

A SAMPLE OF MEDICAL FOLKLORE

by

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Introduction to Folklore

Folk Study 276

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The purpose of this study is to look at and analyze jokes used by and relating to the medical profession. Also, I will take a brief look at some home remedies observed by the hospital personnel. I believe that there are certain types of jokes used by medical staff that may not necessarily be used by the general public. I hope to discover the view that hospital staff hold about home remedies that they come into contact with.

Past experience has shown me that the people who work the late night shifts and those who cover the emergency room tend to be more open and talkative than those work other parts of the hospital and different shifts. I attempted to get a broad basis of collection material by interviewing registered nurses, licensed practical nurses, and a doctor. I found that catching these busy people was not as easy as I had first hoped it would be. The people who are usually very talkative refused to talk on the tape recorder. I did the interviews at the hospital hoping that the atmosphere would help them relax and yet stay in a medical frame of mind. The first three interviews did not go well, but at least they agreed to be taped. The last two people interviewed refused to be taped but they were much more open and willing to talk.

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True!

If I was to do this project again I would use a little different approach. First, I would have begun earlier. I had attempted to get the interviews done weeks before I actually did

I had a lot of trouble getting my schedule to compliment theirs. Secondly, I would have not attempted to ask these people to attempt to give me jokes on demand. I probably would have just concentrated on the home remedies aspect and focused on how the medical profession views it. I think that the fact that I know all the people I interview helped them feel more relaxed and be more willing to talk. I don't think that at any time I "put words in an informant's mouth" although I almost wish that I had done something to bring them out more.

The jokes aspect of this project was the hardest but also one of the most enjoyable. I had never really listened to the jokes that I had heard up until this time. After the interviews were over I was amazed that I had only two jokes that were similar. The hospital staff that I interviewed were those who worked in the more stressful areas of the hospital, the emergency room and the O.B.ward. These, areas can also get boring. I think that this atmosphere invites a type of humor in its self.

I could find no other collections with which to compare the area of medical jokes, published or other wise. The information dealing with the home remedies aspect was very interesting. The use of tobacco juice for insect stings and bites was given by Dr. Hodge and Mrs. Olden¹ is the only home remedy that was given twice. And then Ms. Englebright gave us a few more remedies for stings with the use of a green tomato vine or a paste of baking soda². Mrs. Dunn added to the list of things to do for a case of the hiccups with the suggestion of pulling your tongue or using sugar to cure them³. Most of the home remedies that were given to me during the interviews were

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not to be found in any of the collections that I went through. Ms. Englebright referred to the Foxfire collection during her interview, but I was unable to obtain the needed volume in order to do the needed research.

Jokes in themselves represent a form of folk culture in that they are traditionally passed down by word of mouth and are in no way protected from change. I believe that the people who I talked with use these jokes as a way to relieve a potentially stressful situation and add a little humor to a very formal occupation. The value of home remedies to the medical profession can be very complex. The need to understand why people use home remedies and the types of home remedies that people use is a subject that I now find needs to be further explored. I think most of the people that I talked with view home remedies as a type of a novelty, something to be looked at and be glad we are beyond. And yet, most everyone had tried at least one of the home remedies that were listed. The problems that were listed by the people with whom I talked dealing with the views that older rural people have concerning doctors, hospitals and medicine seems to be tragic but time appears to be curing it. I did not find any other researchers who had approached home remedies in the same manner that I did so it is hard to say what other views on most of the subjects I covered are.

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Although a hospital in its self would be considered an elite culture, the group of people with who I conversed would

make up a type of folk group. The material that I collected would definitely be considered folk culture as it contains characteristics, such as; it is informally transmitted, it is anonymous, it is unprotected from change, and it is in a form that is readily recognized by this particular group.

The purpose of this study was to analyze jokes used by the medical profession and to also look at some home remedies that have been observed by hospital personnel. I believe that we have successfully accomplished this. As I had stated early in this report, if I was to do this study again I would take a different approach. I would concentrate on the home remedies aspect and dealt less with the humorous side of the medical profession. Also I would have probably not even questioned how older rural people view doctors and their medicine. I believe that I could use the same type of people and probably even some of the same ones.

NOTES

1. Wayland D. Hand, Popular Beliefs and Superstitions-
A Compendium of American Folklore. From the Ohio Collection of
Newbell Niles Puckett (Boston: G.K. Hall and Company, 1981),
Volume 1, case 7921 and case 10187.

2. Ibid., case 7904.

3. Ibid., case 10103-10105.