

# INCORPORATING MEXICAN TRADITIONAL MEDICINE “CUR

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For the last ten years I have been teaching a course “Traditional Medicine Without Borders: Curanderismo in the Southwest and Mexico” at the University of New Mexico. This annual summer class is held during the last two weeks of July and has grown from 40 students its first year to over 200.

Students come from throughout New Mexico as well as California, Texas, Arizona, Colorado and sometimes we even have some from other countries. During the first week, I invite local healers and health practitioners to discuss health practices. The second week is exciting and is usually the part most students enjoy most. During that week, more than 25 healers (or curanderos) join us from Mexican cities and communities such as Cuernavaca, Tepotzlan, Amatlan, Oaxaca and Mexico City.

This class and many student discussions has inspired a concept of fusing traditional and modern medicine, similar to what Chinese medicine has done for years, which is to deliver patient care according to the culture, needs and affordability of the person.

As we move into the new millennium it appears that people want to be more in charge of their own health. Throughout the world there is a growing concern that Western medicine may not provide all the answers. This may be why more people are actively seeking alternative treatments to meet and maintain their holistic health needs.

Many recent Latino immigrants and undocumented workers in the United States are uninsured or underinsured, and as a result they are often forced to rely on the charity of municipal healthcare systems. Because of this, some may not seek care when they need it, while others have to go through the humiliating experience of waiting in overburdened emergency rooms to be treated as indigents.

When the indigent poor come to this country, few can afford decent health insurance. Although we live in the richest country in the world, even many Latinos whose families have been here for hun-

dreds of years don't have adequate access to affordable Healthcare. What I would like to do is borrow and adapt a model that I have seen work in Mexico.

Because Mexico is a Third World nation, people there have had to find other ways to get treatment for illness, particularly in the poorest rural areas where there is little access to modern healthcare. One way has been to continue to rely on the folk healers who have provided basic healthcare in rural villages for centuries. However, this practice of traditional medicine is also evident in larger cities of Mexico because of cultural traditions and family customs.

The border country of the U.S. has also had these folk healers, or curanderos, who often worked long, hard hours with little rest and for minimal financial reward—in some cases, refusing to accept anything from their grateful clients except small gifts and enough food for a subsistence living. Curanderismo is a wonderful, ancient tradition that has roots in both the medicine of the Old World and in the wisdom of the indigenous peoples of the New World, particularly the Aztecs and Mayans, who had a vast store of knowledge about the healing and curative powers of herbs and their derivatives.

The trick is to bring Curanderismo in line with conventional medicine—and vice versa, so that folk healers can work in tandem with and supplement modern medicine in the kinds of settings where people may not always have access to conventional Healthcare. The idea is not to replace allopathic and modern medicine and its live-saving technology. Instead we want to make it possible for poor people to be able to go to someone who can tell them whether they have a condition that



Curanderas share their gifts with New Mexico



Over fifteen curanderos, or folk healers, traveled from Cuernavaca, Mexico to Santa Fe last summer to be a part of an Indigenous Healers Festival hosted by the Institute of American Indian Arts (IAIA) Center for Lifelong Education.



The annual festivities and arts holistic treatments

needs immediate medical treatment, or if they can get a folk remedy for minor aches and pains.

I believe that the presence of the lay practitioner will save money within the system, when people who normally have to visit emergency rooms in county hospitals as indigents find that they can solve their medical issue more readily and cheaply by visiting a lay practitioner. Furthermore, many people might find that they do not need to visit an emergency room if the healer can help them.

The Centro de Desarrollo Humano Hacia la Comunidad (a.k.a. La Tranca Institute of Healing) in the city of Cuernavaca in the state of Morelos, Mexico provides the mode for this kind of sys-

tem. Village healers and apprentices come and study with conventional doctors, nurses and experienced, certified curanderos to learn about both folk medicine and conventional medical techniques for diagnosing and treating simple illnesses. They also learn how to recognize serious conditions that require conventional medical care.

What if we set up such a system here for our own poor? What if we had a certification system to train healers in sound practices and send them out to work with the poorest of our poor? Not only could we provide people with on-the-spot help for their illnesses; the healers could also be at the forefront of important, preventative, community health initiatives and health education as well.

# “CURANDERISMO” INTO MODERN MEDICINE



have attended classes at La Tranca Healing Institute, learning about folk healing within the context of the health-care model that I hope to import to the U.S. I envision folding these courses into future pilot efforts toward building a new healthcare model in this country.

For the last three years after the UNM class, a group of ten curanderos has traveled to Denver, Colorado and have delivered a number of presentations to the University of Colorado Health Sciences Center and community agencies. The healers have also been part of a holistic medicine health fair. An active group of physicians, professional, and community members from the Denver area, University of Colorado, and Metro State University have formed a committee in order to research opportunities to create the health model that I envision. My hope is that training lay practitio-

ners alongside doctors and nurses will become part of the standard medical school curricula nationwide. To help as many people as we can, we have to dream big. ❁



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Some of the material for this article was taken from the book, *Healing with Herbs and Rituals: A Mexican Tradition* by Eliseo “Cheo” Torres, edited by Timothy L. Sawyer, Jr.

val features indigenous dance performance and crafts vendors. The healers offer services rooted in the “curanderismo” tradition.

Photos page 24: Dr. Eliseo “Cheo” Torres; Center and above: Seth Roffman

One of the great benefits of having Spanish-speaking lay practitioners go out into the community and offer their services is that people can more readily relate to and communicate with someone who shares their language and culture. This is a big part of why folk healers in the border region remain popular, in spite of the presence of modern medical facilities. Sometimes it gives sick people hope just to be able to talk to someone they feel understands them. In addition, the patient may more readily communicate something to a Latino healer that he would not or could not tell a doctor or nurse who didn't share his language and culture. In some cases, perhaps, this could save lives.

In addition to the three-credit-hour course on the history and practices of Curanderismo that I co-teach at the University of New Mexico, for the past several years UNM students

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Holistic Spanish was created by Scott Shell, author of the book *Teaching Yourself Spanish*. Scott has spent many years studying nutrition, biochemistry and digestive anatomy. Holistic Spanish is available at <http://www.TeachingYourself-Spanish.com>. For questions, contact [scott@advancedlanguagelearning.com](mailto:scott@advancedlanguagelearning.com).