Moonshining and Herb-Doctoring
by Richard Blaustein

In the popular imagination, the fierce, furtive moonshiner and the wise, gentle herb gatherer are part of the pantheon of southern mountain folk life. But illicit manufacture of alcoholic beverages and the preparation of medicinal herbal teas and infusions are ancient and widespread traditional practices by no means unique to Tennessee. While moonshining and herb-doctoring still persist in isolated, peripheral communities, neither should be considered typical of cultural life in the complex and rapidly changing Tennessee of today. Indeed, if these practices share anything in common, it is that both are largely confined to marginal sub-cultures within the larger community. The shift from a largely rural, subsistence-oriented economy to an industrial, consumption-oriented one, however, is still an ongoing process, and there are many older Tennesseans (and quite a few younger ones) who have more than nostalgic recollections of moonshining and herb-doctoring.

What else do these marginal folk traditions have in common? On the surface, both could be considered forms of "folk chemistry." They involve the acquisition of specialized skills and knowledge through informal, direct contact with experienced practitioners and the application of such traditional knowledge in the preparation of potions "which cure what ails you." Even more to the point, is the fact that both are marginal occupations by necessity. Moonshining is, of course, strictly illegal, and not a summer season passes in Tennessee and neighboring states without reports in local newspapers of smashed stills and "busted" moonshiners. The tradition is deeply rooted, however, and the battle against the unregulated production of white whiskey seems an attempt at control rather than outright eradication, which appears to be impossible. While the gathering and preparation of herbs for medicinal purposes is perfectly legal, the practitioner who dispenses such herbal remedies for payment runs the risk of prosecution for practicing medicine without a license. Consequently, like the dispenser of illegal liquor, the bona fide herb doctor must operate on a clandestine, word-of-mouth level. Otherwise he must seek protection behind some form of legal disclaimer which denies the medical efficacy of his or her potions and remedies.

On the grassroots level, both the moonshiner and the herb doctor cater to clientele with little patience for governmental regulation. Such customers, having inherited or developed a preference for the home-manufactured product, would rather deal with people they know and trust than subject themselves to the commercialism of the liquor store or the impersonal, high-priced doctor's office. In this sense, both the moonshiner and the herb doctor can be considered key figures within folk groups, defined by shared beliefs, values, attitudes and customs which serve to distinguish them from the larger community.
Moonshine still. Adapted from still at 1982 Knoxville World's Fair Folklife Festival by Tina Mion

Traditional herbalist Jim "Catfish II" Gray by his homemade sign, Bluff City, Sullivan County. Photo by Richard Blaustein

Tonics made by “herb man” W.L. “Willie” Burchette, Putnam County. Photo by Betsy Peterson, Tennessee State Parks Folklife Project
community. Though both practices are of marginal legal status, both can be seen as expressions of larger traditions of self-sufficiency and self-reliance.

In considering herb-doctoring, it is essential to realize that most people, including older, seemingly old-fashioned country folk, have a practical, eclectic attitude towards medicine and health maintenance. Many will use herbal remedies to relieve chronic, non-critical complaints, but nearly all will resort to modern medicine when faced with major, life-threatening situations. The attitude of most older people familiar with home remedies and herbal medicine seems to be, "If it makes me feel better, I'll use it. If I find something new that works better, I'll use that."

Medicinal herbs, however, still play a significant role in modern pharmacology, and it is still common to find Tennessee mountain people who continue to augment their incomes by gathering and selling plants. They are sold in bulk to traveling herb buyers or wholesale dealers, who often buy hides and scrap metal as well. These dealers, in turn, sell the herbs to major pharmaceutical companies. Some of these medicinal herbs—particularly ginseng—fetch very high prices on the commercial market and are now in danger of extinction due to over-picking. While cultivated ginseng does not bring as much as the wild plant, an increasing number of Tennessee mountain farmers are attempting to ensure its survival and their continued income from it by growing ginseng in protected frames. Most ginseng, whether wild or cultivated, is still shipped to markets in the Far East, where it is traditionally considered a potent tonic and aphrodisiac.

Appalachian herb doctors and gatherers seem well aware of the purported powers of ginseng but do not believe in them; the most frequently reported use of ginseng in the mountains of East Tennessee is to soothe irritations of the mouth and throat. This is very much in accord with the general attitude towards herbal medicine pervasive in the southern Appalachians: while contemporary practitioners of herbal medicine continue to express the traditional belief that God put medicinal plants on earth for the benefit of human beings, they do not believe that the plants themselves have magical or supernatural properties. Instead, they make a clear distinction between herbal medicine and faith healing—a distinction not always clear to outsiders.

It is important to stress the differences between the two major types of folk medicine. Herb-doctoring entails the gathering, preparation and dispensing of wild plants, generally in the form of teas. Virtually all of the plants used by herb doctors have long-established medical functions, as indicated by their inclusion in popular home medical dictionaries published by 19th- and early 20th-century medical doctors. In this sense, herb-doctoring represents the adaptation and continuation of what was once generally accepted medical practice. By contrast, faith healing rests on the belief that the healing process is divine in nature and origin, that certain individuals are endowed with the gift of spiritual healing, which is a concrete manifestation of God's grace to the faithful. While faith healing is carried out through prayer, the anointing of the sick with holy oil, and also the laying on of hands, no such religious activities are entailed in
herb-doctoring, which is generally considered to be a pragmatic alternative to conventional modern therapeutic techniques.

Herb doctors may acknowledge the efficacy of some forms of faith healing and will often couch their underlying approach to medicine and healing in religious terms. However, they generally do not claim religious or supernatural powers or properties for their herbal remedies. Most seem to be philosophically allied with the modern holistic medicine movement in stressing the importance of rest, diet, and positive emotional attitude in contributing towards recovery from sickness. The appeal of the herb doctor to his or her clientele may therefore stem from their preference for traditional, familiar and inexpensive alternatives to the offerings of the licensed physician and pharmacist. They rely to a greater degree on interpersonal communication between patient and practitioner and a more personal involvement in the process of the cure. The emphasis which herb doctors place on stimulating the self-healing properties of the body through natural, organic means seems also in accord with the rural Southern ethic of self-sufficiency and self-reliance.

Moonshiners may share this traditional philosophy of self-sufficiency and self-reliance, but there is no evidence to suggest that their product is any more beneficial to their clientele than the legal, taxed variety. Because of lack of control and the pressures imposed by law enforcement agencies, the quality of illicitly produced whiskey ranges from palatable to lethal, and the cautious consumer of moonshine needs to be sure that the supplier is not out to make a few quick dollars at the expense of the customer’s health (or life). Large-scale producers are primarily concerned with turning as large a profit as quickly as possible, without much regard to the quality of the product or the health of the customer. Consequently, a good deal of moonshining is a small-scale, backyard industry which serves the needs of a highly restricted local clientele of old friends and neighbors.

Moonshining persists because it is profitable, however risky. There are people who have come to prefer the taste and wallop of the home distilled product, and partaking of moonshine serves to reinforce their sense of identity with a rowdy, authority-defying subculture which has never fully accepted the right of government to tax and regulate what they deem to be their own private business. Moonshining and herb-doctoring, however, are the least of the problems facing law enforcement authorities in Tennessee today. As long as moonshiners and herb doctors can manage to satisfy the needs and desires of their clients without attracting the attention of the legally constituted authority, it is likely that these largely clandestine, marginal traditions will survive as living aspects of the state’s folk culture.