

# Folk Medicine and Traditional Healing

#### **Basics**

- Folk medicine is the mixture of traditional healing practices and beliefs that involve herbal medicine, spirituality and manual therapies or exercises in order to diagnose, treat or prevent an ailment or illness.<sup>1</sup> The *World Health Organization* states that it is mostly practiced by indigenous or native populations and as much as 80% of the population in certain countries within Asia and Africa rely on it for primary care.<sup>2</sup>
- Folk Medicine may also be referred to as alternative medicine, holistic medicine and Eastern Medicine (named after its historic practice in countries of Asia, particularly China<sup>3</sup>).
- Western medicine also referred to as allopathic medicine, scientific medicine or biomedicine, uses healing practices based on scientific evidence and research. Today, this is referred to as conventional medicine.<sup>4</sup>

# **History**

- Through modern-day research and the studying of history, we know that cultures have always used plant or plant properties to treat or alleviate different illnesses.<sup>5</sup>
- Traditional medicine and its healing practices is about as old as written human history. Ancient Mesopotamia, which is the modern-day Middle East, is where the oldest texts about traditional medicine were found and sourced back to about 2100 BCE. There is evidence in clay tablets that sorcery, prayer and medicinal plants were used but also more conventional forms of medicine such as washing and bandaging.<sup>6</sup>
- Ancient Egyptians also contributed greatly to traditional medicine by about 1700 BCE where they prescribed medicinal plants for certain ailments based on what they believed was their magical potential. The same medicines were then consistently prescribed for those ailments that they, upon observation, successfully treated.<sup>7</sup>
- There are significant civilizations of ancient Mexico that were also known for their alternative medicine practices. The Mayas of Central America and Southern and Central Mexico (2000 BCE to 250 AD<sup>8</sup>) had a very holistic view of illness and healing. Essentially, health was viewed as a balance that occurred between your physical condition, nature, the cosmos, etc. and different components were used to improve health such as medicinal plants, religions ceremonies and spiritual guides.<sup>9</sup>
- The Aztecs of Central Mexico (1300 AD to 1519 AD and the post-conquest period)<sup>10</sup> also had extensive practices with contemporary medicine. For example, they treated headaches by inhaling tobacco and other herbs and scabies were treated by washing the skin and applying avocado.<sup>11</sup>
- According to a recent study, 83% of farmworkers identify as Hispanic, with 73% identifying as Mexican.<sup>12</sup> The folk medicine practices of ancient Mexico, therefore, are very significant for modern-day farmworkers.
- As mentioned earlier, folk medicine is practiced by mostly indigenous or native populations around the world.<sup>13</sup> "Mestizos" (a term used in Mexico) refers to the subculture, practices and

beliefs that have resulted from the historical mixture of the indigenous and Spanish cultures, since 1519. <sup>14</sup> In other parts of Latin America, the term is "Ladino" and studies frequently suggest that this word is used among the former and current Mayan regions of the Americas. <sup>15, 16, 17</sup>

• Whether the term is Mestizo or Ladino, evidence suggest that today's Hispanic farmworkers practice a form of folk medicine that has ties to the many facets of their history: influence of the Moors and the Spanish, Christian-Judeo thinking and, of course, Aztec culture and influence.<sup>18</sup>

# **Farmworkers and Health**

# **In Practice**

- Folk medicine is practiced by a majority the Mexican population while in Mexico, especially among the poor and uninsured.<sup>19</sup> It is therefore no surprise that these beliefs survive and resurface once people and populations cross international borders.
- There are many types of alternative or folk medicine practitioners among the Hispanic community. A "sobador" is a manual therapist who offers chiropractic or physical therapies.<sup>20</sup> In his research article, Servando Hinojosa discusses two key components on why sobadores are so popular among the South Texas, Hispanic community: first, there is a common cultural understanding regarding spirituality and healing that harbors trust between the patient and the sobador, and second, the heavily agricultural area often results in workers suffering from occupational or workplace injuries.<sup>21</sup>
- Herbalism is also a common practice where components of a plant or plants (berries, root, leaves, etc) are used for their medicinal properties.<sup>22</sup> A person who practices herbalism is called a yerbero. Some examples of medicinal herbs include chamomile (manzanilla) which is taken as a tea for its calming properties, aloe vera (zabila) which is used topically on the skin to cure bites, rashes, etc and eucalyptus (eucalipto) is used as a tea to alleviate and help symptoms associated with the common cold.<sup>23</sup>
- Curanderismo is seen as a combination of the above mentioned practices with a few other components. The practice also assumes a social network of a relative or relatives who can diagnose the illness and act as curandero, a relationship between illness, healing and religion, and an underlying belief and trust among the Hispanic community about symptoms, healing practices and the source of illness.<sup>24</sup>
- A few common ailments that a curandero can diagnose and treat would be mal de ojo (evil eye), susto (fright sickness) and mollera caida (fallen fontanelle).<sup>25, 26</sup>
- Mal de ojo is defined as an illness that is inflicted due to envy. When the glances of admiration of a stronger person are inflicted on another for too long, usually on a child, it is said that mal de ojo occurs.<sup>27</sup> The associated symptoms include high fever, fretfulness, headaches and crying.<sup>28</sup> For treatment, an egg must be rubbed among the child's body, while prayer is conducted.<sup>29</sup>
- Susto is defined as resulting from a startling or frightful occurrence or scare which has caused the soul to temporarily leave the body.<sup>30</sup> The symptoms associated with it include loss of appetite and weight, lack of motivation and listlessness. The treatment of susto involves sweeping the body with herbs three times while prayer is conducted.<sup>31</sup>
- Mollera caida is the condition such as fallen fontanelle in which the soft spot on top of a baby's head is marked with an indentation.<sup>32</sup> It is believed to be caused by bouncing a baby too roughly or removing a nipple or bottle from the baby's mouth too suddenly. It is also marked by the baby having a bulging palate, fever, vomiting and crying.<sup>33</sup> The treatment involves applying salve to the baby's head and pressing on the baby's palate.<sup>34</sup> It is important to note here how a curandero's diagnosis may be very much in line with those of contemporary medicine, despite how the treatment process may differ. While in the United States, a mother would be told that a fallen

fontanelle is a sign of advanced dehydration. However, both a curandero and a Western practitioner would see mollera caida as a severe condition that requires immediate attention.

# The Healthcare Perspective

- Understanding, diagnosing and treating these conditions or illnesses by clinicians becomes difficult due to the differences in medical and cultural perspectives that must be overcome by health center staff.
- Besides language and cultural barriers serving as obstacles, use of alternative or folk medicine is difficult to determine because patients are very often afraid that healthcare professionals will judge or ridicule them for their belief systems.<sup>35</sup> Many patients claim that they do not inform their doctors of alternative medicine or alternative treatments simply because their doctors do not ask about them.<sup>36</sup>
- Patients also report that they would appreciate their doctors asking what home remedies they are using as treatment, if they remained open-minded, and if doctors had an understanding of folk medicine.<sup>37</sup>
- Another common barrier within healthcare delivery is that the alternative or traditional medicine within the Latino culture is deeply rooted in spirituality and religion.<sup>38</sup> While in the United States, discussing the basis of illness from a spiritual perspective with a doctor or clinician may not always be a welcome gesture.
- A study published in 2010 which interviewed 96 Latino immigrants regarding traditional medicine and religion concluded that 75% thought prayer was an important part of healing. 90% said they frequently pray for their health or the health of their families.<sup>39</sup>
- Healthcare staff can and would benefit from knowledge and training on Hispanic traditional medicine. Whether treatments or beliefs may differ, an awareness of the symptoms associated with certain illnesses and curanderismo practices will facilitate the diagnosis and treatment of a sick patient.

<sup>1</sup> World Health Organization, *Traditional Medicine*. 2008. Available online: <u>http://www.who.int/mediacentre/factsheets/fs134/en/</u>

<sup>4</sup> World Health Organization, Legal Status of Traditional Medicine and Complementary/ Alternative Medicine, 2001. Available online: http://whqlibdoc.who.int/hq/2001/WHO EDM TRM 2001.2.pdf

<sup>5</sup> Mathews, Hazel B., et al. *Medicinal Herbs in the United States: Research Needs*. Environmental Health Perspectives, Vol 107, No. 10, 1999.

<sup>6</sup> Indiana University, Medicine in Ancient Mesopotamia. Accessed on June 9, 2011. Available online: <u>http://www.indiana.edu/~ancmed/meso.HTM</u>

<sup>7</sup> Parkins, Michael D. and Szekrenyes, J. *Pharmacological Practices of Ancient Egypt.* 2001.

<sup>8</sup> Coe, Michael D. *The Maya* (6<sup>th</sup> edition). 1999.

<sup>&</sup>lt;sup>2</sup> Ibid.

<sup>&</sup>lt;sup>3</sup> National Center for Complementary and Alternative Medicine, *Traditional Chinese Medicine*. 2010. Available online: <u>http://nccam.nih.gov/health/whatiscam/chinesemed.htm</u>

<sup>&</sup>lt;sup>9</sup> Dr. Hugo Icu Peren, *Revival of Maya Medicine and Impact for its Social and Political Recognition (in Guatemala)*. Guatemalan Association of Community Health Services. 2007.

<sup>&</sup>lt;sup>10</sup> Hooker, Richard, Washington State University. *The Civilizations in America: The Mexica/Aztecs*. 1996. Website: <u>http://public.wsu.edu/~dee/CIVAMRCA/AZTECS.HTM</u>

<sup>&</sup>lt;sup>11</sup> Nguyen, Paula. *Aztec Medicine*. Pacific Lutheran University. Accessed on 27 July 2011. Available online: http://www.plu.edu/~nguyenpb/home.html

<sup>12</sup> United States Department of Labor, *National Agricultural Workers Survery*, 2005.

<sup>13</sup> World Health Organization, *Traditional Medicine*. 2008. Available online: http://www.who.int/mediacentre/factsheets/fs134/en/

<sup>14</sup> Chance, John K., On the Mexican Mestizo. 1979. Latin American Research Review, Vol. 14, No. 3. <sup>15</sup> Little-Siebold, Christa. Beyond the Indian-Ladino Dichotomy: Contested Identities in an Eastern

Guatemalan Town, 2001. The Journal of Latin American Anthropology, Vol. 6, No. 2.

<sup>16</sup> Early, John D. Revision of Ladino and Maya Census Populations of Guatemala, 1950 and 1964, 1974. Demography, Vol. 11, No. 1.

<sup>17</sup> Hervik, Peter. Narrations of Shifting Maya Identities, 2001. The Bulletin of Latin American Research, Vol. 20, No. 3.

<sup>18</sup> Torres, Eliseo, The Folk Healer: The Mexican American Tradition of Curanderismo, 1984, Nieves Press.

<sup>19</sup> Gameren, Edwin van. Health Insurance and Use of Alternative Medicine in Mexico. Health Policy, Vol. 98, 2010.

<sup>20</sup> Hinojosa, Servando Z., *The Mexican American Sobador, Convergent Disease Discourse, and Pain* Validation in South Texas. Human Organization, Vol. 67, No. 2, 2008. <sup>21</sup> Ibid.

<sup>22</sup> University of Maryland Medical Center. *Herbal Medicine*. 2009. Available online:

http://www.umm.edu/altmed/articles/herbal-medicine-000351.htm <sup>23</sup> Holland, Koren. *Medicinal Plants of the Migrant Workers*. Gettysburg College. 1996. Available online: http://www.ncfh.org/?plugin=ecomm&content=item&sku=4145

<sup>24</sup> Krajewski-Jaime, Elvia R. Folk Healing among Mexican American Families as a Consideration in the Delivery of Child Welfare and Child Health Care Services. Child Welfare, Vol. 70, No. 2. 1991.

<sup>25</sup> Baer, Roberta and Bustillo, Marta. Susto and Mal de Ojo among Florida Farmworkers: Emic and Etic Perspectives. Medical Anthropology Quarterly, Vol. 7, No. 1. 1993.

<sup>26</sup> Krajewski-Jaime, Elvia R. Folk Healing among Mexican American Families as a Consideration in the Delivery of Child Welfare and Child Health Care Services. Child Welfare, Vol. 70, No. 2. 1991.

<sup>27</sup> Baer, Roberta and Bustillo, Marta. Susto and Mal de Ojo among Florida Farmworkers: Emic and Etic Perspectives. Medical Anthropology Quarterly, Vol. 7, No. 1. 1993.

<sup>28</sup> Ibid.

<sup>29</sup> Ibid.

<sup>30</sup> Ibid.

<sup>31</sup> Ibid.

<sup>32</sup> Krajewski-Jaime, Elvia R. Folk Healing among Mexican American Families as a Consideration in the Delivery of Child Welfare and Child Health Care Services. Child Welfare, Vol. 70, No. 2. 1991. <sup>33</sup> Ibid.

<sup>34</sup> Ibid.

<sup>35</sup> Shelley, Brain, et. al. 'They Don't Ask me so I Don't Tell Them': Patient-Clinician Communication about Traditional, Complementary and Alternative Medicine. Annals of Family Medicine. Vol. 7, No 2. 2009.

<sup>36</sup> Ibid.

<sup>37</sup> Ibid.

<sup>37b</sup> Ransford, H. Edward, et. al. *Health Care-Seeking among Latino Immigrants: Blocked Access, Use of* Traditional Medicine and the Role of Religion. The Journal of Health Care for the Poor and Underserved, Vol. 21, No. 3. 2010.

<sup>38</sup> Ransford, H. Edward, et. al. *Health Care-Seeking among Latino Immigrants: Blocked Access, Use of* Traditional Medicine and the Role of Religion. The Journal of Health Care for the Poor and Underserved, Vol. 21. No. 3. 2010.

<sup>39</sup> Ibid.

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