristics of this practice. One of the more productive attempts in this direction is Victor Turner's (1973) articulation of pilgrimage as a liminal process, akin to the rites of passage (Van Gennep 1960) and his thinking about collective transformation as spontaneous communal bonding among disparate pilgrims on route to the same destination (Turner 1974). Most recently, Neil Smelser (2009) extended the model of liminality to a wide variety of social practices that can be thought of as a journey to demonstrate how these allow individuals and groups to regenerate themselves. On the other hand, detailed ethnographic case studies and historical documentation attest that this practice is grounded in culture and therefore resulting in huge diversity of pilgrimage practices and experiences and wide variations in their meanings and implications. This enormous variability not only between the different cultures and religious systems but also within a particular religious tradition renders generalizations questionable (Eade and Sallnow 1991). Instead, this cultural specificity of transformative processes and their outcomes prompts us to carefully consider how we think about the nature of the self and the social in a given context and what transformation means in that setting (Bowditch 2008, Csordas 1997).

The kind of transformation through pilgrimage that interests David Scott in his *Miracle Cures: Saints, Pilgrimage, and the Healing Powers of Belief*, is healing of physical illness by appealing to saints. He explains in the Prologue that his interest in this topic was sparked through his work on medieval Gothic cathedrals in Europe. While reviewing works of medievalists, Scott discovered that a substantial source of revenue for these very expensive structures was pilgrimage to shrines of saints. Pilgrims appealed to saints for cures from various kinds of suffering and left behind coins in appreciation. Reading through their accounts, Scott realized that many curing transformations experienced by these pilgrims could be explained by the modern scientific knowledge about the link between spirituality and healing. The result is a book which combines accounts on miracles spanning the years of 500 A.D. throughout the present with contemporary biomedical, sociological, and psychological research on health and illness in order to demonstrate why it is that appealing to saints on pilgrimage may give rise to physiological processes that can contribute to an experience of improved well-being.

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The book is divided into two parts; the first explains the importance of saints and their potential to heal in what he characterizes as Western European Christianity, while the second is devoted to experimental studies related to healing in modern western medicine. The first chapter summarizes reports by medievalists about the life in the Middle Ages to argue that chronic undernourishment and lack of sanitation would have contributed to susceptibility to disease and disorders, whereas accidents, violence, and the fear of the wrath of god would have helped generate collective paranoia and encourage people to believe in miracles. The next chapter discusses how people today, as they did in the Middle Ages, refer to the saints as mediators of their requests to god. The miraculous power of the saints, Scott suggests, is believed to be in their body parts and other material objects associated with the saints. Ritual activity at the shrines is the medium through which pilgrims express their requests for healing by touching these relicts. When the requests are granted, they are widely publicized, further promoting the work of the saints. The third chapter deals with the presence of the divine power to which the pilgrims appeal for help. While relicts are transportable and housed in tombs, shrines and churches, Scott notes, apparitions often require building a shrine on the spot where the visionaries report them. In Chapter Four, Scott explains the socio-cultural context of pilgrimage in the Middle Ages. Those who showed visual signs of illness were stigmatized and marginalized because illness was ascribed to sin and people believed that signs of such moral failings would endanger the entire community. Alternatively, if someone was cured, it restored the place of that person in the community. Under these circumstances, pilgrimage would seem to have offered a hope for people with illnesses who were further encouraged to take the journey by the Church's system of indulgences. Scott suggests that the preparation as much as the long and arduous journey would have changed the pilgrims' mindset and made them more receptive to what would have awaited them at the shrine where scores of pilgrims, helpers, vigils honoring the saint, confessions, and perpetual prayers around the clock must have inspired hope among the sick and belief in the possibility of cure.

This accessible narrative of life, belief and ritual practice in relation to healing through pilgrimage to shrines of saints leads the reader to the second part of the book. Chapter Five returns to the diseases by piecing together accounts of miracle cures at medieval shrines and studies that describe diseases in the Middle Ages with the purpose to present a picture of medical conditions from which pilgrims may have suffered. Some of these conditions may have been chronic, others a result of poor hygiene, diet and living conditions. Here, Scott emphasizes that accounts of miracles tell little about the sign of illness but rather about its symptoms as experienced by the pilgrims. In Chapter Six, Scott discusses psychological and social factors that may have contributed to illness and recovery. Stress from the harshness of daily living, together with loneliness, social isolation, and shame from the stigma of illness would have resulted in physiological changes adversely affecting the immune system. Alternatively, expression of such negative feelings through confession and arousal of optimism and hope would have improved the pilgrims' immune system. In Chapter Seven, Scott reviews studies on placebo related research to demonstrate how beliefs and expectations about effects of modern medical treatments influence people's physiological response to these treatments. Scott reasons that the milieu of the healing shrines creates ideal therapeutic communities where people can experience feeling better. In the penultimate chapter, Scott suggests that there are multiple ways in which this positive therapeutic environment may stimulate pilgrims to interpret their experience as a recovery. In addition to

what psychologists call self-efficacy, a state of mind which results from the belief that one can change one's life, pilgrims may also draw on their immediate environment and contextual clues to focus on experiences that provide the evidence and strengthen the belief that their health is improving. The book concludes that, while belief, motivation, and hope, combined with the actual physical activity in the pilgrimage process contribute to the possibility for the saints to heal, virtual pilgrimage, that is, the journey to shrines via the Internet, robs the physical pilgrimage process of its healing potentials.

As an ethnographer who has been engaged in detailed, on-going empirical research on the interstices between the varieties of Christian pilgrimages to Jerusalem and inter-group relations among the city's Christians (Bajc forthcoming), I read Scott's *Miracle Cures* as an invitation to sociology to seriously engage with the practice of pilgrimage as an empirical and theoretical problem. In this pursuit, Scott is much more confident in making general statements than many contemporary scholars of pilgrimage have tended to be – given that huge variations in transformative experiences through pilgrimage between as well as within the various religious traditions are contingent upon localized conceptions of self and the social. His appeal to reach across disciplines to gain a better understanding of the transformative potentials of pilgrimage, however, is compelling, as is his ability to work comfortably with data and analysis in multiple disciplinary fields. This is particularly important in the study of pilgrimage practices which have shown themselves to be adoptable to cultural trends and innovations over time (Margry 2008, Swatos and Tomasi 2002). The capacity of pilgrimage to result in change at different scales of complexity, from that of the individual to the global, have intertwined pilgrimage with domains of social life that extend far beyond religion (Kelner 2010, Huber 2008, Thal 2005). In this way, Robert Scott's book is a reminder that pilgrimage presents itself as an ideal empirical phenomenon through which sociologists can explore theoretical issues surrounding the dynamics of pilgrimage practices at different scales of complexity; not only the individual, but also the group, the larger community, and the global. One of the challenges posed to sociology by this phenomenon is to explore how individual transformative experience may be connected with the global and under what conditions can transformations at larger social scales be said to be connected with the individual experience (Bajc 2012).

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