UCLA
UCLA Electronic Theses and Dissertations

Title
Traditional Healing in Mexico

Permalink
https://escholarship.org/uc/item/75n1r9tx

Author
Feldman, David

Publication Date
2019

Peer reviewed|Thesis/dissertation

eScholarship.org Powered by the California Digital Library
University of California

UNIVERSITY OF CALIFORNIA

Los Angeles

Traditional Healing in Mexico

A thesis submitted in partial satisfaction

of the requirements for the degree Master of Arts

in Latin American Studies

by

David Feldman

2019

© Copyright by

David Feldman

2019

ABSTRACT OF THE THESIS

Traditional Medicine in Mexico

by

David Feldman

Master of Arts in
Latin American Studies
University of California, Los Angeles, 2019
Professor Kevin Terraciano, Chair

This research is about the work of a group of healers who continue to work in the twenty first century, in practicing "traditional medicine" in the states of Oaxaca and Puebla, Mexico. It was towards the end of the 20th century that workers from the National Indigenist Institute, representatives of an *indigenismo* movement in Latin America, and were influenced by the international climate that, since the 60s, called for the inclusion of "traditional medicine" as a primary health care practice, as well as for indigenist policies, in terms of expanding the coverage of health services in the areas that Aguirre Beltrán called *regiones de refugio.* This included the two areas that I studied. I document some examples of healers and patients who shared with me their methods and experiences.

The thesis of David Feldman is approved.

Bonnie Taub

Patricia Arroyo Calderón

Kevin Terraciano, Committee Chair

University of California, Los Angeles

2019

Dedication:

To my mother for her continued support and belief in me during her long life. Mimi for her love and giving me the liberty and support to study and to write. Norma for her love, inspiration and knowledge. Lukka, Daniela and Jesse in their instinctive love and support. Not in any order of preference or importance.

Aknowledgements:

The conclusion of a project is actually the end of a collective adventure. Friends and participants, either participate voluntarily or by coercion. Family, friends and colleagues who are induced into the inspiration of this project, knew that during the course of this work I would probably hassle, or eventually bother everyone close to me. It is useless to try, and impossible to acknowledge all the people who I feel honored to have been able to work with, and give my dearest thanks! But, I would like to mention some of those who worked with me closely, always listening attentively to my comments during each stage of the development of this thesis, and then responding, often providing me with excellent perspectives and suggestions, as well as providing data from their own interests and investigations; always evaluating and critiquing my ideas and hypotheses; thus, allowing the work to become multi-faceted. Thank you to you all!

Patricia Arroyo Calderón, Tony Altar, Cyndy García, Inti García, Antonella Fagetti, Tim Knab, Kevin Terraciano, Bonnie Taub, Richard Wolfe, Noemí López, Dora Yari, Luz María de la Torre, Beth Martinez Cruz, Saraí Piña, Kathleen Harrison, Norma Policarpo Carlos, Geronimo Cantec, Shannon Speed, Beth Martinez Cruz, Magda Yamamoto

Y muchas gracias a todos los xjota chjine y los ixtlamatqueh y tepeyolómeh de todas las regiones, hasta la gente más sencilla y pasajera, que me brindaron su tiempo y me tocaron fuerte al corazón. Un fuerte abrazo!

Table of Contents

Thesis first page____1

Second Page copyright__2

Third Page___ii

Fourth Page__iii

Thesis Dedications and Acknowledgements__iv

Table of Contents__v

List of Illustrations__viii

Introduction_1

Thesis__2

Rationale, Argument___6

Objectives___8

Questions and Theory__10

Definitions and Literature Review_13

Methodologies____34

Background of the investigation___39

Theoretical framework__47

Cuetzalan Region__53

Cuetzalan Area Literature Review_54

Nahua Landscape and Historical Description_56

Spirit Energies of the land and human birth__61

Hegemonic Medicine versus Traditional Medicine_73

Perception of Illness and Imbalance_____78

Introduction to Shamanic Healing_83

Teyolía, (toyolía, yolía or iyollo), tonalli, ihíyolotl__88

Some Methods of Healing and Medicine 95

Los Aires / Drafts_103

El Susto / Shock___105

Hot / Cold paradigm___109

Dreaming____115

Bonesetter/Huesero____118

Partera y hierbera/ Midwife and Herbalist___123

Rebecca's view of therapeutic outcome__139

Mazatec Region___143

Background and Introduction 144

Huautla Area Literature Review___151

Traditional Medicine in rural communities___154

Four Directions____158

Mazatec Cosmovision: General____159

Mazatec Cosmovision: Upper and Lower Worlds__170

Mazatec Cosmovision: The Upperworld 172

Mazatec Cosmovision: The Lower World_____176

Forced Syncretism_179

Concepts of the Human Body Spirits____182

Balance_186

Illnesses and causes_____187

Limpias and other rituals_____194

Lectura de huevo / Egg Reading__200

Lectura de maíz / Corn Reading___205

Doña Matilde_207

Veladas_210

Healing Practices__214

Becoming/training to become a shaman or chjota chjine_220

Dreams and entheogens_222

Conclusion___225

Concluding Remarks____226

Bibliography_229

List of Illustrations

1. Black obsidion mirror, INAH, Museo de antropologia, CDMEX.

2. Curandero using a Bic ballpoint pen applying points in the ear.

3. Petroglyph of snakes near Zacatecas, Mexico.

4. Place for making offerings, praying and reflecting.

5. Copy of cave painting depicting a shamanic hunt, INAH, Museo de Antropología, CDMEX.

6. Tonantzintla chapel and church, San Andres Cholula, Puebla

7. Gathering branches for a limpia / cleansing.

8. Buttressed window. Mitla, Oaxaca, Mexico.

9. Doña F and me in Huatla de Jiménez, Oaxaca, Mexico

10. Walking crooked dog. Huautla, Mexico.

11. The burden. Cuetzalan, Puebla, Mexico.

12. Huapango fiddler in the streets of Cuetzalan.

13. Verdant countryside between San Miguel Tzinacapan and Cuetzalan, Puebla, Mexico.

14. Entrance to the small hospital Talkampa in Cuetzalan.

15. Fissures in the rock wall, the stone face of time.

16. Corn hanging to dry in Huautla de Jimenez, Oaxaca, Mexico.

17. Stone temazcal for two people in Huautla.

18. Offerings left at *Chikon Tokoxo* or *Nindó Tokoxo, el güero de la montaña.* In Spanish, *el cerro de la adoración*.

19. Vines growing on colonial building, Instituto de Artes Gráficas de Oaxaca, (IAGO), Oaxaca.

20. Xochipilli, the Nahua god closely associated with agriculture, fertility, the young sun, music, and flowering entheogens.

21. Medicinal herbs sold in the local market in Cuetzalan.

22. Doña Filiberta holding herbs for a limpia.

23a. Doña Jovita finishing a healing session. Cuetzalan area.

23b. Doña Filiberta doing cranial work.

24. Two trees in a field in the Puebla lowlands near Tehuacan.

25. Doña Micaela treating a child for *susto*.

26. Kitchen in curandera's house Cuetzalan area.

27. Dreaming in San Miguel Tzinacapan.

28. Lucio treating a patient's forearm.

29. Lucio treating a patient.

30. Illustration on Micaela's consulting room wall.

31. News clipping from Micaela's consulting room.

32. Micaela's herb garden and storage room.

33. Micaela's birthing room.

34. Man in doorway, Huautla de Jimenez, Oaxaca, Mexico.

35. A friend's kitchen walls. Huautla.

36. Panorama of Huautla de Jimenez.

37. Maria Sabina's pearls and *huipil*.

38. The path to the sacred *Cerro de la Adoración*, *Chikon Tokoxo*.

39. Offering site on Chikon Tokoxo.

40. Red walled door Huautla.

41. Shamanic flight as represented on carving from exhibit Museum of

Anthropology. (INAH)

42. Doña Mary Huautla.

43. Praying at a sacred site.

44. Doña Mary's consulting room and altar.

45. Egg after reading with protective leaves over the opening.

46. Evidence of pre-Hispanic divination from Borbonicus codex, Mexica ancestral couple seated within a sacred enclosure --- divination, bloodletting instrument, incense.

47. *Derrumbe* mushrooms, *ndi xijto,* Huautla.

48. Datura arborea, Toloache, Jimson weed, in front of house in Huautla.

49. Sunset from the Sierra near Huautla.

*All photographs taken by the author.

Introduction

Thesis

In Mexico, practitioners of traditional medical systems have a wealth of knowledge and therapeutic practices. Its effectiveness is proven, for hundreds of years the rural population has depended on these traditional healers, men and women with expertise in the various branches of traditional medicine.

As a whole, the medical systems of the indigenous peoples of Mexico share a common vision of illness etiology, which also characterizes the way many traditional cultures around the world manage and treat. Disease is usually the result of relationships that human beings establish with each other and with their surroundings, the world of nature and the world of divinities.

In general, these principles are in a state of dissarray due to neglect and abuse especially with regard to the environment. Shamans and most traditional practitioners continue to practice in the rural areas that I researched in Mexico. I met very few apprentices however, as no young people are continuing to learn and acquire the principles of traditional healing from the current masters.

In traditional medicine, logical rational empirical thinking and magical mythological symbolic thinking that distinguish human beings as cultural and social beings are combined.

Antonela Fagetti classified the illnesses into the following five categories: The breaking of a taboo, that is, the transgression of a social mandate or divine, the non-observance of some moral and religious perceiver, sorcery, founded on the power of

manipulation of extra human forces, the instruction of a hex object, when something strange to the person is introduced to his body, the instruction of a spirit when an invisible and ethereal is introduced or intentionally sent to the body of the victim and finally the loss of the soul is the loss of an entity linked to the welfare and life of the person. (Fagetti, 2010)

Both are expressed in a set of concepts, beliefs, representations and symbols that underlie the praxis and from which derive a series of therapeutic practices. From the knowledge of the properties of plants to complex therapeutic rituals, each element that conforms to traditional medicine occupies a specific place within the system, that is, it has its own function that refers to the etiology of diseases and the principles that govern their cure.

Families from the more rural communities in Mexico have traditionally depended on the local healers who have developed a reputation and provide the necessary rituals and herbal treatments that are reassuring and contextualized within the patient's beliefs or cosmovision. In another context, of the sometimes-impersonal clinical biomedical care, affecting many urban young people worldwide, have been seeking more traditional and less invasive forms of preventative and curative medical care. They go in search of traditional therapies, including in the Nahua and Mazateca, areas to reconfigure their knowledge base by having contact with traditional practitioners in these areas. These two situations have repercussions that result in economic, social and cultural impacts on the communities in and around Cuetzalan and Huautla. To solve this central hypothesis, I present the following secondary ones:

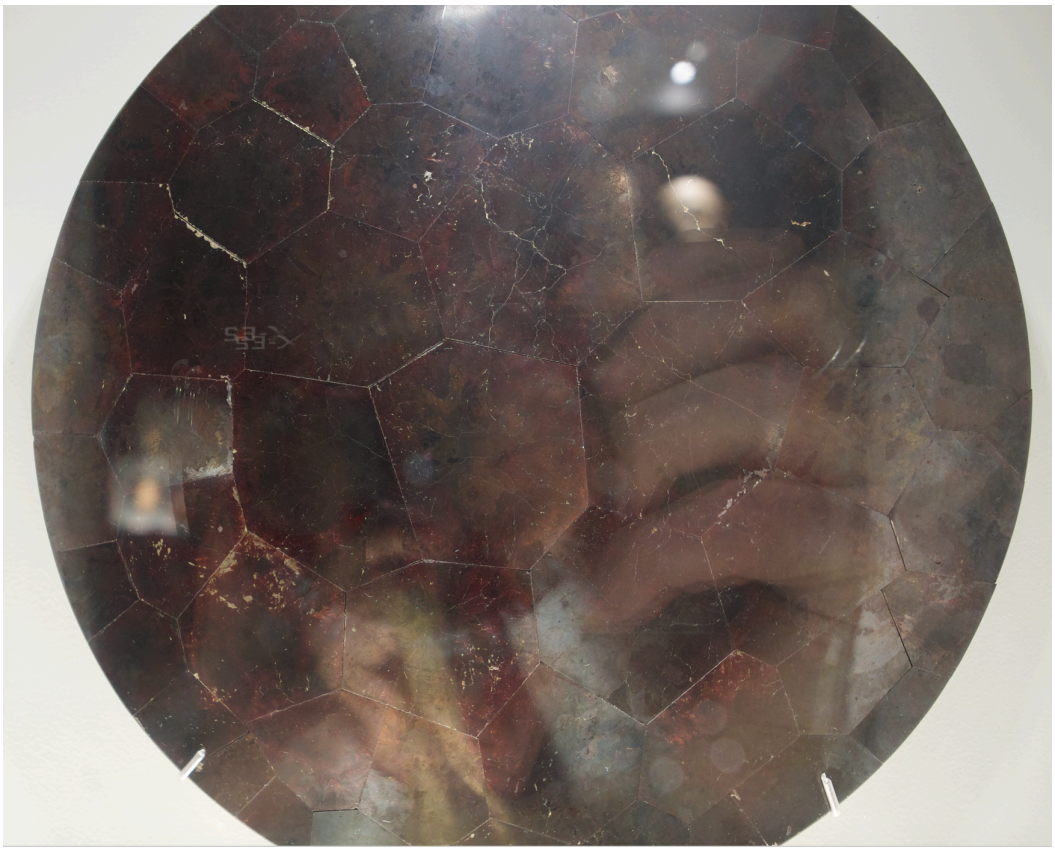
- In recent decades, traditional medicine practitioners have been incorporated into

health stations, clinics and hospitals that have been built to provide care for the rural population with limited resources that inhabit the communities furthest from the municipal capitals. However, this incorporation does not entail, nor receive the same status as allopathic medicine.

- ("Pese a los repetidos esfuerzos del clero por extirpar los elementos 'supersticiosos', 'mágicos', 'idólatras' de la medicina autóctona y africana, la persistencia e integración de ambas con la etnomedicina popular europeo se vieron favorecidas en gran medida por la consistente presencia en esta última de creencias y prácticas de análogo hechura.") (Lupo, 1998, p. 226)

- Since there is today a crisis of health and identity, the young urban population often turns to experiences such as shamanism to find in it a strong reference that gives meaning to their lives, with the exercise of demolishing and rebuilding imaginary.

- Tourism impacts the population socially and changes traditional medicine into a commodity.



1

Rationale, Argument

Given that globalization and mass media have changed most perspectives in the world, it has become ever more important to look carefully at some of the traditional forms of healthcare in countries where the allopathic medical industrial complex does not serve everyone well, particularly the more marginal populations. This applies not only to the economic sector but also the social one; alluding to the fact that research could be done rethinking some of the pertinent categories such as shaman, doctor, researcher, imaginary; categories that appear somewhat rigid.



2

In the case of Cuetzalan and Huautla de Jimenez, many scholars have undertaken the task of understanding the ritual framework that surrounds traditional medicine, however, very few have looked at the social impact of advertising and government promotion of medical programs on the credibility of traditional medicine

as a viable option. Therefore, it seems pertinent and relevant to me that a study be done of the state of the art of healing in the rural communities of Mexico.

Objectives

Objectives:

Mexico, being a multi-ethnic and multicultural country, maintains a wealth of knowledge and therapeutic practices on traditional medicine that need to be documented, investigated and then "incorporated" into allopathic medicine to ensure greater penetration among the populations that will benefit.

Because the relationship of the health sector with the indigenous population occurs in a permanent way, this thesis has as one of its main objectives to foster a closer approach and understanding of this relationship through an intercultural lens.

Since traditional medicine is a complex phenomenon, this holistic approach aims to ensure that health care in marginalized areas guarantees greater success in its objectives, where the benefits are direct.

This project aims to document, analyze and understand traditional medicine as practiced today in the Cuetzalan area and in the Huautla de Jiménez area of Mexico. Accounting for the many practitioners of this ancient form of healing as well as the syncretism that has taken place.

Specific objectives:

- Perform ethnographic work through participant observation and in-depth conversations to realize how healing is lives and is practiced through *parteras, hueseros and shamanes*, etc. by principally the Nahuas and Mazatecos in the respective communities.

- Understand tourism as a multidimensional cultural process.

- Attempt to understand from both points of view, the Mazateco / Nahua, and the Western researcher, myself.

- Find out what the use and exchange value is of the entheogenic fungi beginning with the arrival of the first tourists to Huautla.

- In the current perspective of traditional medicine, to look at the influence of the past and how colonization and contemporary tourism and globalization have come to influence what today is traditional medicine, combining Europe, Africa and pre-Hispanic America.

- Based on the ethnographic data obtained, analyze the relations between allopathic medicine from the medical industrial complex (from public and private providers) and the traditional practitioners from the Mazatec and Nahua regions.



3

Questions and Theory:

At the beginning of this research, I had several questions relating to treatment and remedies within the ontology of traditional medicine.

- How do communities whose culture links many illnesses to soul loss or soul capture (by a spirit) or to *susto* (fright) or *mal aires* (harmful winds), determine the source and result? Subsequently, how do traditional practitioners treat these ailments?
- For those who fall ill, what consequences do they suffer if not treated in an allopathic clinic?
- What role does cosmology play in understanding certain ailments?

The dilemma posed by modern clinical care can be put quite easily into the following terms: calling disease the primary malfunctioning of biological and psychological processes; calling illness the associated psycho social and cultural responses to disease, that is, how the patient, his family, and social network react to his/her disease. Ideally clinical care should treat both disease and illness; however, allopathic care has moved away from treating illness whereas in indigenous systems of healing there is a predisposition to treat illness initially and monitor the effect on disease.

In Mexico there are obviously a wide cross cultural and cross sector

variations in healing from healthcare systems. Cultural patterning of illness is a therapeutic activity while healing efficacy is not a straightforward resultant but rather is determined by valuations which are tied to the beliefs and values of different sectors of healthcare systems which therefore might be discrepant. Healing is viewed differently across cultures and in different sectors of healthcare, which is not the same thing for practitioner and patient. Conflicts between different views of health care needs and objectives result in problems with clinical care. Treatment must be related to specific cultures and sectors.

I began to look at these issues and research questions between 2016 and 2018, beginning to address them in a body of field research limited primarily to the area around Cuetzalan, Puebla including specifically, San Miguel Tzinacapan and San Andrés Tzicuilan and some work in Cuacuila. My second area of research became the area around Huautla de Jimenez, Oaxaca, including the area around San José Tenango, San Bartolomé Ayautla and San Mateo Yoloxocitlán. I was hoping that these questions would help document some of the ways that traditional practitioners employed dreams. However, it quickly became clear to me that many methods were interrelated and that it would be very difficult to isolate dreams from the total healing process. Therefore, I have included, through the interview process, many of the therapies that I observed and experienced.

For this research, I made a number of short field visits of about two-three weeks each. However, my research on Mazatec culture, especially in the area of cosmovision and rituals began in 2017. The information presented here was obtained in interviews that were often conducted in Mazatec or Náhuatl with translation into Spanish, although most practitioners that I interviewed also spoke Spanish.

I basically carried out three field projects that were held between the months of

March 2016 through June 2019. Other visits were made on important dates in the region such as the "Todos Santos" or “Día de los Muertos.” Once the field work was completed, a careful review of the ethnographic material allowed me to answer the questions posed and to write the chapters that make up this research.



4

Definitions and Literature Review:

Traditional medicine is any method of health care that has ancient roots, cultural affiliation, trained healers and with a theoretical construct; developed before the era of allopathic medicine, and based on cultural beliefs and practices passed on from generation to generation.

Some traditional systems include Ayurvedic medicine, homeopathy, ethnomedicine worldwide, shamanism worldwide, and traditional Chinese medicine. The World Health Organization defines traditional medicine as the sum total of the knowledge, skills, and practices based on the theories, beliefs, and experiences indigenous to different cultures, whether explicable or not, used and continue to use in the maintenance of health as well as in the prevention, diagnosis, improvement or treatment of physical, emotional, spiritual and mental illness or malaise. (Qi, 2013).

This research is an attempt to document the practices of some Mexican traditional healers, also called *curanderos* or sometimes, shamans, and the relationships they have with their patients, who are often poor and do not trust Western medicine.

In this research I will discuss various forms (manifestations) of traditional medicine as practiced in Southern Mexico, but my focus will be on shamanic healing. Traditional medicine is part of that medicine whose general purpose is to treat diseases and preserve the health the people; it is essentially a set of beliefs, representations and symbols (critics call them superstitions) that constitute knowledge recognized and applied in therapeutic practices and rituals by specialists, and originally transmitted by oral tradition through the generations. It is made up of as many practices as there are

Mesoamerican cultures, each one carrying on with its own knowledge and practices, including those from Western medicine. I also explore the aspect of traditional healing that involves the spiritual and emotional domains and how they might be connected to organic or physical illnesses and then, what resulting treatment plans are possible for treatment. I will explore how health, illness, and healing form part of a cultural system, a worldview.

For therapeutic application, traditional medicine often uses a combination of a physical application, such as a medicinal herb mixture applied to a knee for external/corporal relief and/or, also taking medicinal herbs in tea or as an elixir for swelling. Secondly, words are said about the patient orally, to connect with energies, a candle is lit and copal is burned. These two elements of healing are inter-related and complementary.

The traditional doctor, from experience and his/her empirical knowledge, can treat many of the physical ailments of the body from injury or impairment. Spiritual and emotional thought are often employed for healing, especially if it is thought that there is a spiritual and/or emotional disorder and employed as part of the treatment, since the body and mind, spirit and matter, are not separated as in Western thought. (Fagetti, 2003, p. 33)

I began my investigation by exploring the perspective of Mircea Eliade, historian of religions who has contributed a classic text on the subject, *Shamanism: Archaic Techniques of Ecstasy*, 1951. In this book, the author addressed the phenomenon of shamanism from a perspective of the history of religions. In the preface to the text, Eliade makes it clear that his job is to try to synthesize and represent the psychological, sociological and technological aspects of Shamanism providing for an integrative vision. And synthesize them and offer an integrative vision of what he calls a complex

religious phenomenon. (Eliade, 1964)

In general, he presents significant cases of different non-Western societies that resort to various techniques so as to achieve magical flight or ecstatic trance. The text of the day does not mention in depth ecstasy techniques in which *plantas sagradas* sacred plants are used because at the time of his studies there was very little research done. However, his contributions on magical flight through other techniques are significant to this day. For example, today we know that the ingestion of entheogens is only a means to induce a sacred journey, or to accelerate access to the effect, but that it can also be induced by other techniques such as dance, singing and various forms of percussion among others. This was my interest, in comparing two geographically close cultures but whose healing techniques involving altered states of consciousness from very different means. The Nahua do not use any *plantas sagradas* whereas the Mazatec use a variety of them to achieve this state.

Eliade focuses a lot on the shaman's functions in North Asia. Some analogies can be drawn between the figure of the Mazatec *chjota chjine* and the Nahua *ixtlamatki* or *tepahtiani,* with the Asian shaman. Both are related to the magical religious life, both practice different forms of altered states of consciousness and are responsible for the religious experience. However, I would not call the Nahua shamanic healing an ecstatic state. Likewise, the Mazatec shaman does not absorb all religious activities in ecstatic flight, but shares these with the Catholic symbolism and saints. Nonetheless, the figure of the shaman remains indispensable.

Regarding this notion of the various practices and ritual specialists or shamans, Antonella Fagetti has explored and documented the diversity of shamanic practices of different indigenous peoples of Mexico. She points out that attention should be paid to the particular characteristics of the practices of each ritual specialist or

shaman, because they have similarities but there are also significant differences. She also points out the importance of referring to these specialists with the name that each society gives them in their native language.

For the purposes of this investigation I agree with Fagetti's position that one should speak of shamanism within the different indigenous cultures and languages, and that therefore, when studying the subject it is necessary to make reference to the name given to these specialists in their native languages; only then can we begin to understand what this practice and specialty is within specific cultural contexts. In this investigation I refer to the Mazateco or Nahua shaman using the words "wise men and women" or "ritual specialists" or simply "shamans", as a translation of the Mazateca *chjota chjine* or "person who knows" or "people of knowledge," also *chjon cojine* or "wise woman who knows". In Nahua *ixtlamatki* or "he who knows how to see." Again, my research is not a contrastive analysis but rather an attempt to see patterns and similarities in two geographically contiguous areas whose practices are very similar and have probably survived from pre-hispanic time.

So, what is a shaman? It is a generic term used to identify individuals whose psychic and medium-like powers are used for healing. They occur in many cultures around the world by different local names but I will use the term shaman generically here. In fact, on this point there is a remarkable difference of opinion. On the one hand, the shaman has sometimes been called "a mentally deranged individual" and "an outright psychotic" (Devereaux, 1961), "a charlatan, epileptic and, perhaps most often" (Kakar, 1991) a manic or schizophrenic (Noy, 1969; Pizzani, 2012). These may be outward appearances but what is really important to note is that the perspective or the way of knowing, or the way of seeing, that shamans engage in, is an animistic vision; others call it perspectivism (De Castro, 1998) and other academic paradigms applied to

these intuitive abilities.



5

Shamanism has been present in the world for thousands of years, and has appeared intermittently, often with direct visual references in cave drawings, rupestrian representations of shamanic practice, or later by verbal written descriptions. Many claim that shaman is a Tungus word originating in Siberia and that the origin of these practices come from this relatively isolated cold region. Sometimes referred to as witch doctors, medicine men/women or spiritual guides, they often engage with energy forces, spirits or significant other-than-human-beings to help them fulfill their roles as healers both spiritually and physically.

> …the conception, common to many cultures, of the continent to which the world is inhabited by different sorts of subjects or persons, human and non-human, apprehend reality from different points of view. (De Castro, 1998)

It is the oldest and most widespread system of mind-body healing known. (Harner, Mishlove, & Bloch, 1990)

> In the last twenty years these concepts have emerged as central theoretical innovations of classical structuralist assumptions in Lowland South American anthropology (Århem 1996, Descola 1992, 1996, 2005, Stolze Lima 1999, Viveiros de Castro, 1998 (Halbmayer 2012).

But we always come back to the question: What is a shaman? Mircea Eliade, gives some historical context of what he considers to be the place of origin:

> Throughout this immense area that includes central and northern Asia, the magical-religious life of society revolves around the shaman. This does not mean, of course, that he is the only manipulator of the sacred, nor that religious activity is totally absorbed by him. In many tribes the sacrificing priest coexists with the shaman, not to mention that each head of the family is also the head of the domestic cult. However, the shaman continues to be the dominant figure: because in this whole area, where the ecstatic experience is considered as the religious experience par excellence, the shaman, and he alone, is the great master of ecstasy. A first definition of this complex phenomenon and perhaps the least risky, would be this: Shamanism is the technique of ecstasy (Eliade, 1972).

It should be noted that semantically many cultures have local names for what we know as “shaman," and in fact, there is such a wide range of names for similar and enhanced practices, which suggests that there might be parallels between these practitioners, as has been suggested by other researchers including Michael Taussig, Michael Ripinsky-Naxon, Victor Turner, Eduardo Viveiros de Castro and Nuhrit Bird. Eliade asserts a close connection between the myth of healing, through the cosmogonic myth to the origin of the sickness and its appropriate treatment. Aguirre Beltrán claims that the shaman’s and (sometimes *curandero’s)* principle role in Mexico is one for healing through “trance” or through dreams. (Aguirre Beltrán, 1987) The concept and observation of ecstasy, as described by Eliade, as a characteristic of shamanism is not always demonstrated overtly in the shamans that I have observed in Mexico. Perhaps, because these energies and connections are channeled in the healing process in less flamboyant ways (my observation). Or, perhaps his interpretation infers not so much bliss but more a sense, as the Random House dictionary defines it, "of being taken or

moved out of one's self or one's normal state and entering a state of intensified or heightened feeling."

> But whatever its derivation the term “shaman” has been widely adopted by anthropologists to refer to specific groups of religious healers in diverse cultures who have sometimes been called medicine men, witch doctors, sorcerers, wizards, magicians or seers. However, these terms do not adequately define the specific subgroup of healers who fit more stringent definitions of shaman such as the one to be used here. The meaning and significance of this definition, and of shamanism itself, will become clearer if we examine the way in which our definitions and understanding of shamanism have evolved over time (Walsh, 1989).

In many cases, many languages do not hold a Western concept for shaman, either because they did or do not recognize individuals who act in what we today consider a “shaman-like capacity”. I even wonder if both temporally and culturally Tungus speakers interpret “shaman” to mean the same thing today as originally? Probably not, as practices have evolved and adapted to the current world. This socio-linguistic analysis will not be dealt with specifically in this paper but left for a further investigation. The question remains as to how the word “shaman” has taken on a “new” meaning and carries additional associations and connotations in its contemporary Western cultural manifestations. Why have shamans over time been linked to magic and sorcery in addition to traditional healing? Has this been a construction of a Western interpretation of indigeneity? In this sense perhaps, it carries what Europeans have constructed in their interpretation. Today, these connotations may not be applicable, since film and television have certainly expanded upon these two elements in their representation of shamans by glorifying, stereotyping and dramatizing them. To take these words through academic analysis will not make them easier to define but rather, provoke philosophical interpretations of our reality and the reality of shamans as they practice today. Reality as I refer to it could be referred to as cosmovision or world view.

In order to broaden the scope of the social construct of shamanism, one can resort to the work of Michael Taussig, in *Shamanism, Colonialism, and the Wild Man. A Study in Terror and Healing*. His study was on Shamanism in the Colombian Amazon where he observed that the shamanic practice in the area was modified as required by the socio-cultural context. In his study he shows us how the Shamanic practice there does not always serve to bring health or ward off disease, but quite the opposite, it aspires to cause acts of destruction or damage; and has acquired characteristics that respond to the logic of the contexts in which it is practiced.

Taussig refers to what he calls an "implicit social knowledge," which he describes as a form of thinking that reveals the Other, the envious other and the colonial other. He claims that sorcery and shamanism always present modes of locally built and acquired experience and image formation in which this social knowledge is constitutive. Since the practice of shamanism goes beyond the culture and the individual, it is necessary to have an implicit social knowledge that can be established by recognizing the "Other."A minimum of implicit social knowledge or knowing how to recognize the Other is necessary in order to exercise a certain type of power over him.

> Quite often in the Putamayo, listening to people in a healer's home talking about life and problems, I get the feeling that the sensitivity to envy is as ever present and as necessary as the air we breathe. This sensitivity is not merely a foundation of what we might call shamanic discourse, organizing a sense of the real and of personhood; it can also be thought of as a sort of sixth sense or antenna of what I call "implicit social knowledge" slipping in and out of consciousness as a constantly charged scanner of the obtuse as well as the obvious features of social relatedness. Acquired through practices rather than through conscious learning, like one's native tongue, "implicit social knowledge" can be thought of as one of the dominant faculties of what it takes to be a social being. We can think of this knowledge as a set of techniques for interpreting not so much the seemingly direct as the various shades of meaning of social situations—the situation as henry James depicts the intertwining multiplicity of possibility in group affairs, the splitting and the further splitting of meanings and suggestions in such a perfusion of gatherings and precisions to not only society but life itself is turned about for reflection. (Taussig, 1987, p. 393)

Western academics first noticed shamans in America among indigenous people based

on the reports of travelers and Spanish colonizers, including the early writings of Hernando Ruíz de Alarcón and Bernardino de Sahgún in Mexico. It appears that indigeneity was integral to the early concepts associated with shamanism. It seems evident, that some Spanish practices that coincided with Native practices, were upheld and codified, while truly indigenous practices were usually either forcefully repressed and practitioners punished or forced into secret practice, being viewed by the colonizers through a Christian lens interpreting shamanism to be devil worship and dangerous. Much may be left to conjecture with respect to the survival of these early religious and shamanistic practices which initially did not become mixed with European ideologies. Later, this changed through syncretism, combining Catholicism and indigenous beliefs. Catholic saints often became coded representations of core indigenous beliefs and practices. (Wasson, 1961).

As the category of shamanism is being reconstituted and revitalized by academic and popular interest, it is being deconstructed within the field of anthropology. Among cultural anthropologists there is widespread distrust of general theories about shamanism, which run aground in their efforts to generalize. The category simply does not exist in a unitary and homogeneous form, even within Siberia and Central Asia-the putative homeland of "classical shamanism" (224). Holmberg (102: 144) claims that "shamanism remains intractable as a general field of study, in part because disparate practices have been disassociated from larger cultural contexts and linked to universal motivations." Likening the illusion of shamanism to the illusion of totemism that Levi-Strauss brilliantly dismantled, Holmberg himself speaks of a plurality of "shamanisms," thus disrupting temptations to universalize (101). (Atkinson, 1992)

As a result of this systemized and violent repression many shamanic practitioners were forced to practice their healing and religious beliefs by incorporating Catholic or Christian icons and symbols into their tradition thus establishing a coded language. An example of this syncretism is exemplified in San Andrés Cholula at Tonanzintla. In this Catholic temple indigenous sculptors and painters constructed and represented Nahuatl paradises from their mythology Tlalocan, Cihuatlampa, Huiztlampa, and Tlahuiztlampa, but represented as cherubs and Christian saints. Cihuatlampa detailed below is the paradise of women warriors, women who die in childbirth. *Cihua* or *Cihuatl* is woman in Nahuatl. This was common practice throughout much of central and southern Mexico although many of the more remote regions, such as those in this study, were able to retain their traditional religious and healing practices.



6

Early explorers and later anthropologists were very struck by the shamans' unique communication with the non-physical realm. They observed that many in the tribe might claim to honor, to see, or even be possessed by “psychic entities”. However, only the shamans claimed to have the ability to work with them and to be able to request alliance, establish connection with and mediate with them for the benefit of the community or of the infirm patient.

> More recently, Taussig (Taussig, 1987, p. 236) declared that "shamanism is ... a made-up, modem, Western category, an artful deification of disparate practices, snatches of folklore and overarching folklorizations, residues of long-established myths intermingled with the politics tics of academic departments, curricula, conferences, journals, juries and articles, [and] funding agencies." Despite such dismissals, the topic of shamanism has proven to be remarkably resilient. (Atkinson, 1992, pp. 102, 146)



7

Today, many indigenous cultural groups are careful about the dissemination and appropriation of traditional religious ceremonies by outsider groups, especially those using online media. Many use protective tools such as *Mukurtu* with specific cultural protocol safeguards that protect heritage materials. Many rituals, healing practices, verbal songs and prayers have sought protection and consider their traditions intellectual property (Calavia Sáez, 2013). Likewise, neo-shamans or non-indigenous shamans have been strongly criticized and labeled "plastic medicine men/women" for not being authentic and taking on practices and traditions that many Native Americans and Indigenous Mexicans feel should not be engaged in by non-indigenous or mestizo people. In a similar way, academia is at times a colonial process of appropriation and interpretation. In this way, has indigeneity become a constructed paradigm and a

commodity? All identities should be negotiated. This negotiation is of great importance in trying to interpret shamanisms with relation to the communities and traditions that they continue to serve. In so doing, indigeneity should not be used to generalize or stereotype the diversity of world-views and lifestyles, labeling them in the process.

> As the category of shamanism is being reconstituted and revitalized by academic and popular interest, it is being deconstructed within the field of anthropology. Among cultural anthropologists there is widespread distrust of general theories about shamanism, which run aground in their efforts to generalize. The category simply does not exist in a unitary and homogeneous form, even within Siberia and Central Asia-the putative homeland of "classical shamanism". Holmberg (102: 144) claims that "shamanism remains intractable as a general field of study, in part because disparate practices have been disassociated from larger cultural contexts and linked to universal motivations." Likening the illusion of shamanism to the illusion of totemism that Levi-Strauss brilliantly dismantled, Holmberg himself speaks of a plurality of "shamanisms," thus disrupting temptations to universalize. (Atkinson, 1992)

It should be noted that through evolution shamanism has obviously been employed by many modern healers as a means for healing. This natural evolutionary process does not imply that non indigenous people ethically employing these practices want to be or are representatives of a specific indigenous tradition, but rather independent healers in this world.

I will not generalize but speak of indigeneity and comparable shamanic practices among principally two groups in Mexico. I will focus on shamanic healing practices of specific healers in Oaxaca and Puebla, Mexico, rather than try to establish general practices that would apply to all shaman everywhere. However, I will make reference to studies that describe similar healing practices in other parts of America and the world in an attempt to show comparative methods.

The Oxford dictionary definition of 'indigenous' comes from Latin *indigena*, 'native' originating or occurring naturally in a particular place; native: i.e. the indigenous peoples of Siberia. Thus, we have many ways of interpreting this word. For the purpose of this paper, I will define the indigenous inhabitants as the

original peoples of Mexico, who may have come across the Bering Straits from Siberia to America and developed their own practices and belief systems in unique isolation. (Sharon, 1978) Although some will argue that Siberian traditions (including shamanism) were also brought across the Bering Straits.

Shamans perform ceremonies and relate to spirits or "other-than-human-beings" in various ways, usually with words, sometimes without, sometimes while using entheogens, it is usually at night but could be in the day. Much depends on the individual and may be influenced by what the ailment is and what day of the month it is (Scuro & Rodd, 2014). How and when do shamans work with spirits? Do spirits control or is there a mutual understanding. These references do not really define 'spirits' but allude to them. Some suggest that the spirit is a being rarely seen by most people, only to shamans.

Others define spirits as being believed by shamans and the communities they serve (Bourguignon, 1973; Kehoe 2000). All in all, if these spirits are to become "real" in the canons of Western science, few academics appear to accept their reality because there is no scientific "proof" that can verify their existence. This is the classical argument between science and metaphysics: how do you prove a feeling of connection, or develop a relationship? Debate exists as to whether there are sociological or psychological practices at play in determining what is meant to shamans by 'spirit' (López Austin, 1980, 1989). There appears to be a disconnect between understanding and thus acknowledgment of shamans but not of spirits, although their operation is intrinsically connected.

The conceptions of these psychic entities are fundamental in many of the systems (cosmovision) of any complex culture and to claim to understand the ideology, and to pretend a historical understanding of the thought of a given society without

having specified at least the general features of the psychic entities, is to invent in a vacuum.

It might be best to use an indigenous term for spirit rather than try to translate the word from a native language to academic English or other language in that it is misleading to use the term 'spirit.' I will use these terms in the individual chapters on the Mazatec and the Nahua. These metaphysical entities may be the manifestations of relationships with animals, and or other-than human forces. These entities may be as yet unknown to the canons of Western science and may be sufficiently ontologically distinct that they require another frame of reference (VanPool, 2009; Platvoet & Molendijk, 1999). The fact that shamans describe and explain such relationships with other-than-human-beings without using this term therefore makes it worthy of our consideration as it may be a construction by Western non-practitioners or a limitation imposed by our worldview. (Harvey-Wilson, 2000). Irving Hallowell describes this conundrum in trying to describe other than human processes in the book The Ojibwa of Berens River, Manitoba:

> In Warren's Dictionary of Psychology 'person' is defined as a human organism regarded as having distinctive characteristics and social relations. The same identification is implicit in the conceptualization and investigation of social organization by anthropologists. Yet this obviously involves a radical abstraction if, from the standpoint of the people being studied, the concept of 'person' is not, in fact, synonymous with human being but transcends it. The significance of the extraction only becomes apparent when we stop to consider the perspective adopted. The study of social organization, defined as human relations of a certain kind, is perfectly intelligible as an objective approach to the study of subject in any culture. But, if the worldview of a people, persons as a class, include entities other-than-human-beings, our objective approach is not adequate for presenting an accurate description of the way a man in a particular society, sees himself in relation to all else (Hallowell, 2002).

In the essence of this quotation, relationships may exist between persons and entities similar to persons/humans and they may interact and maintain relationships with such persons that may assume different forms, but these conceptions may not be

accessible to people with another worldview.

> Unlike many native North Americans, the Maya do not have a category of person which includes humans and certain animals but instead draw a sharp line between human beings (*winnik*) and animals (*ba'alche'*), related to the presence or absence of what they see as verbal and motor articulateness. Animals cannot speak and do not normally walk on two legs, nor do they move about in an "orderly" fashion. A person who has been robbed and cannot go to market could be said to be have been reduced to the animal level. Further, a person who suddenly cannot speak or whose limbs lack normal articulation is behaving like an animal. This can happen either because of alcohol, or because of hysteria in the form of a conversion reaction, manifesting itself as a sudden loss of speech, deafness, blindness, paralysis of a limb, or as loss of feeling or paralysis in one side of the body. (Tedlock, 1987)

Perhaps it would be more accurate to call them 'tree persons,' 'sage persons' or 'rock persons' or 'animal persons' rather than 'spirits.' 'Spirit' may be too general and compromised of a term and might actually distract or misdirect the attention from the intended meaning of the type of person that a shaman may join with. This is why it is so important to understand the local discourse and the ideologies through which they are interpreted and linked to an intersubjective world. Hallowell, an early psychological anthropologist, anticipates the very recent ontological turn of contemporary anthropologists like Edward Kohn (2013). 'Spirit' suggests that shamans view all persons as one kind and places them in a purely metaphysical realm with little distinction among the various entities, although, the metaphysical energy, absent of form, is also acknowledged. When shamans talk to beings that are unrecognizable or acknowledged by science, they do not consider them to be ontologically different from, or superior to "commonplace" persons (Kohn, 2013).

I have departed a bit from my original premise of not wanting to generalize or to put too many practices as being typical of all shamans. However, it is important to point out what Eliade asserts, that what unifies the diverse group of shamans is the application of ecstatic techniques including trance and possession (in English, "trance"

may be misleading). These states are often achieved with the aid of rhythmic sounds and movement involving various percussive instruments such as drums, sticks, rattles that are often accompanied by dancing and most important, chanting. Furthermore, some shamans use "trance" or 'travel' 'journeying' sometimes aided by the consumption of entheogens or psychotropic substances as a means to attain this state and accentuate their sensory ability to heal or cure through words and performance. Often, spirit helpers provide the energy and power necessary to "enter" the body of the afflicted person. Consideration should be taken, as the word 'hallucination' implies a false visualization or illusion, implying a drug induced illusion or delusion. In my opinion, this is a Western perception of entheogens and is not truly an accurate portrayal of the perception gained from a shaman's 'aided sight' (Schultes & Hofmann 1979; Ripinsky-Naxon, 1993; McKenna, 1993). It should be noted that shamanic rituals do not always involve ecstatic states, as the one described by William Hanks (1996) in the Mayan rituals that he observed in the Yucatan.

Turning now to the so-called neo-shamans of today, there is a tremendous diversity in practice worldwide by neo-Shamans, using indigenous traditions, but not exclusively from the North and South American continents. Niue Rao Centro Espiritual, Global Ibogaine, *resetme*, Temple of the Way of Light, Center for Shamanic Studies are some of the many groups involved in vision quest, healing and power quests. In many cases, neo-shamanic practices romanticize indigenous shamans under more consumer oriented and commodified practices based principally on self-growth and self-empowerment (Atkinson, 1992; Scuro & Rodd, 2014). Although there are groups whose objective is not purely financial and whose members remain respectful and grateful for their ability to practice an ancient tradition. Cultism is not always present in these groups (DuBois, 2011).

In some cases, groups directly appropriate indigenous traditions and obtain financial gain from these practices, despite clear opposition from groups such as the American Indian Movement. Native American spirituality is a sacred practice and if abused or misappropriated by those elders teaching non-natives without tribal acknowledgment and support, are subject to censor or condemnation for the commodification of their spiritual practices. Many shamans cannot turn to Native American practices, but few use the term 'shaman' as an honorific title for those individuals whose efforts are focused on community education and healing rather than self-oriented personal development and financial gain.

One example of this precarious road is illustrated in the work of Alberto Villoldo and Douglas Sharon. Villoldo has conducted shamanic expeditions to Peru and Latin America for many years to meet and practice with shamans, but originally worked with the famous Peruvian shaman Eduardo Calderón, who was also Douglas Sharon's principal collaborator. Sharon wrote about Calderón in his book, *Wizard of the Four Winds: A Shaman's Story*. Following publication some scholars have claimed that Calderón was commodified by Alberto Villoldo, raising the question of Sharon's credibility and casting doubt on his research. Donald Joralemon has researched and commented claiming that Calderón had become "a clown in the new age circus" (Joralemon 1990). He further points out that Calderón has become a type of hybrid shaman, responding to and practicing a blend of traditional Peruvian healing with neo-Shamanic, New Age beliefs initiated by Alberto Villoldo. This created a number of controversies (Joralemon, 1990) some directed at Calderón for buying in to the commodification of his traditions, and at Villoldo for becoming a travel agent to the 'spirit' world. What is interesting is that in later articles, Joralemon reconsidered his criticism a bit and describes his interest in how Calderón was able to move between

local traditional Peruvian practices and neo-shamanic modes of understanding the spiritual realm. On one hand, he dealt with local Peruvians who understood his practice but, in another context, he interacted with neo-Shamans who had little knowledge of traditional Peruvian healing. To them he presented his tradition in a way that neo-shamans could understand, similar to Harner's universal shamanic concepts. Today the shaman is more generally treated as a possessor of special powers that make him a unique mediator between different worlds (Cunha, 1998).

The idea of adapting or integrating to changing cultural generations and cultural traditions is not new and probably something shamans have had to do repeatedly, but perhaps not in the globalized world of today. An extreme form of the individual shaman is found in the new age discourse that unites the shaman as possessor of unusual powers with universal primal spirituality and altered states of consciousness. Perhaps it is indeed not an argument over divergent or competing perspectives, or public understanding versus academic analysis but rather whether scholars of neo-Shamanisms should, in their multifaceted forms, engage in such dialogue rather than dismiss them as eccentric and inauthentic. We are not always dealing with formalized belief systems, but that may not be an issue. These practices are often syncretic and sometimes even contradictory. Perhaps it is an issue of power that critics seek to either diminish or disqualify. I am not suggesting that all neo-shamanisms be accepted without criticism which would certainly ignore those practices implicated in neo-colonialism, racism, capitalism and commodification. It does suggest that we look more carefully at the diversity of neo-Shamanisms, their practices and their interactions.



8

Perhaps the most influential books on the subject of shamanism are Mircea Eliade's *Shamanism,* Carlos Castaneda's *A Yaqui Way of Knowledge* and *Travels to Ixtlán* and Michael Harner's *The Way of the Shaman*. These texts have also had considerable impact either directly or indirectly on current neo-Shamanic practitioners (Hendrickson, 2015). When I first took the beginning workshop with the Foundation for Shamanic Studies, it became apparent to me from the beginning that the objective of journeying to the Upper, Middle or Lower Worlds was intended for individual healing and searching for animal allies. The training is intended for participants to engage in healing for their own benefit with some guided practice in co-journeying with other participants, who are also students. This is a difference or alteration from the indigenous shamanic

practices I observed in Mexico, whereby the patient may be instrumental in the rituals, but it is the shaman who treats members of the community at large and does not engage in group healing or self-healing sessions. I believe this to be a significant modification perhaps influenced by Western perspectives which are focused on praise of the individual. Rather than putting down the practice, it actually can bring some benefits through the exploration of new interpretations of healing. In addition, in the West, it places enormous emphasis on the individual and self-healing evokes Jungian archetypes imbued with a view that the self is all that matters. I don't mean to imply that all neo-shamans feel this way, as it would overgeneralize and overlook other neo-shamans who avoid Western terminology in an attempt to understand the non-Western 'Spirit' worlds with respect and appropriately so as to interact with it.

There are many possible altered states of consciousness (Peters & Price-Williams, 1980; Winkelman, 1990) and the question is, which ones are specific to, and defining of, shamanism. There are broad and narrow definitions as we have seen. A broad definition of shamanism would include any practitioners who enter controlled altered states of consciousness no matter which particular states these may be. Narrow definitions on the other hand specify the altered states:

> For Mircea Eliade (Eliade, 1964, p. 4), one of the greatest religious scholars of the twentieth century, "A first definition of this complex phenomenon, and perhaps the least hazardous, will be: shamanism = technique of ecstasy." Here ecstasy infers not so much bliss but more a sense, as the Random House dictionary defines it, "Of being taken or moved out of one's self or one's normal state and entering a state of intensified or heightened feeling." This definition of ecstasy as "being taken out of one's self or one's normal state" is, as we will see, particularly appropriate for shamanism (Walsh, 1989: 3).

Michael Harner defines a shaman as "a man or woman who enters an altered state of consciousness at will to contact and utilize an ordinarily hidden reality in order to acquire knowledge, power, and to help other persons" (Harner et al., 1990). The

ontological status or state of mind or connectedness that shamans are able to achieve remains a matter of interpretation. From a Western point of view a person with no knowledge or belief in these abilities would consider this phenomenon as madness or mind games. Multiple interpretations are possible, so there may not be a way to establish veracity. Why after so many years has there been a decline in the practice in Mexico? Very few young women and men are apprenticing. This condition may be somewhat attributed to the historic suppression and repression of this tradition but is more likely to be due to social media and the interest in more entertaining future vocations or avocations. In addition, the current medical profession which is not tolerant, in most cases, of traditional medicine and appears to provide a more effective and modern alternative. Nonetheless, the tradition continues in the hands of the elderly, for the most part, in the rural communities that I have studied.

Michael Taussig, who spent much time in the Putamayo in Colombia, interacted with many shamans in the Amazon describes very succinctly a simple example of an everyday shamanic experience:

> The daily coexistence of the patients in the shaman's family in the shaman's house also demystifies and humanizes, so to speak, the authority of the shaman. Unlike the situation of a priest or a university trained modern physician, for example, whose mystique is facilitated by his functionally specific role defining his very being, together with the separation of his workplace from his living quarters, the situation in the shamans house is one where patients and healer acquire a rather intimate knowledge and understanding of each other's foibles, toilet habits, marital relations, and so forth. By and large I think it's fair to say that the therapeutic efficacy of the shaman with which I am acquainted owes as much to the rough-and- tumble of this every day public intimacy as to the hallucinogenic rites that allow the shaman to weave together the mundane and on the extraordinary. (Taussig, 1987:344)

Methodologies

My approach to fieldwork and subject research has essentially been ethnographic as a participant observer. As for preparation for the fieldwork I took an interdisciplinary approach incorporating history, anthropology, biology, linguistics, geography, and photography into coursework. Subsequently, I made frequent trips to the Sierra Mazateca and the Sierra Norte de Puebla, each time interacting more and more with the community, but especially with the families that were involved in traditional medicine.

I decided to principally interview traditional specialists managing their own practice, some having become involved at times in offering services to tourists in hotels or in their home. One of these organizations is "Mo-Senyolchicauanij", where some of the women from this group went on to found the Hotel Taselotzin in Cuetzalan, Puebla. Once met, healers were usually apprehensive about talking with me, particularly since I come from such a different lifestyle and culture. But they were usually curious and began exchanging ideas and interacting with them, learning a lot about each other and during the informal interviews, they began to reveal a lot about their own lives. Conversations generally revolved around their daily lives, chores, work, beliefs, hardships, fiestas, community responsibilities and their emotions as they related to their lives. I feel privileged to have been able to engage in this type of conversing which takes time and the development of trust.

I have heard from people in both Cuetzalan and Huautla, who have told me that unfortunately many researchers, including those from Mexico, have often betrayed the local people's trust by either publishing material that had not been reviewed and approved by the interviewee, or that the researcher had never returned to the community nor communicated with the people after collecting information and doing

interviews. Many local people were very apprehensive and requested that I especially not audio record them; therefore, most of the material I use is taken from rough notes or spontaneous talks with the healers, who have agreed for me to share our interviews or their interactions with their patients, their plants, including during altered states of consciousness. In most cases the names of the healers have been changed to protect their identity.

In order to be able to fully explore and understand the ethical considerations involved in the ethnographic interviews that I sought to engage in, I applied for an IRB through UCLA. I was granted approval with IRB#18-000975.

I was always clear about the academic affiliation that I had in requesting the opportunity to work with the healers so as to learn more about the therapeutic techniques that they employed, although I made it clear that it was also my personal interest not merely an academic pursuit. I explained that my interest was not to engage in an interrogation but rather to allow for a narrative style description of the healer's perceptions and experiences with minimal questioning. I stressed that their anonymity would be respected unless they requested otherwise, as for example, in the case of doña Micaela who seemed to enjoy the notoriety.

My interest was also in working with patients so as to understand their reaction to and perception of the treatment that they were receiving. How it was of benefit, and why they chose to treat with a traditional practitioner rather than an allopathic one or whether it was in conjunction with an allopathic physician.

In developing questions, I used the word "describe" (or a synonym) to initiate conversation, often giving examples from my own family's lifestyle and health concerns. Some of the questions might be: Describe your family? Describe your community. Describe why you chose to visit a shaman and what the experience was

like. These are open ended questions and lead to discussion and extension.

After a number of interviews, I realized the great diversity of practitioners, even in the same locality, and that there is also a great range of practices. This can be attributed to pre-Hispanic healing traditions that mixed with Spanish colonial medical tradition as well as with African healing traditions later. These practitioners have sometimes been called brujos, curanderos, shamans, sorcerers, doctors, priest-healers and many more references in the native languages, indicating a wide range of popular beliefs about traditional medicine; some positive while others pejorative. Therapeutic specialists such as bonesetters, midwives, massagers or the generalists like shamans or curanderos are firmly entrenched in the rural communities that I visited. Many healers practice several specialties. Some healers specialize in bone setting or relieving articulations as well as herbs and herbal remedies; some are *parteras* or midwives who help women in pregnancy and birthing and are generally very knowledgeable of herbs, performing cleansings or *limpiezas* with branches of herbs and local plants or by passing an egg over the body and the therapeutic use of the *temazcal*; while others are more based in the spirit powers or the use of energy fields for healing which is the work of shamans. Even within these diverse categories of healers, there is still more diversity.

Ethnographic techniques that I also used were through observation as a participant observer, allowing me to enter into the worlds of these practitioners as a patient and to see and feel first-hand the therapies that they provided; keeping field journals of my work; audio recordings whenever possible and permitted; and photography constantly, although not permitted in many situations, especially during ceremony.

I often asked the healers to treat or "work on me" for ailments that I perceived and, in this way, started a patient relationship so as to begin to understand their

techniques. Therapies may involve many applications including massage, energy work, or herbal treatment and may be continued over a period of time. The herbal remedies come from many different parts of a plant, the leaves, roots, fruits, seeds, and flowers, which they dry for tea or for bathing at home, or make into a tincture, an oil or a poultice, for oral or external use, these are among the various types of preparations.

I found that in trying to understand the epistemologies, models, and practices of the various healers within the rural (folk) communities, active participation within curing contexts while simultaneously researching the sizable Spanish language texts about healing and shamanism, were the best ways to proceed. And of course, whenever possible, I would translate and analyze the conversations and prayers of the curanderos or shamans.



9

Background of the investigation



10

I began documentary and ethnographic work in Puebla and Oaxaca for this project in 2014. I was drawn to the mountain regions, at first, for photographic documentation. I came looking for communities that were significantly isolated from city life and reputedly retained traditional customs and traditions.

Part of my intended work was to document various rituals and cultural events in the diverse communities, as well as to conduct interviews. The original purpose of this compilation of material was to present a photo exhibition for the local communities as well as for mounting a show in Los Angeles or Santa Monica, California. Some of the topics that I chose to document included markets, food, dances, “mayordomías”, traditional medicine, education, language, through the cosmological lens of the

community.

Exposure to Náhuatl culture came in part through language and culture classes at UCLA. Especially useful were the introductions and simple requests, the names of many foods, terms for land and soil, and also the names for specific parts of the body in Náhuatl which became particularly helpful in the fieldwork conducted in Cuetzalan. Working with don Lucio, a *huesero* (bonesetter in English), in his limited Spanish, Náhuatl gave me access to his instinctive way of naming therapeutic procedures as I was developing a more intimate relationship with him.

It became easier for me, in understanding what the *curanderos* explained to me through the open dialogues that we had, as he or she demonstrated the therapeutic techniques while treating me or local patients.

When observing and interviewing practitioners from Puebla and Oaxaca, it was not always easy to know whether a person actually practiced what they were representing to me, or were embellishing and trying to impress me with more dramatic detailed information. Most of the time it was my instinct that helped guide me as well as the advice from friends who accompanied me on many occasions, that helped guide me. I should clarify this, to say that the patients or shamans sometimes dramatized results or events not to mislead me, but just to glorify them, making the ailment and subsequent recovery more dramatic. In these conversations, I tried to differentiate between the actors or dramatists and those that maintained a more factual, candid or straightforward dialogue.

Therefore, I must again clarify that what they did was only to influence the presentation of the information, and not necessarily to spoil it or change it. In this way, I learned how to dialogue with different practioners, which opened up my ability to understand different ways of healing.

While in Oaxaca, I interviewed two healers from Huautla de Jiménez who ran their own practices, as was customary in the region. During that visit I interviewed Maria de la Cruz and Germina Lopez. The information I obtained dealt with diseases considered "traditional" and are identified within Mazatec cultural tradition. They are specialists in Mazatec healing. Principally, they attend to pregnancies and their complications during "traditional births" and are called *parteras*. These traditional practices make up a complex therapeutic system, part of a traditional or “folk” medicine that survives in a vibrant and steadfast way in Oaxaca, complementing Western allopathic medicine.

In most of Mexico, as in most Latin American countries that have a large indigenous population, a government system or "professional medical model" has been developed and expanded since the last century (Pedersen & Baruffati, 1989) which is also politically called the “hegemonic medical model” (Menéndez, 1994). On the other hand, there is the "popular" medical system or model that Menéndez calls "alternative-subaltern or traditional medicine” (Menéndez, 1994).

10

In Cuetzalan, Puebla, in winter 2016, I visited the Hospital de Medicina Tradicional Talkampa, where I interviewed the traditional doctor Miguel Valerio Villa. I witnessed in that visit a discussion between a few of the *agremiados* unionized healers that revealed a few problems. In my opinion, these partners find it difficult to function as an organization and as a union for various reasons:

a) lack of interest on the part of the group, since *curanderismo*, unlike other traditions, does not have as the primary incentive to make money, but comes from a tradition that

is an inherited millennial knowledge and historically does not charge for services. For the last few years, with State influence, traditional practitioners have charged as part of a process of commercialization, although it is still considered traditional and "community work"; b) a power struggle for the prominent "positions" that make decisions within the group's business; c) the lack of resources to re-invest in projects that generate cash; d) personal conflicts between partners; and e) general competition. For example, in Cuetzalan new spaces have been opened for healers in the region, implying that the organization's business is not the only one in the town.

In 2017, when I visited Miguel again at Talkampa, a community run clinic of traditional medicine, I entered the ominous empty shell of the clinic which had become over-run with some non-health related businesses on the ground floor and a few rooms used as part of the hotel upstairs. Basically, it sadly had become abandoned as a healing center.

In 2013, the first State Regional Hospital was opened, in which a Traditional Medicine module was attached. Many of the practitioners who had originally been working with Talkampa began working in this new facility. Today, in this site more than 40 unionized healers continue to work actively; there they practice twice a month. They can refer their patients, if necessary, to allopathic physicians. Most of the unionized healers of the region find it more attractive to work with the State, which provides economic security and labor benefits, than to work for themselves where time and money are irregular, and then have to be invested in materials and rent as well as general maintenance and publicity.

During 2016, while in the Department of Latin American studies at UCLA, I began consultations with professors Bonnie Taub, Patricia Arroyo Calderón (Spanish and Portuguese), Kevin Terraciano (History), and Shannon Speed (Native American

and Gender Studies), to further understand traditional healing in Mexico and explore research questions. I made the decision to focus on the methods and practices of traditional healing and shamanism not only in the Nahua communities around Cuetzalan, Puebla, but also in the Mazatec region around Huautla de Jiménez, Oaxaca. Subsequently, I contacted professor Antonella Fagetti of the Benemérita Universidad Autónoma de Puebla and professor Timothy Knab of the Universidad de las Américas in Puebla, who graciously gave of their time to help me with ideas and contacts. The plan was to essentially to observe examples of traditional medicine in these two areas; first Cuetzalan, where traditional practitioners and shamans often use herbs in conjunction with therapeutic procedures, but do not consume psychotropic substances, whereas in Huautla de Jiménez psychotropic substances are often used in healing sessions by healers as well as patients. I conducted a series of interviews with healers in both areas, while also participating in the various healing techniques. After several years of research, I began to get a much better sense of what methods and practices are being used and are successful in these areas today.



11

Part of this research was sponsored by the Salinas Foundation as well as the Tinker Foundation. I am very grateful for their patronage allowing me the opportunity to study and explore traditional medicine in Mexico. Early on, it became clear to me that traditional medicine, despite so much inquisitional repression since the Spanish invasion, remains active among inhabitants of these two areas and is an essential part of the lives of this part of the population. It should also be said that I became more aware of contemporary European and North American racism and colonialism which played an ominous role in viewing traditional medicine as an inferior form, practiced by "uneducated" and "backwards" indigenous peoples. Therefore, and in part, these indigenous traditions have been able to survive due to the concealment of the practices as well as the geographical isolation of these two mountainous groups, aided by an

extreme wealth of native flora, that provides a wealth of ethnobotanic material for their healing.

Initially, in 2014, I was drawn to the mountain regions for photographic objectives. I went looking for communities that were significantly isolated from city life. Part of my intended work was to document various rituals and cultural events in the diverse communities, as well as to conduct ethnographic interviews. The original purpose of this compilation of material was to present a photo exhibit for the local communities as well as mounting shows in Los Angeles and Santa Monica, California. Some of the topics that I chose to document were markets, food, dances, "mayordomías", traditional medicine, and education.



I returned to the regions in 2016 with a different perspective, to study and document traditional medicine and to try to comprehend the cultural cosmology that could provide the context for a better understanding of these practices.

My Cuetzalan field work was carried out from Winter 2016 to mid-June 2019; while there, I often stayed at the hotel Taselotzin, whose administrative social and political organization allowed me to better understand the community. It is run by women from the Cuetzalan area, who manage and operate the hotel, promoting not only a great place to stay but also sensitivity towards gender equality issues in the area while also connecting to the healing community. Norma Policarpo Carlos accompanied me to several interviews with the practitioners in the Cuetzalan Area.

Theoretical framework

In part, this thesis is an exploration of the difference that conceptually separates two social spheres that have been in constant conflict historically: the oppressors and the oppressed, the rich and the poor. This is in terms of their relations to power and control in medical attention provided in Puebla. The dominant class or hegemonic class (Mascitelli, 1977) usually has a greater margin to direct to the other sphere, and has less developed living conditions than the other; which is the result of "hegemony". It is also repressive and has its foundation in the decisive function that the dominant group exercises in the decisive control of economic activity in the area (Gramsci, 2000).

Eduardo Menéndez (1992) conceptualizes this division regarding health care, as a struggle between the urban and scientific spheres and the other, or rural and traditional, one that creates a dynamic of opposition and complementation. He defines them as medical models. The first is the dominant one and he calls it the "hegemonic medical model", which in turn encompasses 3 sub models: "the private medical model, the public corporate and the private corporate". The second model he calls the "alternative or subordinate model" also called "traditional medicine". From my point of view, the "hegemonic medical model" has imposed itself in a very capitalist way on the "healing" trade and has denigrated other therapeutic practices from its crisis, has provoked the appearance and consolidation of other therapeutic practices. Melendez claims, "It attempts the ideological and legal exclusion of the other alternative models, which in social practice is solved, by their appropriation and transformation, which increasingly constitutes conflicting and / or complementary derivatives of the HMM (*modelo médico hegemónico*)." (Menéndez, 1994: 98).

The “official medicine” which became hegemonic (Menendez, 1994), was born in Europe during the nineteenth century, and developed after the Second World War amidst both democratic and socialist countries that developed a single model of health. In Mexico, it was the State during the first quarter of the twentieth century, calling for a nationalist plan for modernization, and promoting this “official” medicine as a way to homogenize the idea of health into a single form of care, through institutions and legitimized by the government. (Menéndez, 1988)

On the other hand, "traditional medicine" has been seen as a set of syncretic beliefs, which have suffered historical discrimination by “official” hegemonic medicine. For Paul Hersch and Lilian González (Hersch 2011), who study a series of diseases that stem from Nahua roots, conceptualize it, pointing out that there is an urban population using Western epidemiology and then, another regional more rural populace using traditional systems for healthcare, with clear pre-Hispanic roots. This “other" medical system, sometimes also referred to as “people’s medicine”, which the authors call popular nosology. This system, composed of local inhabitants, includes practitioners who identify and classify through regional epidemiology, ailments and diseases, named by the local inhabitants. (Hersch & González, 2011)

Hersch and González (2011), state that “the specific origin of these traditions is a certain mode of transmission (usually orally transmitted, but it can also be written) that does not seek formal accreditation from a school, ecclesiastical nor medical institution, but is simply biologically accredited, utilizing true symbolic families: collectives and communities with cultural, religious, and ethnic ties, for the benefit of the consumer.” (Hersch & González, 2011, p. 36)

In this context, I wanted to understand the work being done by traditional healers in the hospitals and how it was being received. For this, I made different visits

to the Traditional Medicine Module of the *Hospital General Integral* of Cuetzalan. Sometimes I arrived alone and saw who was on duty and approached him/her to talk informally about their integration into the hospital. Other times he/she would come accompanied by another healer who was interested in how he/she worked in this space. Many stayed to not only observe but to assist. Hospital staff in my first visits did not put obstacles in the way of this work; however, from one year to the next there was a radical change in their position regarding the researchers, considering them too numerous and "invasive."

I also arranged for informal interviews with the allopathic doctors working in the clinic in Cuetzalan and asked for their impressions on the linking of traditional and allopathic medicine. I spoke with general practitioner Dr. Marco Soto, general practitioner José Jaime Vélez, director of the hospital, and general practitioner, specialist in natural medicine Mr. José Eleuterio Ortega. In a general way, I believe that the opinion of the allopathic doctors about the work of the healers is positive but skeptical. The majority ignore them or consider them as a completely separate form of healing; accordingly, and with very few exceptions, they commented to me that they had in fact learned from them. I only heard from one allopath who rejected them and denied their potential. The skepticism may be due to the fact that allopathic doctors, both local and from other states, studied at a medical school at a university, in a metropolitan community, and only was trained in scientific approaches to medicine; they do not get involved with local healing knowledge nor Nahua healing practices in their health diagnoses.

In another place for healthcare, in Cuetzalan, there are several local pharmacies owned and operated by mestizos. There are doctors that often work out of the pharmacy. Both pharmacies, at the time of my research, diagnosed and treated

(sometimes for a fee) all illnesses presented to them, even when the internal doctor was not present. They also often sold medication without prescriptions. They give injections, and vaccinations, and I was told, set broken bones. Neither pharmacist said that they referred patients to practitioners of traditional medicine, *curanderos*. Likewise, doctors and nurses at the hospital rarely referred patients to the folk curers. Nevertheless, rural Cuetzaltecans linguistically group together the pharmacists, the doctors and nurses and call them all “doctores”.

Historically, healers have been adapting and transforming elements of their culture since the arrival of foreign settlers, this is something that Aguirre Beltrán literally called "culture change" (Beltrán, 1967: 2). This is not a new phenomenon and is based on contact between two very different cultures. Generally, the culture with the most advanced technology will transform or eliminate the “conquered” people. In the case of Mexico, cultural change did not involve the elimination or extreme loss of traditional culture or customs but rather, a syncretism or coming together of the two systems, while enriching each other and thus becoming a plural system. In the case of this study, I began to look at this "plural medical system" in Cuetzalan (Pedersen, 1989). However, it was extremely important to review and critique this multicultural medical system, and the way in which it cohabitates, because for there to exist an effectively "plural" medical system where there is a true "complementation" between both medicines, there needs to be governmental support and legal acceptance and access to both systems. The State must officially support this “other" medicine and not only the official allopathic hegemonic model , so that there can be a balance between the two and initiate an interrelationship, and not only one of subordination, of the official over the traditional. This came to be in the General Health Care Law of Mexico, Article 93 proclaiming that medical care must “adapt to the local social and administrative

structure and the concept of health and the patient's relationship with the doctor."

Currently, the cultural groups around Cuetzalan cannot treat themselves with scientific medicine because it is expensive, there are often no allopathic clinics in their own localities, and it is not part of their culture. The case of the "traditional doctors" in Cuetzalan shows that originally there was only one avenue for treatment, and that was traditional medicine. But after the State expanded forms of healing, conditions change; today there is a great variety of health care providers and the local allopathic hospital incorporated traditional healers. In Cuetzalan, traditional medicine is still the main medicine, which is due to being incorporated within an area where the environment provides for various ways to treat a variety of health problems in a natural way, and in a preventive way.

The "official medicine" is the one that complements the traditional Nahua medicine, and not the other way around. However, as we will see, most of the healers have only had an inclination to send their patients to official medicine if they feel it is necessary because allopathic medicine can cure certain infectious diseases more efficiently.

The healers do not consider the "official medicine" as paradigmatic, unlike those who live in the cities, where there is a stronger distinction. However, Cuetzalan does not, for that reason leave traditional forms aside, since these therapeutic practices are an essential part of the vast Mexican popular medical culture in these rural areas, often ignored and stigmatized by the dominant and hegemonic culture. (Berenzon Gorn, Alanís Navarro, & Saavedra Solano, 2009)

Traditional medicine is extremely broad and varied, and many of the local Poblanos I spoke with seek shamanic practitioners. Shamanism is perhaps one of the oldest traditional practices, with the shaman in direct contact with supra-ordinary

powers, achieved many ways but most often through trance or dream states, and are responsible for identifying diseases and developing special relationships so as to help the patient. Some shamans develop special relationships with animals for healing, but also for protecting their local village. In the many ethnographies depicting the history of Mesoamerica, we have found a diversity of bearers of such characteristics and, in particular, it has been the nagualism that bears strong similarity with Siberian shamanism. Many shamans do acquire animal energies and spirits in the spiritual world or in a dream path or through the use of complex rituals performed during waking time. These qualities are very similar to the descriptions of the *naguales* by several chroniclers in the sixteenth and seventeenth centuries, especially Ruiz de Alarcón. (Ruiz de Alarcón, Coe, & Whittaker, 1982)

In this paper, I will approach the two therapeutic systems, the allopathic and the traditional, with principal emphasis on the traditional. I will apply relationships from the animist world (ontology) and refer to multiple inter-subjectivity of the human-non-human relationship, as proposed by Descola, Viveiros de Castro and others referencing animistic systems. In this sense, I will represent the shaman unlike many other investigations that see a shaman or *curandero* as only a ritualist, with an extensive knowledge of plants. I intend instead to visualize these healers not as isolated figures, but rather in terms of a complex set of cultural relationships. Indeed, among the Nahua, the shaman is a mediator between two sets of existing ontologies and regulates numerous interests for one another. These interests may be associated with health, territory, disease and reproduction. The needs and objectives may not be of an individual, but of one community in relation to itself.

Cuetzalan Region

Cuetzalan Area Literature Review

Some of the first studies that precede this research that are good documents of the area, include Alessandro Lupo's book, *La cosmovisión de los nahuas de la Sierra de Puebla* (2001), the work of María Elena Aramoni Burguete, *Talokan Tata y Talokan Nana* (1990), David Somellera's thesis *¿ Médico o curandero?* (2016), and the classic study by Timothy Knab, *The Dialogue Between Earth and Sky* (2004).

One of the studies that deals with the topic of ethnomedicine, including the mountainous region of Puebla, published in 1988 by the National Institute of Nutrition and edited by Dr. Enrique Cifuentes, is titled *Etnomedicina y Salud Comunitaria* (1988). This article explores the political dilemma at the local level at the "Mixed Hospital" or *Hospital Mixto* of Dr. María Beatriz Duarte, Roberto Campos Navarro, Viviane Brachete-Márquez. Gustavo Nigenda also researched and wrote *National Health Policies and Local Decisions in Mexico: The Case of the Mixed Hospital of Cuetzalan, Puebla* (2004). Another important study is that of Milano Chiara published in the Social Science and Medicine in 1980, entitled *La legitimación de las medicinas indígenas en México. El ejemplo de Cuetzalan del Progreso (Puebla)* (1980).

Some other publications of importance for this research are the three volumes edited by the National Indigenous Institute named *La Medicina Tradicional de los Pueblos Indígenas de México (The Traditional Medicine of the Indigenous Peoples of Mexico)* edited by Virginia Mellado Campos (1994). Also in three volumes is the *Atlas de las plantas de la medicina tradicional (Atlas of Plants in Traditional Medicine)* (1994) published by the INI and edited by Arturo Argueta Villamar.

The *Instituto Nacional Indigenista* (INI) in the 1970s and 1980s, convened a number of meetings designed to integrate community healers into clinics and hospitals

run by the Ministry of Health. Many of these therapists are independent healers now, but who were interested in the apparent status received by working for the State. Unfortunately, it was an apparently hollow gesture at that time, in that there has been little support for their materials and services, as discussed later, some practitioners continue to work with the hospital, however, most of the traditional healers in Puebla and Oaxaca that I met work independently from home.

Nahua Landscape and Historical Description

Into the heartland. Into the mountainous land of the Nahua people of Puebla. It is a beautiful hilly green misty region where poverty, mysticism and traditional ways continue to prevail. Young people as well as old people have cell phones, listen to a variety of music, drink Coca-Cola and participate in popular culture but at the same time they retain their traditional cultural origins and honor those (ancestors) that have come before.

The surrounding mountains have a cold, temperate climate, and the low mountains have a sub-tropical climate on the slopes of the plain that overlook the Gulf of Mexico, where the cultivation of coffee, fruit trees as well as large expanses of corn and sugar cane.

Cuetzalan due to being close to the Gulf, receives daily trade winds that become heavy rains much of the year. The town has an annual average rainfall of 900 to 4000 mm. Cuetzalan has a diverse climate due to its location between the mountains and the plains near the Gulf. The annual temperature distribution is between 65 to 75 degrees Fahrenheit. In this mesophilic forest ecological zone, the climate is humid and temperate, with altitudes of 1500 to 900 feet above sea level. This area is sporadically distributed over the Atlantic slope of the Sierra Madre Oriental, from the southwest of Tamaulipas to the north of Oaxaca and Chiapas. (Rzedowski and Esquihua, 1987: 119).

In Cuetzalan, the mountain mesophilic forest is densely covered with evergreen trees. I have seen numerous orchids, arborescent ferns, liquidambar, magnolia and *macpalxóchitl*, smaller ferns, vines, *jonote*, lianas, guayabas, the *cuauchalalate* tree, the *chilacuate* , *chalauite*, the *cocolmeca* tree, mamey tree, *chinina*, bromeliads, bamboo, pepper, cinnamon, coffee (these last three were introduced by the

Spaniards).



13

I briefly met Erick Estrada Lugo at Talkampa in Cuetzalan, a researcher at the Autonomous University of Chapingo, Mexico, who specializes in traditional medicinal plants in the country. He commented that vegetation in Mexico is extremely varied but feels that the Cuetzalan area is perhaps the most diverse with respect to medicinal plants. Estrada told me that there are more than 30,000 species registered in the country (Estrada, 1988: 103). This variety of plants, allows for a huge medicinal apothecary used mostly by the 56 ethnic groups in the country.



14

In the Sierra Norte de Puebla, inhabitants have known for centuries how to use the plant resources available for the cure of the diseases that afflicted them. Therefore, the knowledge, the use and application of medicinal plants is an essential part of Nahua culture in the Sierra. Until only a few decades ago, due to the inaccessibility of the terrain, modern medicine was not readily available to the general population. Before the appearance of the medical resources of the State a few decades earlier, the Nahuas only solved their diseases with traditional medicine, this has changed and now you can see the combination and complementation of both medicines, traditional and Western scientific.

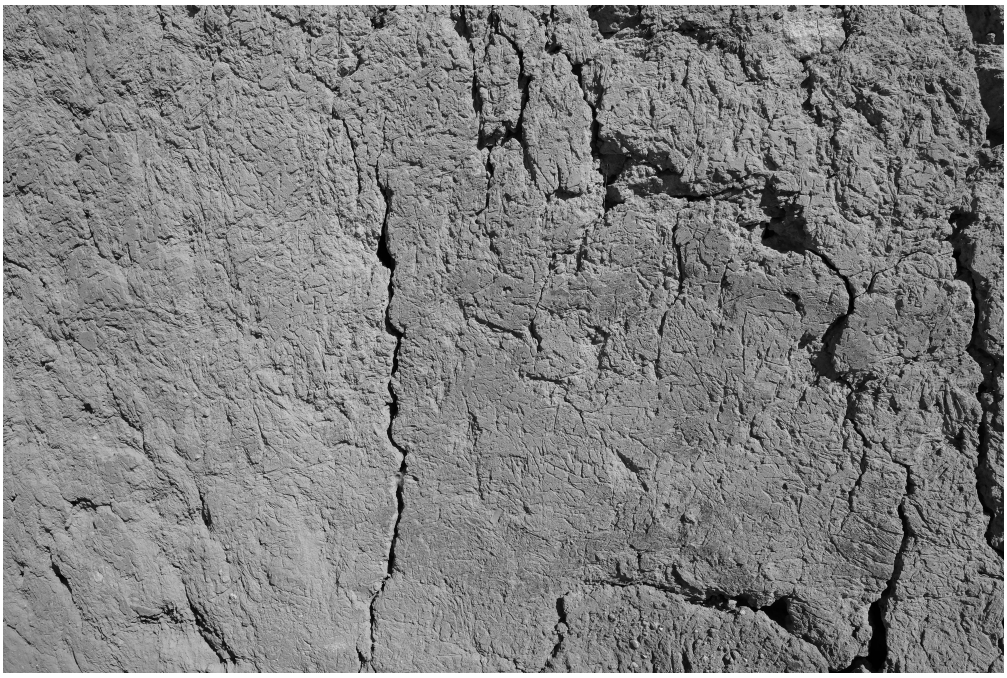
One of the first Western researchers to study the area was the Canadian anthropologist Pierre Beaucage from the University of Montreal. He was able to identify 277 domestic and wild plants in Cuetzalan. In a survey on the traditional uses of these identified plants, Beaucage highlighted 232 of them that were used and then divided

them into 8 broad categories. These included: medicinal plants (*xiujpaj*) (53); flowers for ornament (*xochit*) (32); food plants: (*tatok tein se kikua*) (87); fuels (*kuojtatil*) (55); lumber (*kalkouit*) (26); forages (*takual for tapiamej*) (21) were the major categories that were utilized by humans. This amounted to 352 uses for 293 plants. (Beaucage, 1988: 145)

Both flora and fauna have been subject to disappearance during the last twenty years, according to Lucio and several contacts. This due to the climatic instability that plagues this region, as well as the erosion of the land caused by immoderate logging and the over-grazing of livestock. Other natural phenomena that have compromised the local ecology are frosts and hail, as well as the cold northerners and the tropical cyclones that arrive along the coast of Veracruz and impact Cuetzalan because of its proximity to the Gulf. In spite of this unpredictable weather, there are still abundant natural resources such as edible and curative plants that are mostly used by traditional therapists as part of the ethnobotany found in this mountain ecosystem.

The Sierra de Puebla is today a region inhabited predominantly by the Nahua people. The arrival of these people to the mountain region and its relevance in the Mesoamerican scenario is not completely known. The mountain range has long been a cosmopolitan region where diverse cultures have interacted.

This probably occurred because the Sierra is situated between two important cultural and economic centers of Mesoamerican civilization: the Gulf coast cultures and the Teotihuacán culture" (García, 1987: 33). This mountain area may have functioned as a trade route or trade zone between groups that went from the coast to the Altiplano and vice versa, which made it a heterogeneous zone. (Baéz, 2004 p. 6)



15

Spirit Energies of the land and human birth

For the Nahuas of the Sierra Norte de Puebla, the Earth, is a living being and has a "heart" and is protected by its owners. The site for the "heart" of the Earth is the *Talokan*, which is also referred to as *Tepeyolo* ("Heart in the hill*"), Yolotalmánik* ("The extension of the heart") or *Tepeyolómej* ("The wild hearts"). The "owners" of *Talokan* are the god *Talokan Tata* and the goddess *Talokan Nana*. (Aramoni Burguete, 1990, pp. 137-138) Talokan Tata and Talokan Nana are merged conceptually with Talokan itself, and this becomes the Earth. For some, Talokan extends throughout the world, holding up the earth, and it is a world parallel or mirrored to that on the surface, with mountains, rivers, lakes and waterfalls. For others, the Talokan is a huge cave; it is also imagined as a container, in a large mountain. It is the ultimate deposit of wealth and is composed below the earth of hills, rivers, waterfalls, lakes and springs. (Aramoni Burguete, 1990, pp. 126-129)

Talokan is the heart of the earth and at the same time, it also has a heart and this is the flowering tree *Xochinkuáuit*, a tree that blooms yellow blossoms on one side, purple blossoms on another, white on another with a few red blooms. These symbolize the colors of the four directions of the world and universe. Don Inocente of San Miguel Tzinacapan, don Lucio's father, claimed, to Tim Knab, that there were four other trees each one holding up the earth. These become trees of life and play an important role in Mesoamerican mythology. (Knab, 2009)

The Lords of the Earth have as servants the caretakers the spirits and the animals of the mountains who look over the water, the wind; they are the spirits of the hill and protect the entrance to Talokan, but they are the owners of the hills and are the spirits of fire. (Aramoni Burguete, 1990, pp. 56-68)

Death also lives in this underworld domain. Death belongs to the domain of cold and wet. The feminine rules death. The sun, masculine, symbol of life, will perish someday because of a flood. The moon, on the contrary, by governing life and death in its periodic rebirths, makes the feminine eternal. (Galinier, 1990, p. 510)

The dead reproduce: in the soil of the cemeteries, the corpses and the bones regenerate the cultivated fields. It is important that the dead be propitiated in the agricultural ceremonies of fertility and of cleansing the land. They are called upon in fiestas to eat with the old ones, the *abuelos*, the "new seeds". The dead, fed with the offerings, becoming re-fortified and fertilize the world. (Galinier, 1990, pp. 69, 545) In summary, it is believed that ancestors must intervene in biological processes because life could not be created from nothing.

Some Nahuas, Tepehuas and Totonacs practice a ritual of sprinkling the kernels and seeds with blood, prior to planting, to receive the essences of the gods similar to the offerings of the cut-out paper figures. The Tepehuas dig a hole in the cornfield and offer the Earth as payment to allow the growth of corn. Offerings include, six *ocote* sticks, the legs and the heart of a *guajolote* and *copal*. (Williams García, 1963, p. 101)

A strong personification corresponds to the paradigmatic importance of corn. Fertility prayers addressed to the "Holy Corn" and the corn festival during the harvest continue to be part of the most important autumn ceremonies. Corn has a sacred quality. Among the Tepehuas, neighbors of the Nahuas, the sacredness of the seed is spread to the corn, nothing is wasted, since the planting wastes cannot be used as fuel. (Sandstrom, 1991)

The mythical Lord of Corn is a very important identity for all the *serranos*. It is not only a source of sustenance but carries a strong cultural and symbolic relationship to the land and life itself. The mythology is rich and describes this historic relationship

through epic journeys. The “adventures” of the Corn god are varied and elaborate. Therefore, Corn is usually personified and acquires paradigmatic qualities:

> We are the Earth: from the Earth we are born, then we return to the Earth and she eats us. What comes to cleanse our body is our soul. But our body, is like corn that has been sown. You are going to sow the corn into the ground. But it doesn’t stay there. The corn is gestated, in its own little heart. Born and raised, *pa’arriba*. “Get up, go up”, until it emerges near the tip, near the flowery tip. Then, the only thing left is the plant: there it is born, there it is going to end. No more fruiting: we remove the cob, "we take out the heart." Our Lord God takes away our heart, our soul, our soul. He will only know where to put it. As I go reassuring my little cob, I know where to put it. And the little plant stayed there. Where he/she was born, he/she stayed there, and there was another round, another round was made. And the little *mazorquita* went around again. This is how we are: we will never reach the glory; Whole as we are on Earth, with our body and soul together. (Signorini & Lupo, 1989, p. 48)



16

These adventures and descriptions of the Corn god make reference to psychic entities - spirit energies - that give their energy and character to common man, animals and plants, receiving names like "hearts", "seeds", "seed spirits" or "seed shadows" from the mountains. The place and main source of the "seeds" is the great mythical mountain

that the current Nahuas call Talokan. (Aramoni Burguete, 1990, p. 62) They are found in the hills and in the natural deposits of water, from which the "seeds" that are placed and protected,: are in the images of cut paper. Paper images are arranged, and worshiped in local temples. (Sandstrom, 1991) If one does not worship them properly and with respect, they may become offended and leave. This is very dangerous, because if the 'seeds' go away, they may disappear leaving the life force to wither.

In this region, all beings are considered to have a soul. There is the belief that these “seeds” can emigrate, and that all the "seeds" of tropical plants did so. Before, they lived and stayed in the highlands, but they abandoned the heights and fled to the east to populate the warm lands of the Gulf Coast. Sometimes the "seeds" are enclosed in precise objects: a piece of quartz, a moonstone or, in the case of the "owner of the streams", within a living being: a freshwater shrimp. In essence, all the essences of world beings come from Talokan. (Sandstrom, 1991)

There are traditional therapeutic and ritual practices that must be followed, that respect and help welcome and balance a child into the world and the community. When a human baby is born, he/she must immediately be bathed, which is often done within a temazcal. Doña Micaela, a partera from San Andrés Tzicuilan, has told me that the temazcal could represent the interior of the Earth, and that the temazcal “bath” is a purification by fire, water and air as well as a ritual purification. To exit from the temazcal is a rebirth, a rite of transit, which gives the temazcal a double meaning: one of purifying through the elements fire, water and air, and at the same time effecting spiritual rebirth. Then the child must be sprinkled with holy water, the same water as from the place of birth. (This is why certain cultures such as the Wixarika in Northern Mexico, do not participate in the temazcal ritual because they believe that they accumulate experience and energy during the course of their lives which they do not

want to lose in a temazcal and by being reborn and losing all acquired energy and spirit.)



17

The Nahua believe that the child who dies as a newborn is considered to be so imbued with tenderness that it is considered to still belong to the realm of the dead. He/she does not go to the west, the region of death, but to the east, with the Mothers and where the sun is born. The ancient Nahuas called them *oxoxocámic*, and they were buried in a special place, because the Nahua expect their souls to go to a place of a verdant full tree. From the tree will flow the drops of milk that the baby soul will drink. (Briones, 1964, pp. 112, 166)

There are differing beliefs about the creation or development of the soul spirit in newborns. Knab (2009) says that in San Miguel Tzincapan it is believed that the

soul is composed of three different attributes: the *tonal* or psychic force that can separate from the body in dreams and is the most loosely held of the life force entities, the *yolo* or internal energy and psychic force, related to the heart and stays with the individual until death, and the *nagual* or animal entity "the shadow or cool, wild part of the tonal." The *nagual* is held by the Lord of the animals in the underworld but may escape to the surface of the Earth. (Knab, 2009, p. 27)

According to the data obtained by Signorini and Lupo (1989), the *yolo (*also *teyolia)* is the main psychic entity, but there is a great deal of interpretive speculation about these psychic attributes by many researchers. They further claim that it resides in the heart, and from the heart it transmits energy to the body sustaining life. The *yolo* is invisible, immortal, and cannot be separated from the body. Again, according to Signorini and Lupo, the *tonal* and the *ecahuil* (shadow) seem to be the two complementary elements of the same psychic entity. The first is characterized as being hot, luminous related to the sun; the second as the cool, dark, and nocturnal part of the soul. The baby human acquires these psychic entities at the time of birth. (Signorini & Lupo, 1989, pp. 75-77)

"The *tonal* is the life force that animated all living things in the pre-Columbian view. The tonal is the "anemic" force that gives the individual the spark of life, the heat of the living, distinguishing him or her from the dead." (Gonzalez Torres, 1976 pp. 13-16) The tonal is usually what the shaman will work with when there is an imbalance or a "soul loss" in an individual. *Mal aires* or *ahmo cualli ehecat* also displace a *tonal.* To treat these conditions, a shaman must not only locate the lost attribute of the soul but also determine the reason for the loss, what caused it. Among the Nahua this is usually done through dreams. Through dreams the *tonal* may wonder the earth, the lower world or the upper world. The shaman or practitioner dreams to diagnose the

causes of a client's ailments and to return him/her to stability and balance. In many cases of non-physical illness, the cause is determined to be from a lost, stolen or wandering *tonal*. (Knab, 2009, p. 33)



18

The *ecahuil* or shadow, is characterized by its ability to leave the body during sleep, so that the dreamlike views are estimated to be real: they are the product of the perception of this psychic entity in the face of a particular reality. The *tonal* mood, *ecahuil* belongs to the sphere of the companion animal. (Signorini & Lupo, 1989)

Conceptions of the soul are generally in the sphere of the shamans and specialists. Yet they concern everyone and are vital for maintaining the physical, psychological, and social health of the community.

Patron gods inhabit the mountains that are close to the towns of those they watch over. In turn, the sheltered people share their essence/spirit/energy with the

gods and ancestors who created them. These gods are known by the names of fathers-mothers (duality), ancestors, or ancient ones.

The patron god, within his mountain, gives his people the power of reproduction and growth both human, animal, and vegetable. (López Austin, 1980, p. 161) There exists a reflection of human existence embodied in the mountain and underworld Lower World, and it is this dual reflection of what we consider existence or the "here and now." The hills and the fecundity of the earth in the region are reproductions of the great mountain that contains and sustains the ancestors and their wisdom. They are both male and female at the same time, *ometeotl*, they are the source of life as well as the end-of-life, they are father and mother. Their very nature is dualistic and this dualistic nature is fundamental to the understanding of Mesoamerican cosmovision. (López Austin, 1980)

Although this type of relationship may seem foreign to western observation this basic tenant is existent in the underworld, a place of ancestors and of birth and death. (Knab, 2009, p. 77) Nahua pre-Hispanic belief was focused on the concept of a pair of opposites that are also complemented. There are many types of opposite pairs that demonstrate this dual principle but it was also very Mesoamerican and even Pan-American. It is thus important that balance be maintained in the cosmos. (Galinier, 1990, p. 103)

Populations that live in the hills are tied to the land. In the hills there are families, lineages, authorities, and each individual of the community has his/her "double" human/animal, inhabitant of the world governed by the ancestors. Signorini and Lupo (1989) propose that the opposition between *tonal* and *ecahuil* corresponds to this double composition, of the bond between the human being and animal. Thus, they propose that the *tonal* is external to man, while the *ecahuil* is internal to him/her.

(Signorini & Lupo, 1989, pp. 55-59, 77)

This shared existence triggers results in both beings. When the *tonal* animal dies it will cause the death of the person as well, the owner of the *ecáhuil*, and vice versa. It is believed that the animal, when its consort dies, will be left without food and will perish from lack of energy and sustenance. (Signorini & Lupo, 1989, pp. 71-72)

Some believe that there is a fixed number of companion animals for each person, which perhaps explains the variation in character as well as the possible change in social status of the individual during his/her life. (Signorini & Lupo, 1989, p. 65)

There is a basic principle here, that of paying back the Earth and those that have contributed to a being's existence. This commits human beings to pay back the Earth for all the benefits that he/she has received from it (her) as well as the gods and spirits which have provided food, protection and sustenance. (Briones, 1964, p. 167) and, then, to return the individual's central force, the *yolo*. Payment must be made constantly, throughout life, through ritual; if offerings are not made constantly, the individual will become sick as punishment. This is why, every favor requested of the Earth and Sky, through payer, has to be paid back in the form of a ritual to each entity. The individual, alive or dead, is expected to pay back. When the negligent person is alive, he may receive a *susto*, from which his *tonal* is thrown and captured or simply lost. The *tonal* is then forced to work in the other world, the dual world. If the debtor dies, the spirit entity (energy) or soul will travel to the world of the dead and is subjected there to forced labor. At that point, a shaman may be consulted and retained to travel and seek and retrieve that *tonal*. (Aramoni Burguete, 1990, p. 133)

These cultural and religious traditions blended in quite hermetically with Catholic traditions during the colonial period. Many of the Catholic saints became symbolic representations of indigenous entities including the cross which in its form

represents the four directions, the four cardinal directions in most Mesoamerican beliefs and cosmology.

Most families in the communities that I visited have an altar which is central in their homes and a representation of not only their family lineage but also that of their symbolic representation of the cosmos in general. Usually, there is an image of the Virgin de Guadalupe, sometimes Christ but usually other Catholic saints. Some have explained that the alter represents the earth and usually contains candles, flowers and incense. Sometimes deceased relatives and their photos are placed on the altar (not only for *Día de los muertos*) as well as important objects. Sometimes objects are placed under the altar. Objects from the past, sometimes *rebozos* or clothing from older relatives who were dear or protective. I have also often seen well used *sahumerios* smudge pots placed under the altar as well (unlit). Depending on the time of year, but during family rituals, more offerings are placed on the alter than usual, especially food which takes on symbolic meanings, as do many items and offerings. The alter is the central focus for ritual.

The *ihiyotl* is one of three vital forces--alongside the *tonalli* and the *teyolía*--which generate and sustain life in the body. The *ihíyotl* is a gaseous and wind-like force occupying the liver (Martínez González, 2006, pp. 204-205)

To help balance and maintain these vital forces, the Nahua of the Sierra Norte seek shamanism to help establish a connection between the two (or more) existing ontologies that are divided, in a relatively basic way, into two large groups, according to Descola (2006): that of humans and that of non-humans. (Descola, 2006) . Consequently, non-humans, consist of a multitude of entities, including the dead, animals, deities and the various mountain entities and spirits. Each shaman has specific knowledge of this multitude of entities, and recognizes the specific identity of each of

them. Therefore his/her work is not only to manage between two worlds, but to recover the souls captured from humans by non-humans and, at the same time, to pay the never-ending cosmic debt to non-humans generated by the life of men and their constant reproduction and often careless destruction of the environment.

Whether they are ancestors who inherited land, or saints who provided fertility or mountain beings who donated animals and resources; non-humans and energies form a network of interconnection with whom the Nahua shamans and common people need to negotiate constantly. In effect, this group of entities are believed to be the owners of the world and its resources, of life, and to a large extent, the destiny of the Nahuas. Thus, they consider that there is an inexhaustible debt to these entities, that increases relentlessly through the consumption of natural resources, as well as with overpopulation itself. This is what I have heard from don Lucio. Perhaps for this reason, the "rapacious voracity" (according to the nahua story-myths that I have heard) with which non-human entities consume (*tlacuah*) the spirits of human beings can be explained, as a payment for the plundering of everything in the environment, that in the Nahua point of view, does not belong to the humans. The pillaging also generates a penalty to be imposed, by the non-humans, as a result of the misuse of certain natural resources such as the excessive cutting of forests, the unnecessary killings of animals, also the defiant entry into natural spaces, including streams, mountain areas and caves, without asking permission and without having performed the appropriate ritual. This is very similar to the Mazatec belief involving the *Chikones*, involving punishment for abuse or careless entry onto mountains or into caves or rivers.

In the world of the Nahuas, it is one in which the constant exchange between humans and non-humans requires mediators on both sides: shamans for humans and equally, representatives of non-human groups, such as the animal spirits, and spirits of

the mountains, etc.

I don't believe that these relationships operate in quite the same way as presented by Viveiros de Castro (1998) in his hypothesis on perspectivism, whereby he claims animals have a perspective of themselves as humans and human beings as animals, but there is a similarity. There is a different type of perspectivism among the Nahua, the vital spirit or chief spirit of the animals or of the mountains themselves, represents an underlying collective reality with whom human beings establish direct relationships. (De Castro, 1998).

Thus, the Nahuas apply an impressive model of their own community to non-human communities and entities, (Knab, 2009; Téllez, 2016), which not only carry ontological beliefs that are based on a set of relationships from their own "human" communities and that come from a set of responsibilities; including authorities, rituals, families, and human like functions. (Knab, 2009) These communities are spread out in places inaccessible to most people, either under water or in mountains. These non-human populations, however, are not closed to the world; there is access to certain humans, such as shamans who can communicate with them in caves, streams, mountaintops, lakes, as well as within their own houses, the fireplace or within the altars for the dead. (Knab, 2009)

This type of communication and relationship with the non-human entities or spirits as some would call it, fall to the shaman and his training as mediator in these affairs. In the mountains of the Sierra Norte these beliefs continue to be held by many of the local residents that I spoke with. It is of course a very different ontology from the Western perspective, or even the mestizo view of the environment and of how disease and illness come about.

Hegemonic Medicine versus Traditional Medicine

Mesoamerica is unique in the number of traditional medical practitioners that practice. The area has an abundance of: *curanderos, herberos, chamanes, hueseros*, *parteras, sobadores, pulsadores, chupadores* among the many traditional specialties coexisting with Western medicine.

It became clear to the Spaniards shortly after colonization that native healers were very adept at using herbs, mineral massages, incantations, rituals as well as implementing various corporal and spiritual techniques. Spanish Franciscan clerics were quick to take advantage of this and established hospitals in the 16th and 17th centuries where both Spanish and native doctors could attend to patients. (Campos Navarro, 2001) However, during the colonial period native healers in general were demoted in status and generalized into a single category: *curandero*. This term quickly became associated with witchcraft and charlatanism and the Spanish Inquisition mandated the extirpation of idolatries, which in their process, did everything to destroy local health systems and medical knowledge that had accumulated over centuries. Nevertheless, although demoted and devalued, their expertise continued to develop despite the colonial efforts to repress them. As a result, indigenous healing began to incorporate African as well as Spanish practices within the indigenous epistemologies. (Coronado, 2005)



19

It is not surprising that Western Medicine becomes the official medicine in Mexico, historically, the European colonial countries imposed their customs, their ways of thinking, as well as their set of rules, laws and regulations that controlled the daily life of most colonials. Despite the Independence movement from Spain, the Criollos and the new Republican governments, as heirs to the Spanish Crown, maintained essentially the same "ideological superstructure" as when under Spanish rule, as well as the same legal system, to match the new country's s diverse cultural and economic heritage. (Zolla, 1980, p. 38)

It was during the nineteenth century when European influence was particularly strong and in the case of health, discoveries and epistemic processes that arose within the western culture during this period gave rise to the birth of what Menéndez (1988) has called hegemonic medicine. It will later become institutionalized and imposed by the Mexican Government to the people.

Later, the Mexican Revolution made Western medicine the model for the public healthcare sector and in doing so made any other form of healing that was not Western a less effective form and was thus excluded. During this period the many indigenous cultures of Mexico were considered as part of the nation that was forming and efforts were made for integration, and as an example, intermarriage was encouraged as proposed in *La raza cósmica* by Jose Vasconcelos. (Vasconcelos, 1966)

Despite an apparent obsession with the past, and without linking this cultural recognition to contemporary indigenous health, education, and welfare problems they were not considered relevant by the government. Showing paternalism, the government chose to try to integrate the indigenous people into a modern mestizo culture, encouraging a preferably urban, school educated, working class with, of course, an allopathic medical program. This policy could be viewed as deliberately racially profiling indigenous people as being better off becoming mestizo or blending culturally and/or through marriage. Unfortunately, during this period native healers and *curanderos* were demonized and declared as not "suitable" or as being out of place in the 20th Century. (Vasconcelos, 1966)

Two forms of medicine come into being, first, pre-Hispanic medical traditions combined with early Spanish European traditions and African healing traditions becoming known as "traditional medicine" as a syncretic mix. Secondly, Western medicine or the "official" medicine is the form that the government provided for the people.

Hegemonic and scientific medicine, as managed through IMSS and ISSSTE (Mexico) in general, has very little if any relationship with or acknowledgement of traditional medicine. It is usually practiced in rural areas as well as in urban communities of poverty, where traditional medicine is most present. However, there is

often conflict between the traditional therapeutic practices and the State's hegemonic "official" medicine, that the State appears to use as a form of social control.

The three overlapping sectors of the local health care system (popular, folk, professional) are combined in a single professional and cultural system. The professional sphere incorporates the professionalized, legalized, Western medical system of the town, including the local clinic, dispensaries, and pharmacies. The popular sphere, incorporates mestizo and Nahua individual, family, relatives, local area and town beliefs, and is the largest segment in Cuetzalan, Puebla. It is at this level that health-seeking activities, symptoms, and illnesses are first defined. The folk sphere consists of the explanatory models and practices of the various groups of traditional healers. (Tedlock, 1987, p. 1073)

After finishing the interviews and interactions with the local people, it became clear to me that there continues to be a prejudice against traditional medicine, some criticism may be stemming from racism or elitism but nonetheless, it continues to be subordinate to allopathic medicine in most of Mexico and by many mestizos in Cuetzalan. Indigenous doctors are still often referred to as charlatans, not being scientifically trained and accused of having little sense of what they are doing. Even though I have come across traditional practitioners that appear to be charlatans, those who take advantage of the illness of others for personal profit is not common. This is somewhat different with respect to tourists seeking traditional medicine as local healers may charge considerably more for the same therapeutic service.

Thus, allopathic medicine continues to view indigenous medicine as an archaic grouping of healing beliefs and superstitions that do not apply to the paradigm of science. In view of this prejudice, I believe that Western medicine could learn a great deal from some of the direct and effective traditional techniques that use herbal and

plant based remedies, massage, dream therapy, breathing techniques, pressure points, as well as well as the therapeutic use of entheogens.

It has become clear to me that the perceived Western superiority can perhaps be attributed to a neo-colonial mentality that belittles indigenous healing and encourages a colonial perception of these healing traditions. For pre-Hispanic cultures, religion and medicine were originally one and the same, but with the arrival of Europeans, it was religion and the military that became the same form of suppression, repression and domination. With the rise of Western scientific medicine from Europe centuries later, and then from North America, secularization became the norm and the separation of religion from medicine became very pronounced.

A more personal example of these perceptions of different healing practices became very clear in my own home. My parents clearly believed in the absolute authority of Western medicine while many of my caregivers or babysitters, who were from Latin America, gave me a different kind of healing, which I became exposed to and did not disregard or dismiss out of hand. My parents, however, belittled or made fun of the teas, poultices and dream remedies that I had begun to be exposed to and begun to use.

These practices were considered exclusive practices of indigenous or mestizo groups, folk medicine or even witchcraft and therefore were stigmatized and ignored because of my parent's lack of understanding of their context, based on their worldview. They did not give credibility to the various therapies I had learned about and were quick to whisk me off to the Western doctor for a cold or the flu. Traditional medicine practices were, from their perspective, to keep me entertained but not to be taken seriously.

Perception of Illness and Imbalance

States of health and illness in traditional medicine are closely related to states of equilibrium and imbalance. A sick person moving between the three sectors (popular, folk, professional) encounters differing medical languages, epistemologies, explanatory models, and activities, since the clinical realities of the three sectors and their components differ considerably. The concept "clinical reality" was coined by Kleinman to refer to all health-related aspects of social reality including attitudes towards sickness, clinical relationships, and healing activities. (Tedlock, 1987, p. 1071)

Because the Cuetzalan area is a rural population where general poverty is part of the reason many people seek the help of a traditional healer or shaman for most ailments, because going to the allopathic clinic, which is more expensive and not really open to barter, discourages indigenous use. By contrast, many traditional specialists will accept barter or charge very little. A *curandero* will provide herbal cures or a shaman will treat the imbalance in the body through a healing ritual.

Many of the non-physical ailments represent in themselves culturally understood cultural afflictions. Some of these are: *Los sindromes de filiación cultural*: 1) *Aires* 2) *Susto* 3) *Bilis.* 4) *Caida de mollera* 5) *Cuajo* 6) *Daño por brujeria*. 7) *Empacho* 8) *Ixtlazol* y *entazolado* 9) *Mal de ojo* 10) *Motolines*. 11) *Quemada* 14) *Verguenza*. 15) *Asombro.* 16) *Espanto*

In the Western medical context, most disease is thought to be caused when the body is either invaded by a pathogen or when a physiological process of the body malfunctions, as in cancer or diabetes. In these cases, diagnosis and therapy are designated to locate identify and to remove or correct through surgery or with the use of drugs. It is generally not a preventative process. Western medicine focuses on

physical cause. By contrast, Nahua or traditional medicine looks for what may have caused an existing ailment or problem in the patient's body to become vulnerable to an illness or disease. Traditional medicine practitioners try to determine what caused the imbalance between the patient and the physical and social surroundings. Again, the object for shamans and traditional healers is to restore balance and then treat the illness or disease.

In Mesoamerica, illnesses are often considered signs of an imbalance in the body and therapeutic treatment is aimed at restoring harmonious body functions and processes in conjunction with the cosmological order. Illness may be caused by disturbed emotional states such as fear, envy, anger or intense emotional stress. This will often cause body temperature to go up. Micaela of San Andrés would often warn her patients against drinking or bathing in very cold water in a stream when one is overheated, or eating cold foods when the body is hot, as it will cause cramps and other illnesses.

Children who have a weakened resistance may become ill after contact with a person with strong emotions or desires; *mal de ojo* is an example of this ailment. Heightened emotional states such as tantrums in children often result in physical ailments such as fever or stomach aches. Eating while angry will often result in stomachache or diarrhea based on the imbalance of an internal condition.

In adults, emotional distress follows a very similar path as that of children. Don Lucio told me that often conflicts in the family or with neighbors are healed with a ritual. A traditional medicine practice is integral. It is a therapeutic system that encompasses different notions than Western ones, beginning with the worldview, human beings, life, death, health and illness or disease. Those who participate in a traditional medical system share a belief of the world, a concept of the world. The

therapeutic methods are complex involving elements, such as the notions of illness-health, the attenuating diseases, the methods and therapies used to treat ailments, and the diversity of ritual specialists, those men or women who practice and who are called *chjota chjine* or *tepahtini* in the two cultures that I studied.

As in many other Mesoamerican cultures, the multiplicity of essences or pneuma entities, "souls" that inhabit the human being, are not effectively linked to the body and can escape or be extracted from within. A sudden fright *susto* (be it the result of a fall, of a shooting or an accident, the sighting of a dead person) can cause the exit of a soul from the organism. It is the so-called horror, which is very common in many communities and, according to the specialists, is the most difficult to correct. Also, a *li-katsin* the breath of life in Nahuatl, similar to the *tonal* can be caught by someone who covets good mood essences, such as earth, rainbows or water. Whatever the departure or loss of an intimate substance, it is another of the ills that only a *kuchunú* or healer-shaman can face and solve with his knowledge and ability. (Vacas Mora, 2010)

Instead, illnesses are distinguished at the primary level by an external versus an internal origin of cause. The external environment is viewed as containing dangers to one's well-being, such as rain and wind, while 'personal' illnesses come from improper diet, fright, weakness, anger, lack of cleanliness or an emotional or spiritual imbalance. At the second level, illnesses are distinguished according to seriousness, and at the third level according to the life stage of the typical victim. (Tedlock, 1987)



20

Diseases sent by humans are categorized as bad because they resist treatment, while diseases sent by God are categorized as good because they are curable. No single disease has constant properties, there is a good deal of ambiguity of diagnosis involved in all temperate diseases as well as in some “cold” diseases. During an illness episode one must consider not only whether it is hot, cold, or temperate, but whether it

is God-sent (curable with a simple remedy such as a cold medicine for a hot disease) or human-sent (requiring the services of a healer to locate the social cause. (Tedlock 1987 p. 1071; Furbee & Benfer, 1984 pp. 305-334)

Introduction to Shamanic Healing

The *tepahtini* or shaman, doctor or *curandero* is gifted with therapeutic techniques for healing from a number of different ways, there are some exclusive for the ritual specialists in the Nahua culture named *ixtlamatque* "those who know", who are distinguished by being born with *iixtlamachilliz* "a gift of knowing". They can be men and women at any stage of their life. Each *ixtlamatqui* acquires his/her *iixtlamachilliz* in a particular way, however, there are general signs that everyone has or experiences, which allows them to be classified in the same order. Therefore, the expert in knowing and crossing these thresholds, is equipped with a formal knowledge about the type of discomfort that afflicts the patient, as well as the identity of the offended non-human, the quality and quantity of the required offering, and the prayers necessary to placate the harm. Although this knowledge is necessary, in the shamanic practices of the Nahuas, the *tepahtini* (shaman) occupy an important place especially during initiatory agreements with non-human entities, as well as their previous dream relations with these entities, either in matrimonial terms or in *compadrazgo*. Every shaman offers the sum of his knowledge as well as his individual relationships, which implies an exclusivity in each process, that is, he or she justifies only in so far as it is a representation of an intrinsic gift. (Knab 2009; Lupo 1989)

But if a shaman is an "extraterrestrial mediator", he is also an equalizer of inter-personal relations, based on inference and spiritual encounters, within his community. Certainly, a large part of the interventions that the shaman performs, on the spiritual level, are to resolve conflicts within the community, whereby there is a need to find the origin of the problem, heal the victim/s and remove the evil and sending it back to its source. This action can be interpreted, according to the modes of

relationship with non-humans proposed by Phillippe Descola (2006), there are two types of interaction between the two groups. One of these interactions is rapacity, in which one of the dominant manifestations is voracity and the preying (by a malignant energy) on those through illness in the psychic realm. The other is one of reciprocity and is evident in agriculture, where cooperative work between both collective effort manifests itself in rituals focused on fertility, which can guarantee human well-being. Thus, the tension generated between reciprocity and rapacity keeps a ritual specialist busy with his human counterparts and is explicable only in the equivalence he maintains with the others existing in the cosmos. (Descola, 2006)

For this reason, Nahua healing (classification) differentiates two large groups of suffering or illness. On the one hand, there are the disorders, caused by the interaction between humans and non-humans, associated with the capture or collapse of the soul or *tonal*; in the other case, the minor problems caused by conflict between neighbors and families of the community or human conflicts sometimes arising from *envidia* envy or *susto* freight (described later) which can result from human or supranatural freight (sometimes referred to as *espanto* or *asombro*), each require a different therapy. In both cases, the shaman is key to the resolution, either as a mediator or as a messenger of the offended spirit entities. Witchcraft is a third factor that needs to be considered, it involves a more complex mechanism whereby, a shaman in his role as sorcerer, may ask non-human entities to cause damage to a person or transmutes himself/herself into an animal to attack, through dreams, the *tonal* of another human. (La Barre 1970: 176)

In addressing paranormal or psychic entities, the *itonalli* is one related to the *tonáhtiuh* sun, summer, light, heat, and energy, the luminous spirit, said to be located in the head. Molina defines it as coming from the verb *tona* to shine or radiate. This concept has been equated with the "soul" for representational (simplification) purposes,

used by the Spaniards, but it has its own complexity, for Timothy Knab (2009) "it is the life force that brings heat to the body. It is responsible for an individual's intelligence and cunning" (Knab, 2009, pp. 112-113) "La fuerza esta sustancializada en algo que parece ser un aliento." The force emerges as a breath. (López Austin, 1980) This "soul element" is extrasensory, and distinguishes a person with a *tonal* from one without. The best way to check if the *tonalli* is in the body is to take the pulse of the patient, especially in the joints. It is for this reason that the joints are considered vulnerable to attack from invisible forces, sucking life energy or entering the body to rob the vital force.

Ruiz de Alarcón comments on the light of the *tonalli* as seen in a sick child, taken to a doctor and being examined to diagnose if his ailment was due to the loss of his *tonalli*. The child was placed before a pool of water so that his face would be reflected on the surface of the water; if the reflection was bright, the child still possessed his psychic entity; if it was dark it was proven that the *tonalli* had escaped. (Ruíz de Alarcón, Richard, & Ross, 1984)

It should be noted that the *tonalli* was a force that determined the psychic/spiritual strength of the individual; that it gave her/him a particular temperament, affecting future behavior, and that it established a link between a human and the divine. (López Austin, 1980) The *tonalli* "leads the individual's destiny on earth, above the earth, as well as in heaven." (Knab, 2004: 32).

In Cuetzalan, the characteristic that best distinguishes a shaman from the rest of the community is a spiritual one, one recognizing the attribute *tonalchicahuac*, having a strong or powerful *tonal*, a distinction that makes reference to a tonal that is more resistant than the rest, within the logic of *tonalismo*.

In addition to this quality is *nagualismo*, locally understood as the ability to voluntarily take the form of certain animals sometimes predators, as well as certain

natural forces such as lightning, rainbows or the wind. This transformation usually takes place during dreams but can sometimes be induced during wakefulness. In those moments, shamans with this capacity, can affect the spirits of others, damaging corporal health without the victims being aware of it.

Seers and sorcerers are thus in a field of conditional definitions where they can be healers or sorcerers or one in the same; sometimes malignant beings, feared for who they are, but in the same light, also healers. Thus, while the *curanderos* (or shamans) rescue the captured spirits of humans that may be devoured by the non-humans or the *nahuales*. Shamans are said to try to harm the *curandero/shaman* in his/her attempt to rescue the spirit. This contradictory behavior is not a confusion but a fundamental characteristic of a shaman: duality; given his/her ability to consume psychic entities (beings), perhaps coming from a basic predatory principle.

In this way, shamanic knowledge is characterized by a perceptible alteration. Each ritual specialist has the ability to dialogue with non-human entities in order to seek help for their vulnerable fellow humans. Hence, healers are often compared to government officials, lawyers or investors within Western culture, who display a power of negotiation, whose scope exceeds local knowledge and ability. These ritual specialists are often identified with the coyote, an image of the dominant outsider, in this context the Nahuas summon their own *mestizos* or outsiders as figures that exert control and power over the world, and essentially become "equivalent" to the traditional non-human entities. (Barrera Caraza, 1994; Vacas Mora, 2010)

We know that shamans associate with certain entities or powers through dreams and receive *el don* (the gift), which allows them to recognize and communicate with non-human entities in order to intercede on behalf of their fellow human beings as shamans. Next, we have seen how *tonal* functions with companion animals, to transmit

specific qualities in each subject and at the same time to "live" in another place, located in the mountains or away from the source (person), they lead a parallel existence that affects the health and fortune of their human counterparts.

Teyolía, (toyolía, yolía or iyollo), tonalli, ihíyolotl

In order to discover the relationship between the beliefs of the ancient Nahuas with those of the present indigenous peoples, it is necessary to know which are the most common terms used by the ancient Nahua to describe the heart , "soul" and/or "spirit". The ancient Nahuas used the words *tonalli* that lives in the head, *ihíyotl* in the liver or gut, and *teyolía* or *(toyolía, yolía* or *iyollo)*in the heart and veins. These were the vital substances *of* Nahua beliefs as well as many pre-hispanic people. In Spanish, they are associated with the word *ánima* soul force. It should be said that these explanations and comparisons are reached in the context of our Western interpretations.

Teyolia:

One of the characteristics that can serve as a basis for identification is that the *teyolía* was the supernatural or paranormal entity of mind that visits the worlds of the dead. However, the *teyolía* is said not leave the animate body until death, unlike the *tonalli* that leaves the body in life and does frequently. It was said it was the entity that traveled to the Sky and the Sun, that it goes also to the world of the dead, and that in the sky it was transformed into a bird. Sahagun wrote from his contacts and called this spirit: *Yollotótotl*: *ave del corazón* heart bird, implying that when we die the heart becomes a bird. (Lopez Austin, 1980) *Yolía* literally means "the vividor. Both *yolía* and *yóllotl* derive from *yol*, "life", and are linked to the ideas of reflection, sensitivity and thought.

McKeever Furst (1997) confirms this conception: "The Mexica knew it in the living body as the breath. Although it entered the flesh with the infant's first gasp, it lodged, not in the lungs, but in the heart. The association of respiration and heart is logical because breath and heartbeat coincide during exertion and rest."(Furst, 1997;

1998, p. 213)

The concept of *tonalli* is taken from the ancient concept of the "shadow" and was associated with the danger of loss, and the attempt for relocation and treatment required for relocation and recovery. The objective being the recovery and return of the *tonalli* to the individual.

Aguirre Beltrán (1963) in his book *Medicina y magia; el proceso de aculturación de la estructura colonial,* which he identified from his research: children are prone to the exit of the *tonalli* by the imperfect ossification of the fontanelles; the *tonalli* being related to the Sun, *Tonátiuh*, require healing offerings made to the solar god; during the colonial period the concept of the *tonalli* became distorted as a result of Catholic influence. It is not equivalent to the concept of soul in the Western sense; lack of it is sometimes is referred to as soul-loss. Treatment involves recovery and relocation; "shadow" perhaps derives from African influence, since in Western Africa (from where many forced laborers to the Americas were from) there is a belief in a personality counterpart, called "shadow" in many West African languages. Later, Lopez Austin (1980) added that the *tonalli* is a force that gives the individual vigor, warmth and courage that allows for growth. It is strength and is substantial, despite it having the nature of a breath. (Aguirre Beltrán, 1963; López Austin, 1980)

Tonalli:

With respect to the first mention of *tonalli* in the Florentine Codex and the Codex Vaticanus 3738, there appears to be ambiguity in the depiction of how human beings were born or created. The general belief is that they were inspired and created by *Ometéotl* a dual god formed by two partners, one male and one female. The male portion is *Ometecuhtli* and the female is *Omecíhuatl*. This dual god lived in twelve heavens and male/female (not necessarily gender based) and their respective *tonalli*

were born in one of the nine highest stellar floors. Josefina García Quintana translates that the human being was melted, "drilled in the house", in the place of duality, in the place of the nine confluences, and explains that the Nahua used a metaphor that compares the child with a molten jewel…" (Quintana, 1969) *De allá viene su tonalli, penetra en su interior; lo envía Ometecuhtli.* The *tonalli* penetrates into his being via *Ometecuhtli*. There is a double meaning produced by the play of words; creating a poetic image; the other, to express a deeper concept. *Picia* in Náhuatl means to melt; but originally it is to blow, according to Lopez Austin (1989), it alludes to the fact that a vital force has been "breathed" into the child. *(... otipitzaloc, otimamalihuac in muchan, in Omeyocan, in chicunauhnepanyuhcan…).* (Lopez Austin, 1989)

Book IV of the Florentine Codex alludes to the *tonalli* as a form of temperament and is presented as an integral part of the other two vital energy forces, the *ihiyotl* and the *teyolia* and that there was extreme importance in maintaining a balance between the three to avoid one harming the other or all three creating an imbalance. The *tonalli* was thought to be lodged in the head and that the curative and preventive actions of illness or diseases related to it were directed mainly at the crown of the head (*mollera*), the forehead, the face, and the hair. However it was thought that the vital psychic force of the *tonalli* extended throughout the body. Today it is said that blood is its vehicle. (Don Lucio, interview December 6, 2018). Lucio said that a hemorrhage involves the loss of shadow or "tonalli" and the most direct way to check if the tonalli is in the body is to take the patient's pulse, especially in the joints. He believed that the joints are prone to attack by invisible forces that suck out their energy or enter into them to steal the life force. He told me it is believed that when these forces enter the body, the concentrations of "shadow" that are normally in the places where the pulse is felt slowly recede towards the heart. When they all arrive, death may occur.

The ancient Nahuas felt that *tonalli* was indispensable for life. One could not live without it. It was the psychic entity that produced the growth of a child, and the faculty that allowed for thought. Because of this belief, Nahuas today, who have relatives with dementia or alzheimer's, and who take medicines against madness, placed the medicine both on the head and on the forehead. (Doña Micaela interview February 20, 2018) believes that the *tonalli* is responsible for wakefulness, appetite and good energy.

One of the characteristics of a *tonalli* is its ability to leave the body and today several of my contacts say that it is free, like a free energy and can move about unless captured by a *brujo* or other malignant spirit. However, Aguirre Beltran (1963) and Lopez Austin (1980) claim that in pre-Hispanic times it would seek refuge in small animals. (Foster, 1943) Foster mentions that it can even introduce itself into a small insect. Apparently, these animals are only carriers, since in Pajapan, Veracruz García de León claims that the carrier, a grasshopper falls dead at the feet of those who participate in the shadow recovery ceremony, precisely at the moment when it is assumed that the shadow returns to the body. (Garcia de Leon, 1967) It was not always an animal that acted as a carrier but sometimes plants. *Tlacopatli* was a plant used against cold diseases and to strengthen and revive the strength and vigor of a person. Even though the plant has a strong odor it was said to act as cover for the *tonalli,* especially of children. (Foster, 1943; Garcia de Leon, 1967)

I have described the departure and travel of the *tonalli* through the fontanelles but have not distinguished between routine or customary departures and their absences and those due to an accident, illness or death. Among the causes of normal absences are: the state of unconsciousness, drunkenness, illness, or sexual intercourse. Don Lucio (interview February 19, 2018) mentioned to me that it is very

dangerous to suddenly or abruptly wake up those who are sleeping, because of the shock, and can result in the loss of shadow. If this occurs, it is said that the shadow *tonally,* left in this manner in the dreamscape, can become lost among the dead or the energy spirits and thus becomes vulnerable to capture by malignant spirits (a type of *susto*).

There are certain diseases that are attributed to having intercourse in a weakened state, such as for a new mother having recently given birth. Other diseases are attributed to people who have just recovered from an illness or people or those with a diminished life force. The origin of these health hazards can be caused by the two emotional aspects of intercourse: the first being the exit of the *tonalli* during sexual intercourse; the second, being the activation and exit of the *ihyotl* (one of the vital forces described later) after sexual activity. Damages suffered by the *tonalli* outside the body may cause the illness or death of an individual; the liberation of the *ihyotl* after intercourse, may bring disease to the individual, the death of animals and the impairment of things that were close to the participant.

A possible interpretation of the danger attributed to the interruption of intercourse would be to consider an orgasm as a way to regain the balance that was broken by sexual appetite and arousal, and this balance as a necessary condition for the return of *tonalli* which an orgasm provides. It is also noted that there is a correlation between the sudden interruption of sleep and that of intercourse. (Bernardino, 1969; López Austin, 1989)

Ihíyotl:

It was believed by the ancient Nahua that life, vigor and passions resided in the liver. Recently, when I was in Chicontepec, Veracruz, several of the healers referred to the liver as *ánima,* this is also commented by García León (1967). They believe that the

life force and one's energy come from the liver. It was also said that the ancient Nahuas according to Sahagun, that appetite, desire and greed came from the liver. He also notes that anger and loathing were centered in the liver which appear physically as thick, greenish-blue, and cause anger in people. His contacts told him that it was conceived as a luminous gas that had properties to influence other beings, in particular to attract them, animal or object from where it is expelled. (Garcia Leon, 1967)

Doña Micaela will massage the stomach area where the liver is located, attempting to dislodge any of the impurities that she claims may have accumulated. She calls it *xoquía* and imagines it as a cold gas like air, but different from ordinary air, because it is so dense and foul-smelling and fetid, which she says emerges like a fart. In addition, a large number of diseases today are considered products of shifts in the vital forces expressed as strong mood disorders, causing imbalances. (Foster, 1967) She says that many today associate this with spillage from the gallbladder that poisons the body, "because the bile is very strong, because the bile mixes with blood and spoils it." To help the liver Micaela often cleanses her patients with a tea of dandelion root, peppermint or *hierba buena* (mint), and licorice root. Micaela (interview February 8, 2018)

In summary, the three psychic energies and corresponding fluids are located throughout the body but are concentrated in the head (*tonalli*); in the heart (*teyolía, toyolía, yolía*); and in the liver (*ihíyotl*). These three entities which have been described through the centuries, remain in the beliefs and cosmovision of Nahua practitioners and patients today. They are considered divine gifts making life possible but none of them is held exclusively by humans. The *teyolía* is inextricable from the living human being; on the other hand, the *tonalli* leaves the body in normal and abnormal ways, and the body takes it back spontaneously or it can be relocated by therapeutic procedures. Some

human beings can emanate harmful *ihíyotl* in certain circumstances.

The different psychic functions of these three entities range from the most rational being the *tonalli;* the most passionate or emotional being is the *ihíyotl*; the most important being is the central entity, the *teyolía*. All three must operate harmoniously to result in a healthy, mentally and morally balanced individual. Any disturbances in one of them, will affect the other two and create an imbalance. (López Austin, 1980; 1993)

Some Methods of Healing and Medicine

The use of herbal remedies, massages, incantations, prayers and rituals, and the use of hot and cold temperature variations are some of the healing therapies utilized by many of the practices. The knowledge in these practices comes from systems of thought and world views that are very different from the West. It takes into account vital forces, energies, moods and emotions that in their worldview play a significant role in the cause of disease. The practitioners are known as curanderos, shamans, traditional doctors/healers, and ritual specialists, but there are hundreds of names for these doctors in the Native languages.



21

An example of a shamanic practice, one of many, is a shaman's induction into a hypnotic-like state, an altered state of consciousness, with heightened

suggestibility and sensitivity, whereby s/he gains a clear perception of the abundance of meaning and signs surrounding the patient, and then applying this perception to diagnosing and beginning therapeutic intervention. Curanderismo, is the general term for all traditional practices that academics and many people use to describe these practitioners. These healers come from religious and folk health practices that emerged from the colonial encounter between Spanish Catholics and indigenous North Americans and Mesoamericans. (Eliade, 1972)

All therapeutic and healing rituals involve an offering to the spirits or dieties. Then, they are asked if they could show the causes and origins of the illness or disease in the patient, as well as the therapies necessary to begin to heal the ailment. The objective of the healing ritual is always to retrieve the physical and spiritual balance of the sick person. Those responsible for performing these rituals are numerous, including shamans, diviners, ritual specialists, midwives (*parteras*), those who give massages, bonesetters (*hueseros*); all traditional medicine specialists. But, in very extreme cases, when no specialist is around, the head of the family or relative, a trusted friend or acquaintance, can be called to perform a therapeutic procedure, as long as s/he knows the customary way of the performing the ritual.

In these rituals the therapeutic procedures to be followed are ascertained; on other occasions the necessary plants are sought so that the patient can have teas, *bermejas (*essences or potions*)*, *limpias* cleansings, or *baños* baths or soaks. Sometimes, there are very long therapeutic procedures, in which several rituals are performed until healing can be achieved; among these are cleansings, divination, and the Temazcal.

Each case requires different procedures because each shaman works according to his/her experience and what they have learned on their "journeys" as a "person of knowledge". Each therapeutic ritual adheres to a common structure which

is mutually known, by patient and practitioner.

What I have observed in traditional practices in Southern Mexico is the intrinsic relationship between many historical myths and the curing/healing rituals performed within a timeless place with no time referents. These specialists or doctors, take on and become purveyors of mythical deeds which, through their ritual practices, recreate the cosmic stories, while using an historical context, that leads them through the different cosmic planes, from which they project their senses and energies that embody the sacred entities themselves.

Depending on the ailment specified, *curanderos* will sometimes convene through dreams, meditation, or consultation of crystals or magical objects, the shaman may perceive a *mal de aire* "air intrusion" or *susto* or other imbalance, that may have caused the abandonment of a spiritual essence (*tonalli*) from the patient's body, and the healer will act through exorcism or "endorcism", that is, the expulsion of the malignant element from the body (air or other cause) or reintroduction/re-installing of the absent element in the individual after its flight, depending upon the situation. These procedures are necessary to enable the re-introduction or expulsion experienced after a difficult path back to the patient in order to restore balance.

Another form of healing is the *limpia* cleansing with specific plant branches, eggs or feathers. A *limpia* is a traditional system of healing through the transfer of natural energy drawn from the earth, moon, ocean, and transferred to the patient. A *limpia* can also be the first treatment in soul retrieval, needed when a person has experienced a *susto*, fright or *aires,* a trauma that has dislocated part or all of the "soul". This therapeutic procedure removes negative and harmful energies from the body and introduces healing energies from *madre tierra* the earth through the branches of laurel, *estafiate*, rosemary or other plants, helping to restore balance to the person whose health

has been compromised. Starting from the top of the head and continuing down to the feet, the *curandera*/o uses the branches of herbs and/or an egg, or feathers to sweep and rub the body from head to toe.(Hendrickson, 2015)

With the same set of terms used in *curanderismo*, Eliade (1972) discovered that North American shamans treat ''soul loss'' in the same way for finding and restoring the patient's fugitive soul. In the description of shamanic rites of the Paviotso Indians (Paiute), Eliade related that the shaman enters a trance not only to recover a lost soul but also to determine the cause of the original loss or other associated illness. If during the trance the shaman ''sees the image of the whirlwind, it is a sign that the illness was caused by a whirlwind; if he sees the patient walking among fresh flowers, a cure is certain; but if the flowers are faded, death is inevitable; and so forth.'' (Hendrickson, 2015)



22

A curer or healer (tepahtihqui, tepahtiani) attends to almost all medical

problems, including those thought to have supernatural causes. He or she serves in the capacity of pharmacist, diagnostician, diviner, based on his or her ability to diagnose a patient's physical health and social relationships, in order to perform an exploratory "socioscopy" comparable to a biopsy in Western allopathic medicine. (Nash & Hernández Ceballos, 1975, pp. 132-140)

The popular sector borrows much of its information about herbal and patent remedies from the professional and folk sectors, mixing together tablets from the pharmacy with herbs bought in the market, grown in the patio, or collected in the mountains. While herbal medicines usually are used alone without patent medicines, patent medicines are rarely used alone. Thus, Western medicines have been added to the total treatment regimen rather than replacing indigenous herbal medicines.

As an example of this mixing, when I asked Micaela to rank lemongrass, Aspirin, and vervain on the hot-cold continuum, she began by saying that Aspirin is very hot but that since headaches are also very hot and sometimes even fiery hot, by itself Aspirin would not be the right remedy. But once it is dissolved in tepid water with sweet, cool lemongrass, it is fine for calming a headache. She said that vervain, when cooked and made into a poultice, is very hot, even fiery hot, because it stains the skin bright red, contracts the blood vessels, and releases steam through the skin. Thus she combined color coding (red is a dark, 'hot' color) with a perceived 'hot' effect on the human body. When she was asked why a hot poultice is used on a hot illness she remarked,

"Well, it's because it works! You only think about hot-cold when you're not sure what to do. In my family we have some knowledge, we have many curers."

Another example:

"We were ill, my wife and I, very ill with the flu or *gripe*, "pounding chill". It was a pain to get up but I went out under the trees to rest a little in the shade. Then in the afternoon we took two aspirin tablets. When it dawned again I felt somewhat better, so I went out again to get rid of or to breath deeply, the air. Little by little I was getting over it. Here in the center, when one wants to go out, the air, well, it carries many microbes. Now, where we are in rural Puebla, the aroma of plants is what we breath. Plants with strong odors, are good for colds. This one is good for a cough (sage). When it is dry, one takes a couple of branches, puts in some cinnamon and a *piloncillo* sugar, and has just one drink. When one takes this, one it cures the throat. That's what we did. Then we heated up the *temazcal* and took some sage branches in with us to help us breathe a little better." Alberto (interview, February 15, 2018)

In the course of this research I have come to see many forms of healing that do not follow a Western or allopathic logic and linear progression. Whether bone setters, herbalists, midwives, temazcal leaders, shamans or the many manifestations for healing in the two areas that I studied, we find not only different approaches but effective means for healing that match cultural expectations and definitions for the identification for illness disease and subsequent, healing.

From some of the cases reported in the research I have seen how curanderos and shamans associate with certain entities or power spirits, through sleep and dreams and receive an insight, from non-human entities or helpers, in order to treat their peer patients. I have described how these healers receive help from companion animals and spirit entities, that transmit specific qualities to each subject and that in the spiritual realm, lead a parallel existence that can affect the health and fortune of their patients. In the case of a missing *tonalli,* it is effective if the *tonalli* is retrieved and re-inserted. We live in a constant dynamic of spiritual hunting in which people are usually prey (possessed) to the flying malignant spirits.

Lucio Flores.

Don Lucio is a shaman whose principal specialty is in bone setting. His father don Inocencio, was a very well-known shaman from San Miguel Tzinacapan area. He was known not only for his ability to heal but also had the ability to harm with sorcery.

I observed him at work when a patient came to see him for a strained back

estiramiento de las cuerdas, a condition that affects the muscles and is mainly attended to by *huesros* bonesetters who claim that it occurs as a result of a forced or abrupt movement that the patient makes, either during work or at play. This movement forces certain tendons to stretch too much, giving rise to the intense pain due to the inflammation caused by the stretching; many times, the pain prevents him/her from moving. All of these specific symptoms are useful for the diagnosis, which is established by the pressing and palpation of the painful areas, in addition to asking a lot of questions so as to know the possible causes that initiated the condition.



23a

The treatment consists of first applying *hierba del golpe (oenothera rosea)* and then massaging the painful areas specifically, with the purpose of numbing them and then doing deep pressure massage. He only works with this oil that he prepares and uses to massage and deep rub. He prepares this remedy by macerating *hierba del golpe* in corn or safflower cooking oil. After a few weeks he filters it and stores it in the dark.

The herb grows along the banks of roads in the area. It is considered a medicinal plant with various active ingredients; used as an analgesic, for healing scars, disinfecting and especially as an anti-inflammatory.



23b

Another of the most common diseases is *mal de aire* wind or air illness or *ehecat*. Don Lucio told me that there are harmful airs and "enchanting" airs (Lupo, 1991, p. 354). The *aires* winds that inhabit places like caves, where they are seen as generators of good health, this is where you usually take offerings. (Montoya Briones, 1964) Bad winds usually come from the north, so when bad weather or devastating winds begin, they are called *nortes* which refers to their destructive capacity.

For Signorini and Lupo (1989) …"airs" can bring the intrusion of a spirit. Penetration can occur in two different ways. The first by a scare, caused by the appearance of a master *cuali ehecat* with human or animal semblance in terrifying attributes. The doors of the organism are more easily disturbed by the weakening of the resistances provided by the *ecáhuil*. The path of entry of the malignant fluid is respiration, "forced" by fright or by a violent reaction. (Signorini & Lupo, 1989, p. 137)

The second possibility is of a surreptitious nature: the *ehecat* of course cannot be seen and is inadvertently introduced into the victim, who will realize this intrusion only later, when the symptoms of the disease become evident. This is the normal method of "infection" of these guardian spirits of some particular places like caves or mountain areas, and often also of the *nahualmeh*, as long as they do not consider it appropriate to expose their own *tonal*. In this second case, the way of penetration is always through breath.

Signiorini and Lupo (1989) state that the *mal aires* can emanate from the bodies of the deceased, the spirits of the deceased can enter the bodies of relatives, Lucio told me that it is not recommended for children and the sick to walk in the cemetery because they can catch this air or spirit of the dead. This is often heard in the

community.(Signorini & Lupo, 1989, p. 137)



24

El Susto / Fright

In this part of rural Mexico, the idea or concept of certain cultural or traditional diseases is strongly rooted in the rural areas; to a lesser extent, it is believed by people of the cities. It is in the regions furthest away from urbanization, where traditional medicine is strongest or most common, and one can find and be attended to by specialists who can diagnose and provide a therapy to treat most common ailments.

There are different conceptual systems applied, based on a culture's own knowledge and assumptions about healing which are quite different from the notions and axioms that govern scientific medicine, which should not imply that it is less effective in any way. As mentioned before, the most common diseases of a cultural nature, called by Campos-Navarro (1997) "culture affiliation syndromes" ("*síndrome de filiación cultural*") include: *susto*/fright, *brujería*/witchcraft, *mal de aire*/air illness, *mal de ojo*/evil eye, *empacho*/stomach gases and pain, *caída de mollera*/ fallen fontanelle, these are among the many illnesses that are characteristic of a this particular cultural system. (Campos-Navarro, 1997; Rubel, 1964)

El susto, a shock or fright, is a disease that is attributed to having a strong scare or some type of collision, where the environment and the person become entangled; from this, there may be four types of shock: with air, with water, with fire and/or with earth. In the Sierra del Norte, *susto* is called "nemouhtil" and can be attributed to the loss of the "tonalli" or "*alma"* in Spanish. The *tonalli* (previously described) is the "light" and the heat that illuminates the destiny of each person, the opposite element is the "shadow" or *ecáhuil,* it also nests in the head and can be dislodged by strong impact or "fright".

"…etiology is founded on the belief that a frightening experience can produce an

> illness so severe that it may end in death. Sometimes the ailment can be directly connected with a traumatic experience, when it immediately follows that experience. Sometimes the cause is established by arousing the patient's memory or by mystic revelation.“ (Signorini, 1982, pp. 136-137)

Before a case of "fright", the healer must know what kind of "fright" caused the “loss of soul” of the individual; the departure of the *tonalli*. For the Nahuas there are “caretakers or owners” of the different places *dueños or dioses*, such as the hills, pools, rivers, etc. (similar to Chikones from the Mazateca). These entities are the ones that usually capture the soul (*tonalli*) in fright. When something like this happens and then, is told to the healer, it is s/he who must give an accurate diagnosis and determine as to the whereabouts of the sick person's *tonalli*.

The healer, to give the patient and his family a diagnosis, must first go to the place where the "scare" occurred, there he must make a series of “appeals” or attempted contact with the capturing entity. The healer in that place has to invoke the patient by calling him by his name on different occasions and ask that the owners of the place return the *tonalli* of the person. According to Nahua thought, the earth takes away the soul of the person beforehand, so the healer must speak to him or address the fire, the water and the air, calling them by their names, as well as addressing the earth, so that the capturing entity may release the *tonalli* of the patient.



25

Another way of looking for the patient's *tonalli* is through "oniromancy" or dream search. (Knab, 2009). This ritual practice takes place during the night, when the healer in his dream has to travel to the supernatural regions of Nahua cosmology such as the underworld or Tlalocan. There the healer interprets what he sees and with whom he interacts, everything that he remembers of the dream, both things and places become part of the diagnosis and a guide to knowing who has the *tonalli* of the patient and where it is.

The healer calls the patient's soul by name, and in doing so, while hitting the ground with a stick. Another technique is to fill a bucket with water and call the lost soul out loud hitting the bucket. There are also the prayers that the healers must make accompanied by offerings, all in the same place where the fright occurred. Don Miguel

(interview March 12, 2018)

When a patient has fright it generally will affect the throat, tightening the muscles. In this case, the healer implements a series of ritual procedures such as "paddling" that attempts to straighten the throat that has been affected by the fright, the healer or curandera/o, will insert the index finger into the throat to correct the ailment. Some vomiting may follow releasing the pent-up energy.

Sometimes the healer fails to return the patient's *tonalli*, and it remains outside of the body, somewhere in the hands of a supernatural owner who has seized and taken possession of it. If the healer diagnoses this, s/he has to hurry to find the patient's soul, as it may begin to deteriorate. Symptoms include a loss of appetite and ultimately lead to little desire to live, initiating a slow and silent death due to associated ailments. Many healers believe that this disease is related to diabetes.

Susto factors can be due to natural or supernatural causes. If it is natural, Saints may be summoned to intervene in the destiny of the person. If it is due to a supernatural cause, it may be due to the intervention of a sorcerer (Aramoni, 1990, p. 56).

Hot / Cold paradigm

In many pre-Hispanic conceptions of human life and of the gods, there is a conception of duality, particularly with respect to humans and the human body. It is often expressed today, with the perception of foods and medicine, with special consideration of cold and hot and their relation to a health balance and harmonization. This polarity is based on the distinction between things with a cold nature and those with a warm or hot nature. It is not based so much on the difference in temperature of things, but rather the characteristics and their nature which places them in a taxonomic system. It is thought that humans must have a balance of these opposites to maintain good health. This balance can be lost by external or internal forces; and in the same way, external factors and the patient's action upon these can recover the lost balance. (Foster, 1953)

There is today, to many with whom I spoke, a definite connection to the pre-Hispanic concept of universal polarity. According to the Florentine Codex and Nahua thought, the world is divided into two halves, the first represented as the Father, vital, bright and fruitful. The second is the mother, the earth, dark, wet and fertile. The polarity is represented in many things, plants, stars, days of the week, months, supernatural beings; all things fit into this classification. It has been argued that this system comes from the Hippocratic theory of humors from Europe but that two of the four humors: dry and wet, are not considered. More recently it has been claimed by Lopez Austin (1980) that it is truly a concept of the Americas and does not only apply to medicine and health. It is clear to me clear that the conception of a world divided into two opposite and complementary halves, one being a hot and the other cold, characterized among other polarity criteria, is logical enough to have occurred in

various parts of the world simultaneously. Contemporary indigenous medicine is not a medicine of pure pre-Hispanic tradition, as discussed earlier. In it, as in any Mexican rural ideological systems, are complex combinations of different origins.

Therapeutic procedures were recorded with which the body was balanced based on the cold-hot dichotomy. The procedures were not European, and went totally against the European ideas at the time, shocking the Spanish. Among these practices, for example, was the prolonged exposure of the naked body to solar rays or household flames, or bathing in extremely cold water or conversely in hot springs. These many practices were some of the causes for the deep contempt that many Spanish felt for indigenous medicine, which they judged completely removed from the theoretical principles to which they granted universal validity.

In San Bartolomé Ayautla, Oaxaca I spoke to Antonio, a *pulsero*, who worked with hot and cold. His belief was that cold was a female emanation and that hot was a male emanation and he would frequently apply this paradigm to determine if a patient's ailment was caused by a man or a woman. He told me if the pulse burns, the spell is from a man yet when it is cold it comes from a woman.

In May 2019, I spent some time with a family in Kaua a small town near Valladolid, Yucatán. Alfredo a family member, a practicing curandero told me that the heat produced while cooking food, takes on different forms. For example, traditional cooking in Yucatan is done as *pib*, a traditional underground slow barbecue. He said that it produces food of a cold nature if it is prepared in this manner, because it is cooked in the earth. Conversely, cooking food on a *comal* on stove-top or in a pot, the food will acquire a hot nature, as it is exposed to light. He explained that the *comal* and the pot were exposed to the sun, the sky, to light, whereas the *pib* is subterranean, in the realm of the cold humid mother earth, thus the food is rendered cold.

Later, in the chapter "Balance and imbalance of the human body", I will refer to it. (Lopez-Austin, 1980, p. 309)

By designing and eliciting divisions with just two general distinctions along the hot and cold continuum, investigators have produced lists of hot or cold foods, medicines, and illnesses. Behind the use of these reductive techniques is a belief that individuals in a culture, regardless of life experience or special training, share underlying 'emit' or 'native' taxonomies. This premise blinds researchers to differences between the medical epistemologies of lay persons and curers.

I would tend not to agree with Messer, (1981) who suggests that in most Latin American "peasant cultures", hot-cold is not part of the "intrinsic cultural symbolism" the way it is in Asian medical systems, but rather "an idiom used for post-hoc diagnosis of illness and curing." (Messer, 1981, p. 143). Furthermore, her belief that people would be driven toward "civilization" and want to shed "superstitious beliefs", is sufficient reason to discard the intrinsic beliefs in the duality. This is contrary to what I have been told by the curanderos in Oaxaca and Puebla.

Plants are also classified as hot or cold. Native references to cold and hot illnesses and medications were recorded from very early times and there is much evidence indicating the plant medicines for cold or hot diseases in Sahgun's work (1969). In Cuetzalan, I was told by several curanderos that plants that give off a strong pungent odor or have a bitter or astringent taste are considered warm. Thus, peppermint (*Mentha piperita* or *yerba buena*, is warm because of its strong aroma and bitter taste. Vervain (*Verbena oficinalis o verbena, xi'imche'* in Maya) is also 'warm,' although it has a relatively mild odor, but rather, because of its bitter astringent taste. People who use it as a poultice for headache and hemorrhoids classify it as either very hot or very hot. Many cooking spices are also used as medicinal herbs; thus, people may

vary in classifying them according to their knowledge, how they use it, and the context of my questioning. These all provoked variation in their description of use. For example, *Chenopodium ambrosioides* or *epazote*, a very common culinary herb in Mexico, is often used in seasoning black beans, and many popular dishes such as *quesadillas*. It is usually considered warm, in the context of cooking, because of its peculiar penetrating odor and pungent bitter taste. However, since the leaves and seeds of *epazote* in a concentrated, boiled down form, is used as an anthelmintic or vermifuge, used for expelling worms from the intestines. It is categorized as either very hot, or fiery hot by all who know the use of the herb and are thinking of it in medicinal rather than culinary terms. (Tedlock, 1987, p. 1075)

The medicinal use of plants is an integral part of therapeutic treatments for most ailments of the people in this area as well as in Oaxaca. Walking from Cuetzalan to San Andrés with Alfredo a young *hierbero*, we were able to identify from 20 to 25 plants for medicinal use. Generally, it is the leaf that is mostly used for infusions, or for baths or poultices. Some of the most common plants he identified were borraja, sauco, estafiate, ruda, mirto, sábila, yoloxóchitl (flor del corazón), tapón, valeriana, tepescouite, valletilla, yerba del golpe, matlantzin (blanco, morado y chino), verbena, bugambilia, cihuapatli (o zoapatle yerba de la mujer), teposilla, toronjil, achanclán, ajenjo and anís.



26

In meeting with doña Micaela in San Andrés, I asked her to categorize and rate a few of the many herbs that we had encountered. I asked her what she used for treatment, as well as the allopathic medicines she was familiar with in reference to cold or hot. Ranking these remedies on the hot-cold continuum, she listed sage as very hot; commercial aspirin and cough drops as very hot; chile, cinnamon, piloncillo (brown sugar) and ginger as warm; Alka Seltzer as lukewarm; and lemongrass as cool. She would not list solanáceas (solanum nigrum) or *yerba mora* in Spanish (black nightshade) saying, only "it all depends."

With respect to illness, she was also unwilling to rank the flu on the hot-cold continuum. This was because she did not view this or other illnesses as being able to be measured on the hot-cold categorization. Her idea of germs causing the flu, I believe,

came from a Western allopathic perspective from contagious theory, perhaps due to her extensive work with the doctors at the Hospital General. This explanation, revealing segments of different explanatory models from all three sectors of the local health care system.

If a *curandero* is also a shaman, then she or he knew that illnesses are rarely just hot or cold, but rather move through various stages requiring different medicines at each stage. Since selection of specific herbs depends on efficacy, based on generations of empirical experimentation, ad hoc humoral reasoning based on my Western interpretation, was not usually used by curers during clinical consultations, but was resorted to in order to answer my questions.

Thus, hot-cold, *totonic*-hot *sesec*-frio in nahuatl. The Nahua categorization is a simplified parameter in constructing the taxonomy. What I have found is by using carefully formulated direct questions, primarily in the form of survey questions and eliciting categories which I hoped would show frequency of applications. Direct questions such as, 'Is this plant hot or cold?' produced careful, reasoned, rational answers from the native speakers. I will discuss this analysis in a separate study.

Dreaming

Dreams, as in many indigenous Mesoamerican communities, have a special relevance for Nahuas who spend time deciphering them, providing them with an interpretation according to their convictions and commenting on them in daily conversation with someone where there is some trust. A dream state is a window into another dimension or reality.

Lucio told me that dreaming is not just having dreams, daydreaming or wishing or imagining. He said, through dreaming we can perceive other worlds and seek advice or guides. We can feel how dreaming opens up those other realms.

Control of dreams: He said that during dreaming, "I have to have a precise and practical command over the general dream and the person I am dreaming about. I can't let the dream slip into something else." He knew that I was a teacher and used the example, "you may dream that you are in your classroom but you can't allow yourself to jump from the classroom to the mountains. You must control the focus and be aware of what the dream is telling you. In my case, it is about my patients. It has to be a sincere a process of "awakening" and gaining control. It is another form of attention."

"First I focus my perception on my patient. I look around the environment, look for clues, I focus on the things that I can. I look quickly not staying too long with anything I see so as not to shift. Then I go back to my patient. I see and feel the energy." He said that we condense the energy body until it's a unit capable of perceiving. "Then I can sense and see the ailments." Lucio (interview December 6, 2018)

He began having dreams in childhood between 8 and 10 years old. He said that once he had a dream when he was very sick and was in danger of dying. The ongoing illness gave him migraines, fever convulsions and hallucinations. He

remembered that the mestizo allopathic doctors said that his discomfort was impossible to cure. He had this very powerful dream in which he was healing his father, a shaman, who had fallen into a hole in the field near his house. He remembers pulling him out and attending to his head. He now thinks that it is related to a time many years later when he cured is father of an intrusion of a dark entity, after healing a patient. As a result of this premonition, he began to make offerings and prepare for a life of healing, even though his father did not want to teach him anything about healing as he began to grow. In puberty, the power of visions in more dreams began again to manifest themselves. His father finally agreed to share a little with him.



27

Initiation: He said that in the narrated dreams, non-human entities appeared, angels, evil spirits etc., and sometimes the Virgin Mary or Jesus Christ who, in successive dreams, taught him a "secret" view of the world. In effect, these dreams had narrative stages: after the presentation, or if non-humans warned him that they needed

him, that they had a calling for him and that if he did not comply, he would suffer from chronic illnesses and family problems.

He was taken to a *cueva* where an older shaman, a friend of his father, showed him his *mesa* altar, with his power objects. He conducted a curing ceremony, initiated with offerings, copal, candles and remembers the shaman dialoguing with the respective *dueños de los montes* inhabitant spirit owners of the hills, who are the ultimate authorities. He was shown how to pray. At this stage he was initiated and began to learn prayers and offerings associated with the activities that make up the work of being a shaman. However, as he grew older, observing his father and his activities, he chose not to pursue this path of becoming a shaman, not following the path. He chose to become a *huesero* instead. He believes that he lost his first wife as possibly part of the punishment for not pursuing the calling.

Bonesetter/Huesero

In Mesoamerica, Sahgún, 1969 and Ruiz de Alarcón, 1984 both documented bonesetting in principally Nahua communities during the colonial period. There is a fair amount of information about fractures, sprains, dislocations, lower back pains and how to treat these ailments with splints, herbs and invocations. In the Cuetzalan area, largely a rural and agricultural area, and the bonesetter (in view of the many possible agricultural accidents) is an essential part of the community.

Don Lucio lives in Xilcoautla, close to Cuetzalan, his specialty is bone setting and deep tissue massage and adjustments of tendons. His father don Inocencio, was a very well-known shaman from San Miguel Tzinacapan nearby. He was known not only for his ability to heal but also had the ability to harm with *brujeria*.

Lucio's daughter Julia told me that her grandfather Inocencio became very ill one day when he was elderly, right after healing a child. He asked his son, Lucio to cure him, but Lucio didn't know how to heal. But he tried, by saying some prayers that he had heard, performing some deep tissue massage *sobadas*, and finally some cleansing (sweeping) with herbs *limpias*. Lucio was surprised when his father recovered. Later, Lucio took this experience as the event that introduced him to the world of healing and shamanism, his father no longer taught him many other things, since in those days this type of knowledge implied witchcraft which Lucio did not want to have anything to do with. He had seen a lot that his father and others had done. (Grinberg-Zylberbaum, 1989)



28

Lucio works at home until half past three in the afternoon, attends to his animals, does some housework, then walks to the center of San Miguel Tzinacapan where he works out of a community clinic. This healer told me that he likes to talk about what he knows and that if someone acquires the knowledge that it is good because they can help people and make some money, although not much. He claims that sometimes he leaves his house with 20 pesos and that maybe in one day he treats two or three people, but that when he returns home, he can bring double or triple the money he left with.

Lucio has little knowledge of allopathic medicine, he heals principally with herbs, performs cleansings and shamanistic work. He takes care of his patients on a table at home or on the floor in the clinic. The patient arrives, they talk, they talk about the problem, then Lucio asks them to lie on the floor and that's where he gives a

massage/*sobada* or relocates a bone.



29

The treatment consists of giving first applying *hierba del golpe (oenothera rosea)* and then massaging the painful areas specifically, with the purpose of numbing them and then doing deep pressure massage. He only works with this oil that he uses to massage and deep rub. He prepares this remedy by macerating *hierba del golpe* in corn or safflower cooking oil. After a few weeks he strains it and then stores it. The herb grows on the banks of the roads in the area. It is considered a medicinal plant with various active ingredients, being used as an analgesic, for healing scars, disinfecting but especially as an anti-inflammatory.

One example I observed of don Lucio's work was when a young man came to see him complaining of a strained back. *Estiramiento de las cuerdas* is a condition that he said affects the muscles, and is mainly attended to by *hueseros* bonesetters who claim

that it occurs as a result of a forced or abrupt movement that the patient makes, either during work or while playing. This movement forces that certain tendons stretch too much, giving rise to the intense pain that a patient suffers due to the inflammation caused by the stretching; many times, the pain prevents him/her from moving. All of these symptoms are useful for the diagnosis, which is established by the palpation of the painful areas, and also by means of asking a lot of questions so as to know the possible causes that initiated the condition.

On another occasion I saw him attend to a woman who was complaining of strong pains in her lower back. After carefully feeling her back with his hands he checked her groin and hips. He diagnosed it as *dolor de cintura* or that *se abrió la cintura*. This is a musculoskeletal condition that often affects women especially those who perform heavy physical work during the 40 days after giving birth. The lumbar region of the back may "open" due to a fall, receiving a blow or by carrying something heavy. Symptoms are generally intense pain in the lower back, hips or pelvis. According to many healers or hueseros, the accident causes a disc or possibly a sacoriliac joint to slip or "open" *abrirse* in the lower back, this is generally one of the final vertebrae of the spine, which causes the pain that the patient feels.

To treat this problem, Lucio took some *hierba de golpe* that was warm and began deep massaging the area. He began to firmly rub each of the muscles and bones in the area in order to "bring them together" so that the waist would "close" *cerrar*; during the massage he would say that he found "botones" or small nodules in the muscles, which appeared to be painful to the woman as she gasped a few times. He vigorously rubbed them until he said they were undone. On this occasion, working with him was another healer who applied *ventosas* or suction cups to the patient's lower back. Essentially, a small glass cup with alcohol is rinsed, it is drained well, and then a

piece of cotton with alcohol is lit with a match and then placed in the cup, then quickly removed to be placed upside down and applied to the lower back of the patient, after it warms up. There is a repetition of this procedure 4 times. The entire *ventosa* procedure is done every day until the patient feels relieved.

After the treatment Lucio and his co-worker served a hot tea to the patient. They explained that it was made from local herbs: he said to first boil in two litres of water 4 small branches of *hierba de la fuerza* (I could not identify it), two branches of *pericón* (tagetes lucida), one branch of rosemary, one root of *hierba blanca* (I could not identify it), half a cup of pure alcohol (95%) and some *piloncillo* (raw sugar). The patient was told to drink a cup these three times a day. Lucio then told the patient that in the course of the eight days that the therapy lasts, she must rest and not get bathe or get wet; also, during this time she has to walk frequently.

In addition to practicing as a *huesero*, Lucio is a teacher at the craft workshop at Tesijtsilín High School, where he teaches students to carve wood and make small sculptures. Some of the students who have attended this secondary school and their family members, have been attended by Lucio, who is considered the village healer.

Partera y hierbera/ Midwife and Herbalist

In Puebla, perhaps one of the most common traditional practitioners is the midwife or *partera*. Midwifery involves the knowledge of a series of ritual techniques that make up one of the oldest and most basic callings of humanity. In Mexico women who become *parteras* usually have a connection with traditional knowledge and customs. Micaela explained to me that in the Cuetzalan area, women traditionally live a very restricted life essentially confined to the house and to the care of children. Essentially, as of ten to fifteen years ago women were not allowed to work outside the home, however this has been changing. The influence of *indigenismo* called for the inclusion of "traditional medicine" as primary health care, as well as for "indigenista" policies promoted by the Instituto Nacional Indigenista (INI), in terms of expanding the coverage of health services in areas that Aguirre Beltrán called "refuge regions." (Aguirre Beltran, 1963) As a result, women could now also work, taking the work of midwifery seriously through training. In this section I will highlight one of the founding members of Maseualpajti, Micaela Pérez Vázquez, taking into account the social context, and how it relates to her ritual work. The idea is to describe Micaela's training and experience as well as her integration into official alopathic medical discourse. The linking of midwives with official medicine generated a different approach.

The case of Cuetzalan enters into this logic, the changes that were introduced have taken place gradually. I have seen the interest in incorporating indigenous traditional forms into the parameters of allopathic medicine.

Traditional childbirth in Cuetzalan survives as a practice of but is considered of lower status, and has largely come from hegemonic discourse, regarding the crisis

and the shortage of medical personnel in the mountain areas. Micaela Pérez Vázquez attached to the organization, originally from the *Junta Auxiliar de San Andrés Tzicuilan*, she works at home, and has also been registered with the Ministry of Health since 2005.



30

I met doña Micaela in San Andrés Tzicuilan near Cuetzalan in 2017. She has a beautiful small home-clinic and temazcal surrounded by medicinal plants as well as vegetables and fruit trees. She is an activist *partera* midwife who has protested, like many other Cuetzaltecan women, against the entry of miners to the mountain region. This is perhaps more prevalent in the Sierra Negra region of Puebla. She told me that

she really likes to participate as a *madrina* in the *mayordomia* ceremony of the community. She was one of the first traditional practitioners to begin to participate with allopathic doctors and nurses in the local hospital, legitimized by the State. She is one of the founding members of Maseualpajti, and participates in this organization. However, now she works mostly at home.

She learned the art of *curanderismo* and midwifery from her aunt María Francisca Pérez. When her aunt passed away, she inherited the lands and houses that she presently occupies with her daughter and son in law. From my understanding, it is not common for women to inherit land, but when it happens, it is known as a type of inheritance from woman to woman, that land is called "cihuajtal" which means "Land of women" Sánchez and Almeida, 2005: 117.

Micaela once told me about an experience she had as a child when she was treated by her grandmother for smallpox when she was 8. Although there were vaccines in Cuetzalan, it was her grandmother who cured her without a vaccine. She cured her with medicinal plants macerated in brandy and fed her only raw *masa* soaked in water. She recovered almost miraculously.

Micaela told me that she lost her first son in childbirth, this death marked her and made her strive to know more about birthing than any other profession, and it was with her other children that she learned the art of midwifery since in her words it was her own need to bring healthy children to life that prompted her to learn.

Unfortunately, as her children grew and her interfamily relations became enmeshed and tense, two murders occurred, between half-brothers caused by envy and then revenge. She was implicated in these murders and since she could not prove her innocence, she spent six years in jail (*el Cereso*), until her legal innocence was established. After her experience in jail, she became dedicated to specializing as a

community midwife, she was one of the first to be concerned with the lack of medical staff available to midwives in emergencies. In the 1980s she was integrated into the program *parteras empíricas* of traditional midwives of the IMSS in Zacapoaxtla a town nearby.

One of Micaela's principle forms of healing is by invoking and praying to special beings of nature. Although she is catholic and often makes references to the Saints, she also claims connection to other beings who are the guardians of the supernatural. She requests their help for birth, and healing children and adults from *mal de ojo, susto* or *aires*. She usually prays in Nahuatl. Much of what she has learned comes from her grandmother.

She tells the story of a young woman accompanying her husband up a particularly steep hill, taking a shortcut to take some fruits and vegetables to barter with an acquaintance. As they were going up the hill everything was fine until her husband slipped on the wet ground, falling several feet and hitting his head on a boulder. He was left unconscious at her feet bleeding from a gash. Fortunately, they were not far from their destination and the young woman rushed up the hill to get help. The neighbors quickly came and treated the man's gash and helped him back to their house where he was able to rest. The next day upon return to their village, the young woman was initially alright but sometime later she began to show the symptoms of *susto* fright, that occurs when the soul becomes trapped in a natural place. The symptoms included tachycardia, shivers, dry mouth and feeling faint. Her sister took her to doña Micaela. After listening to the sequence of events and evaluating her patient, she became responsible for putting into practice one of the specialties of the healers of the region, that is to put into practice *llamadas espirituales* or a call to her helping spirits to recover the soul of this young woman that had stayed in the place

where her husband was injured. She remained in bed for a week, lost her appetite and lost weight. She followed doña Micaela's instructions for care, diet, prayers and *ofrendas* offerings and a short time later he went ahead with the care, prayers and offerings. Micaela continued her prayers as well enticing the supernatural beings to release the "soul" of the young woman. She said that she received.

As an aside, doña Micaela also knows how to invoke *amarres* "tying knots" which is essentially a ritual aimed at returning a man or woman to their family after abruptly leaving. Although the ritual can also be voluntary in terms of "tying the knot" or when two people go through a consensual Catholic ritual. On the other hand, it can be aimed at retaining a boyfriend or retaining a husband by means of a ritual.

Micaela initiates the ritual through prayers and offerings to San Antonio de Padua, whom Micaela is entrusted and can count on for help. She said that it is more common for women to seek her help to do the corresponding rituals to bring their partners back than for men. However, the ritual for both sexes is about the same. First, she asks for the patient to bring half a dozen bees wax candles, a photo of their partner and an article of clothing that the person has left behind. She told me that in the area it is common in Cuetzalan (probably in most of Mexico) for men to leave the region and migrate to other cities leaving behind women with their children. She said that she also sometimes gets requests to find children who have disappeared.

Micaela is a very open person and was very kind to me but she would not share with me the words that she said in most of the rituals or treatments that she performed. She explained that the knowledge should not be disclosed since it is healing knowledge and must remain within the family. She believes that her experience and skill helps to feed the family and should be protected with a certain secrecy. At the same time, she showed me written work that other researchers had given her about her

healing rituals. Nor is she envious, in fact she likes to share and know that others are interested in her work, I saw this. On one occasion I participated in collecting some herbs and she was very open in sharing their properties and uses.

People who come to her generally ask for sweepings or *limpias or perhaps* for a *Temazcal*. Although the most common request is for a *limpia*. If she accepts to perform one a *limpia,* and her daughter or son in law are not available, she goes out and collects the herbs that she will need for the cleansing. To those that she attends, first, she takes them to her living room where the family altar is located and seats them while she prepares her materials.

To begin she places bits of lit charcoal in the *sahumario* or *copalera* smudge bowl and then sprinkles *copalli* copal incense on top producing billowing puffs of smoke. First, she passes it over the person to be cleansed, carefully smudging the whole body, then she places it on the altar which is adorned with the images of the saints that she works with. She asks a few questions about the person's state of being and their reason for coming to see her. Then she begins to sweep the body with the plants that she has gathered from her garden for this purpose. Usually she sweeps with *ramas de sauco* elder branches. Next she will begin to pass *un blanquillo* an egg over the entire body with the purpose of absorbing the accumulated energy. She explained that eggs are particularly sensitized to picking up human vibrations. Eggs have been used to absorb energy for centuries. When she finishes the ritual she cracks the egg into a glass of water, lets it settle and then begins to "read" and interpret the signs shown by the egg, especially the egg white. She then explains the prognosis to the patient and begins to explain what therapeutic measures might be important to take. She disposes of the egg and the branches on her land but away from her house explaining that it will return to the earth and become *abono* compost.

A massage is usually recommended after the *limpia*. Micaela will ask the patient to lie down in her birthing room and get an herbal mix that has been macerated in regional alcohol. This is a special preparation that she has made to combat *susto* and *mal aire*. She begins on the back, first cupping her hands and then with broad strokes massaging from head to feet.

The etiology of these illnesses, that Micaela heals, are established in Nahua cultural practice as they are always connected to supernatural or spiritual elements and as mentioned, do not involve an allopathic identification nor a healing equivalent. Her therapeutic strategy is to address these Nahua malignancies.



31

The curative responsibilities of Micaela and some of the other healers with whom I have spoken, are often linked to the *sistema de cargos* a socio-political role or responsibility within the community. They take on a combination of economic, religious and political functions. She told me that she enjoys these *cargos* and has been designated

to different positions for a usually one year at which point she will go back to her daily routine. These *cargos* are not paid and yet may incur a lot of debt from the social responsibilities expected. She told me that the prestige that she receives id well worth the responsibilities of the post. She also feels a certain protection in being connected to an extended family and she can rely on the network of relatives and ritual relatives who can be called upon in times of need, whether from illness or for economic help. The system of *cargos* or *mayordomias* (a similar term) contributes to a strong sense of community values and actually gives a central position to the community with respect to the world, and maintains this order.

Micaela specializes in midwifery and children's diseases, such as *caída de la mollera*, *empacho*, *mal de ojo, caída de cuajo* or diarrhea among the most common. Part of her time is dedicated to preparing natural remedies for newborns. Many expecting mothers come to her home, not just from the community, but also from Puebla as well as foreigners. She usually charges 150 pesos for consultations but she told me that it depends upon the type of procedure the patient is seeking. Visits to his house of mothers with sick children, charge them 100 pesos, although what they charge varies according to the cure. She uses the profits from these from these consultations to buy the material she needs to continue making natural herbal medicine. On her walls are pictures of Micaela working, some certificates that she received and recognition from the local government. She is proud of having been included in the local hospital as a "legitimate" recognized midwife and speaks highly of her association with hospital.



32

Micaela says that she is lucky to have her daughter Yolanda living next door, she lives only a few steps from her home, is a *hierbera* herbalist, and cultivates many medicinal plants which she allowed me to explore with her. She grows many of these for her mother. She is also quite accomplished at the backstrap loom. Her husband Eric is also quite a weaver as well as helping in birthing. But having her daughter and son in law near allows for certain responsibilities that could easily overwhelm Micaela. For example they help in heating the Temazcal with wood, attend to the parturients and their children, go for firewood or run various errands.

During labor her daughter will often get and bring *omequelite* (Piper umbellatum), *mirto* (myrtle), *hierba dulce* (Lippia dulcis), *and cihuapactli (*Montanoa Tomentosa Cerv.*) hierba de la mujer*. Yolanda will often prepare a traditional beverage for the parturient, of chocolate and pepper prior to intense labor for energy. Micaela

only uses natural herbs and materials for births not relying on any pharmeceuticals.



33

She told me that the parturient women who arrive at their home are usually women from the community who often do not know Spanish and who are of limited resources. Expecting mothers arrive several weeks before giving birth, helping with Micaela's domestic work, in exchange, Micaela feeds them. She gives them prenatal care, massages and gives stretching exercises. She and Yolanda will also take care of the children of the pregnant woman. Sometimes family members of the parturient will stay to work with Micaela and sleep in her home, and help to prepare food. Micaela makes her own payment arrangements, when she is a community parturient she does not charge, but she does accept barter. She will only charge when the woman is from another community. One day that I visited her she was quite upset about not being paid

for a birth, and that the family essentially snubbed her when they ran into one another on the street. But she said it is not common.

One of the principal healing practices that Micaela employs is the use of the traditional Temazcal. Her Temazcal is integral to her birthing studio, a square structure and measures some 3 meters in diameter (about 6 1/2 feet). The height is nearly 2 meters. She does not principally use it for ceremonial purposes, as is the case in other locations, nor for relaxation or bodily cleansing or for general well-being, as are most of the other sweat baths in Europe or North America, but as a therapeutic instrument, an arm of the traditional medical practices developed in Mesoamerica. Temazcal is a nahuatl word.

It was used in the healing and easing of almost all kinds of medical conditions, including, as in doña Micaela's case, pregnancy and child birth. Sahagun, the Franciscan friar recorded that: "It (the Temazcal is used firstly in the convalescence of many sicknesses, so that they should finish healing more rapidly... All sick people benefit from these baths..." And he lists the sicknesses that he thought especially responsive to the sweat bath: traumas, broken bones, contusions, skin problems and growths, among others. He also mentions, that it is also good for "pregnant women who are close to giving birth as there the midwives can do certain things so that the birth is easier... ", and it is "good for the mother shortly after giving birth so that she heals and to purify the milk..." The Goddess of the baths was Temazcaltoci, considered the patron the baths. Sahagun mentions that "...this goddess was the goddess of medicine and of medicinal herbs; she was adored by doctors and surgeons, and bleeders, and also by midwives... All placed the image of this goddess in their *Temazcalli*".

The high heat and the high humidity, taken together, produce the healing effects, basically, through reducing or impeding the body's process for cooling itself. The heat,

higher than normal body temperature, induces sweating; the high humidity (the vapor is made from herbal teas, the herbs chosen for their effects on each individual) inhibits the evaporation of the sweat, the chief method through which the body normally cools itself, and thereby, blood circulation is increased, sweating is increased, and the elimination of toxins is maximized.

Micaela examines each parturient or patient, makes her diagnosis, chooses the herbs that she believes will be most beneficial, decides on the levels of heat and humidity that are to be used, cleans the Temazcal, and then re-enters the chamber with the patient to oversee and manage the course of the bath. When she is not available, she will ask Yolanda or one of her daughters to accompany the patient. She can raise or lower the intensity of the heat during the bath through ventilating the chamber using the entranceway or the vent (*ombilico*) that is in the roof of the Temazcal, or by fanning/sweeping with the fan made up of branches of a suitable herb that she has chosen, or raising or lowering the height at which the patient is placed (the Temazcal is much cooler at floor level than it is towards the ceiling).

When the patient comes out of the bath, she is carefully wrapped by Micaela, in a sheet or blanket, and made to lie down in the adjoining room to rest, until the body stops sweating. This period of mandatory rest varied depending on the individual to individual; it can range from half an hour to more than an hour. The patient is given a cup of herbal tea, normally made from an herb chosen for his precise condition, to help replace liquids lost in the bath, and then left to rest.

Some of the concepts from the Nahua and generally Mesoamerican traditional medicine are quite evident in the Temazcal, the concept of 'hot' and 'cold' as they are used by traditional healers. In traditional thought, not only herbs and materials but foods and sicknesses as well, are thought of in terms of the categories of 'hot' and 'cold'.

These are best understood as referring to the qualities of the energies thought to be at work in whatever is being talked about, whether herbs, foods, sickness, objects. 'Hot' can be used to describe things that are considered to be high in energy, active, and "exciting" in their effects. 'Cold', on the other hand, is used to describe things that have the reverse characteristics, they slow things down and reduce activity. Tranquilizers and sedatives, for example, would be described as 'cold' in nature; stimulants, 'hot' in nature. Each quality is recognized by its manifestations: color, taste, smell, etc. Ayurvedic and traditional Chinese medicine refer to these qualities in a similar way.

One of the most common uses of the Temazcal however, a use of the sweat bath that is peculiar to Mexico and surprises many people the first time that they come across it, is the way it is used for women's conditions related to menstruation, infertility, pregnancy, childbirth and the traditional forty day quarantine following it; as well as to promote the flow of milk.

In the traditional classification of conditions in Mesoamerica, most problems associated with the female reproductive system are considered to be caused by cold, and for these, the Temazcal has a strong warming effect. It heats ovaries, fallopian tubes and the uterus, and 'moves' the hormonal system. Micaela conducts a series of sweat baths using herbs of a hot nature, appropriate for these problems, such as *chapulistle*, *santa maría*, and *pericón*. Women bathe in the Temazcal to regulate almost any menstrual problem.

During pregnancy, Micaela will massage the mother inside the bath, taking advantage of the muscular relaxation produced by the heat, to manipulate externally a fetus that may be in a bad position or is causing discomfort to the pregnant woman. She said that she has also used the bath to speed up a birth that is going slowly or to make labor stronger and more regular. She goes on to say that it helps to reduce blood loss

after birth.

Micaela mentioned to me that for birthing, the Temazcal is not heated as hot. She will attend a birth inside the warm Temazcal. She said that not only does the warmth help to speed labor but the baby is then born into an environment that is not so radically different from the womb.

Following childbirth, after three days, Micaela will have the mother take a Temazcal to warm the womb that has been exposed to cold during the birthing, to calm the postpartum pains, to speed the discharge of loquia and toxins, and to promote the flow of milk. She will often encourage the mother to bring the newborn into the Temazcal as well.

In the 1990s there was an active effort by the *Instituto Nacional Indigenista* (INI) to bring traditional midwives into the western allopathic model and create a "Hospital Mixto". Micaela actively participated in the "mixed hospital", and took every opportunity that the State gave for therapists to integrate into the official medical system. She was criticized by other members, she says that she knew how to get along with doctors because she "buttered them up", she has an interest in learning from others, and doesn't say how others that doctors "steal their knowledge."

In my opinion, she is grateful for the opportunity to work at the hospital, she has told me about the positive experiences and support that she has received there. She and her daughter told me that other partners did not enjoy the experience and that the required subordination to the doctors was too difficult and that they no longer participated. Micaela said that she respected the doctors but anyone who spoke badly to her, she would answer and put them in their place. She told me that she wanted to keep busy after her husband died and she began to spend alot of time at the hospital. Her interest in midwifery prompted her to learn as much as she could. The hospital became

her school and it was reflected, she says, in the knowledge she gained, and subsequently applied. She felt a comradery with the doctors and nurses and she said that everyone learned and that it was a good situation.

Shortly after the closing of the *Hospital Mixto* the *Hospital General* was built and opened a *Módulo de Medicina Tradicional.* The *curanderos* and *shamanes* healers of the old guard, preferred to go to the general hospital than to go back to their own business since as being self-employed is not steady income since much of the work is expected to be free and always requires enough income for supplies.

Micaela is registered in the hospital, and continues to work there. She says that the medical facilities at the hospital are very good and that she feels very proud to be part of it. In addition to being able to talk with doctors and ask them to see the pregnant women she is personally treating in San Andrés. Micaela says that she speaks for the parturients who are part of the rural population of Puebla. She asks the doctors to help these women that sometimes do not even have State Insurance, meaning that they can receive no medical attention.

I think that working in the hospital has made Micaela more aware of her heritage and what she teaches. She has told me that she is proud of being nahua. She continues to dress traditionally and will usually go barefoot; she does not have any issues with her identity. She can live and work with both *mestizos* and *macehualmeh*. She thinks like a traditional healer, her traditions firmly implanted in her being. She always attends to the poor first especially those from the area, but is ready to help all those that seek her.

Micaela says that when there is a threat of abortion, she puts the parturient into the Temazcalli to be able to accommodate the baby through a massage and thus stop the delivery. Micaela will handle Temazcalli's heat according to the patient's needs.

Also, the temazcalli is indicated for other diseases such as: arthritis, broken bones, fallen bladder, open waist/hips and anemia and for balancing in general.

It is worth mentioning that the Temazcalli on the ceremonial-spiritual level is carried out under respect and with the permission of the four forces of Nature: land, air, water and fire and under the guidance of the dual god Ometeotl.

Rebecca's view of therapeutic outcome

During the course of my research in the two regions, I have tried to identify a few specific patients who had tried allopathic medicine as well as traditional medicine. In this case, I try to explain the differences and the outcomes that she experienced.

Esperanza has suffered from excruciating headaches and she feared that she was really on the verge of going crazy. She has five children and was separated from her husband. She told Michaela that for the past two years she's had pains and ringing in her head that gave her nausea. She had no relief from the pain even when she wanted to sleep. She felt that when her blood pressure was low, that her heart stopped and that her hands became numb and without feeling. She had amnesia at that point and forgot everything sometimes walking as if drugged while feeling dizzy. She told Micaela that she really felt as if she was going mad, like one of her brothers who began to spend 13 hours painting his room red. She also experienced often contracted diarrhea but that did not concern her. She told Micaela that she had pains in her lower back and that her body was swelling. She often use the word *nervios* nervous to describe her condition as if they attacked her in a way that made her irritable, dizzy and feeling crazy. As a result, she said she could not work although did take care of the children as best she could. She said that she had gone to the local hospital where the physician on call had prescribed a medication for headaches but she said she continue to feel sick.

Esperanza said that she saw several physicians and one psychologist and a psychiatrist. She said that none had really succeeded in relieving her pain. One doctor said she had a "bad brain," all the other did not tell her anything just prescribe medication. One doctor referred her to neurology and after several studies, they said

they could only guess and that it was a matter that was not perceptible, it was because of her own doing. They said it could've been caused by the frequent beatings that her husband submitted her to. The medication and the herbal remedies that she got for a variety of years did not help her either. She said that she had no money to purchase any more.

When she was seen by a female psychiatrist, she was told that her problem was due to lack of sexual activity. Esperanza said that this was not true because she was really not in the mood for having sex when she had so many headaches. She told Micaela that the psychiatrist prescribed, and she was given, hormone shots to control her sexual desires. This seemed like a contradiction. After these traumatic visits with the psychiatrist she came to visit Michaela who had given her a traditional massage and did some "sweepings." She said that she had seen evil spirits and was troubled by them. She said that she often had nightmares in which her children were drowning in a river and that she could not help them. She also said that her dreams involved a dog on a street at night that chased her wanting to bite her. At times she said she dreamt of her husband back at the house, in the old days and they were happy.

Meanwhile, she said, her husband was running around with many women, and she was not able to find any work and as a result had nothing to eat. She left her children temporarily at her in-laws.

She said she tried to understand why she was so sick and she gave various reasons for her sickness. One being that her matrix was removed a few years earlier and thought that it was because her husband's girlfriend was performing witchcraft on her or because of the beatings that she had received over the years because she saw an evil spirit, whenever she thought of her husband accompanying

him as if a partner.

She had been living with her in-laws when her husband brought another woman to live in the house as well. This was overwhelming for her. She rented a two room dwelling that had a metal roof and an earth floor. She shared this abode with another woman and her two small children. She initially felt good leaving her in-laws and her husband but she started to feel bad and started drinking. However, she stopped drinking soon after because the alcohol made her feel sick. On the day I went to visit her she had no food in the house.

She told me that despite her adverse poverty she began to participate in a savings club and had built up quite a bit of cash in order to buy and build a small plot nearby. At first, she said that her father-in-law gave her a weekly allowance of about five dollars. Subsequently, she worked for her sister a little while, but that was difficult for her and then she went on to work as a waitress in a small restaurant that was open late at night but it was far from her home. She was afraid of developing another relationship because her children were very young and didn't want to risk anything.

When I saw her several months later at Micaela's, she had just returned from her waitressing job which paid her $10 a week and she was very tired. She was still feeling extremely unhappy. However, she said that Michaela's herbal treatments, massages and Temazcal sessions had almost completely eliminated her headaches. She said it was like getting an injection of anesthesia, she felt good.

During my final visit with her she had quit her job and was staying home to supervise her young daughter who was 11 and as a pre-adolecent she was worried to leave her alone. Despite living in significant poverty, she felt fully recovered and transformed by Michaela's weekly treatments. In exchange she spent a lot of time with her daughter at Michaela's helping with the many chores related to birthing. She

felt very good about being incorporated into this new birthing group in which she was able to participate as a healer herself and receive food in exchange.

I believe that her case suggests that her illness inspired constant anger and moral indignation about her husband's infidelity and violence and ultimately his abandonment of her. She went so far as to believe that *brujería* witchcraft was a cause. Michaela shared with me that Esperanza always complained that in the hospital all she got were pills and that nobody really tried to engage in a meaningful conversation or enter into her life so as to understand and thus help her.

Mazatec Region

Background and Introduction

The Sierra Maxateca is an extremely verdant series of mountains and hills that join the state of Puebla in the north and the Oaxacan region of Papaloapan-Tuxtepec on the east, having an area of about 2400 km². The Mazateca region can be divided by altitude, meaning there is a high zone and a lower subtropical zone. This research was carried out in both areas which geographically and linguistically are somewhat different. The Sierra Norte of Puebla is more tropical in parts with misty mornings. Oaxaca is slightly drier with more rugged mountains and frequent fog. The Sierra Mazateca serves as a gateway to strong winds from the Gulf of Mexico causing numerous cloud formations. Resulting in higher rainfall although both regions are extremely similar in climate.

The Sierra Mazateca is a territory of considerable heterogeneity, which can be subdivided into three vast regions, each with its own cultural and climatic characteristics. One is the so-called *zona baja* low zone in where the Miguel Alemán dam was built in 1954, causing the displacement of 20,000 inhabitants, due to the flooding of 40,000 hectares, resulting in a strong impact and change in their farming, as the population inclined towards the cultivation of sugarcane, due to the warm climate. The *zona intermedia* intermediate zone is between the low and high zone, the coffee and sugar cultivation converge, as well as the livestock. The *zona alta* upper zone is embedded in the Sierra Madre Oriental where peaks reach arbout 9,000 feet above sea level basically it is a very rugged terrain. This territory is criss crossed by paths that unite the different populations that are small rancherías, it is also traversed by innumerable streams which lead to the Miguel Alemán dam, in the area known as the Papaloapan Basin.

The population of Hautla is about 30 000 inhabitants, of this population 24, 578 are speakers of Mazateco, according to the INEGI 2010 count, however some population estimates suggest that there are currently over 40,000 inhabitants. The Mazatec language (*Ha shuta enima*) belongs to the Olmeca-Otomangue group, with a subgroup of Otomiano-Mixteco a branch of the Popolaca group, it is a tonal language and about the ninth most spoken language of Mexico with about 250,000 speakers. A majority of the towns have their own dialectal variant which can be the source of misunderstanding between people of the same area but different towns or regions. As such, there is variation from community to community but also depends on the age of the speaker as well as how much Spanish is mixed in to the language. The Mazatec are the third largest ethnic group in the state of Oaxaca. In contrast, the Nahua communities of Puebla make up the largest ethnic group in the area and the language, *Náhuatl*, a Uto-Aztecan language family, is the most widely spoken language in Mexico with about 2 million speakers. There are variants from Veracruz, Guerrero and Puebla, with Puebla being the largest community of speakers.

One of the greatest treasures of the State of Oaxaca is that in all its regions there are examples of very different ethnic configurations that reveal extremely different cultural identities especially evidenced by the number of indigenous languages spoken, and in the extremely varied wide-ranging textiles. Through geography, and the many mountains and valleys, we are able to explore both the cultural diversity in *las siete regions* (seven cultural regions) as well as the social dynamics of the indigenous peoples that remain distinct one from the other. These existing configurations offer us not only interpretations of the realities, but also productive and creative systems where worldview and mythology serve as support on which the daily life is based. It is because of this geographic isolation, that many of

these groups were able to retain their ancient traditions. In this case the Mazatec remained out of the popular cultural radar until the 1950s when Gordon Wasson published his mushroom piece in Life magazine and the Mazatec isolation exploded into a cultural upheaval.

In planning for this research, I was not so much interested in the neo-shamanism that evolved from the confluence of the many psychadelic tourists seeking mushrooms or other elixers, but rather how traditional healers had evolved in their treatment of the local population and their perception of any changes that may have occured in their lives.

Since the 1950's of the last century with the construction of roads, the regional culture has been transformed, given the migration of the *meztiso* dominant national culture. The Mazatecs began to lose their ethnic strategies based on the community (*tequio* or traditional communal work), collective knowledge and the close affinity with nature and the environment. It is precisely that relationship with nature that is linked to the mountain space and the climatic cycle, which unifies the Mazatec group, the meeting point would be the *milpa* or cornfield or the mountain trail. The Mazatec depends directly or indirectly on a subsistence economy, and given that this type of economy is not completely incompatible with the capitalist market and thus regional products are being integrated. (Boege, 1988, pp. 24-26)

The penetration of roads, were self-benefiting to the State's own interests, such as the introduction of commercially manufactured goods. Also, since in the mountain areas the coffee cultivation began to grow, in the low zone the State built roads that connected the sugarcane producing regions with the sugar mills; these openings of interconnection led to the gradual termination of traditional forms of organization used by the Mazatecs for the organization of work, which were

determined by kinship by consanguinity, by affinity and ritual, seriously affecting the nuclear family. With all of this change, a "vertical integration" began to take place, whereby the peasant was stripped of his land, but was not prepared to go to urban areas, rather was kept captive and subjected to the industrial-commercial process making them dependent upon credit (Portal 1986, p. 22). The construction of roads intensified in the 1960's which lead to more coffee plantations in the low Mazateca. (Boege, 1988, p. 46) Roads shortened distance and time, since the old switchback roads were functional for mules and horses, the travel time between Teotitlán del camino in the valley floor to Huautla de Jiménez was shortened considerably by the new road. Originally the distance took 15 hours, and today it only takes 3 hours. Faced with this change, small farmers planted a small plot for corn, squash, beans, as well as their family vegetable and herb garden, as the market for further production had/has deteriorated. Many stopped growing their products for the local market, and went to work at government projects or for the large coffee or sugarcane growers. These jobs were generally temporary and were accompanied by restrictive bank loans generated by the World Bank, aimed at captivating the labor force through debt servicing. Unfortunately, in addition, the merchants and PRI operatives used intimidation and assasination as a tactic to prevent and intimidate any attempt by the Mazatecos to reorganize back to their traditional ways. (Boege, 1988, p. 43)

Although for many years the Mazateca culture was considered by some authors, one of subsistance farming and of self-sufficiency (Boege, 1988, p. 43) however, the opposite was and is true, especially in the community of Huautla de Jiménez, which is immersed in a capitalist economy and under increasingly urban flows, even work around the culture of corn is relegated to the family garden at best.

Inti Garcia, a teacher and archivist, mentioned that for him the identity of the

Mazateco is one of having spiritual respect, performing rituals, determined by space and time, but that can fluctuate in certain situations, contextualized by cultural patterns, as well as by sacred spaces, these sensibilities go beyond the political and religious separation that is increasingly apparent in the Mazateca that I have explored.



34

My fieldwork in Oaxaca for this project began in August 2016 when I visited several of the communities around Huautla. Later in the year, when I took the road to Huautla, nestled on a hillside in the Cañada region of the state, it was apparent to me how isolated and difficult it must have been to travel in and out of the region before the roads were paved in the 1960s (Estrada, 1989). The area has changed dramatically with the advent of roads going just about everywhere, but transportation is still quite slow. Many people still walk, some still ride on horseback. The *combies* and open-back trucks (communal taxies) fly up and down the winding roads, usually jammed full of people

on their way to or from the next town.

The mountain villages are perched on the hills looking down on deep valleys with rushing rivers. On several occasions, I have driven up from the valley floor through Teotitlán del Camino, then winding up the switchbacks into a misty otherworld where waterfalls border the road and men and women in work clothes walk slowly, carrying machetes and women often with long braided hair carrying bundles of firewood, children straggling behind, all cloaked in an atmosphere of mist and shrouded history. The landscape transforms completely in the fog as the vegetation becomes thick and diverse, exposing a range of ecosystems changing often by altitude in the ascent to Huautla.

There are low bushes and arid forests up to around 2000 ft. but this changes dramatically around 4000 ft., low-altitude Holm oaks are located at that elevation. Above these forests live the native oaks that flourish in high humidity among a great variety of epiphytes. In this dense forest live mosses, lichens, bromeliads, orchids and unique arborescent ferns. In the lower regions, near Tenango, jungles and humid rain forests thrive with abundant plantings of lemon and orange trees as well as banana plantations. Locals have told me that some trees can reach a height of more than 60 meters and maintain a community of other saporyphic plants in them, including vines, climbing plants, bromeliads and orchids. The fauna of the region is also extremely diverse due to the great abundance of foods and prey.

I was given Inti García's name as a good contact for local cultural matters. He is a teacher, regional historian and archivist who is building an anthropological museum for the area which will also contain much of his father's work. He is the son of the anthropologist Renato García Dorantes who, in life, conducted research and wrote extensively about the Mazatec people and language. The collection consists of

documents, books, audios, videos in different formats as well as still photos. Inti has digitalized a large part of the collection and has made it available to the community.



35

While in Huautla I also met Saraí Piña, a former student from ENAH, Escuela Nacional de Antropología e Historia, who had researched and written about the contemporary Mazatec. Both she and Inti helped me to set up interviews with curanderos and shamans that they knew in the Huautla area.

Huautla Area Literature Review

Today, there is a considerable amount of research that has been done about the Mazatecs, their traditional medicine practices, the complexity of their tonal language, their form of social organization, etc. This knowledge has enriched my understanding about the ritual practices, especially about the various shamanic practices carried out by the *Chijota Chjine,* the name in Mazatec for the local shaman. (Boege, 1988; Flores Morales, 2003; Incháustegui, 1983; López Austin, 1980; G. Wasson & R, 1980; R. G. Wasson, 1962; Weitlaner, 1952).

Robert Weitlaner was among the first to describe the healing practices with sacred plants in a text called *Anales de Antropología* in 1952. Later in 1963, he wrote about the Mazatecs in which he very briefly discusses the social, political and religious organization , as well as presenting data about Mazatec healing that he observed at that time. Likewise, Alfonso Díaz Rojas contributed data on the Mazatecs, in the text entitled *Los Mazatecos y el problema indigena de la cuenca de Papaloapan* from 1955, although he reported mainly about those residents of the lower region and the problems encountered by those affected by the floods of what would be the German Miguel dam. He briefly describes medical practices but very little.

Eckhart Vogue wrote probably one of the most comprehensive and contemporary works on the Mazatec people. The author describes both the Mazatecs of the lower region but focuses mainly on those of the highlands.

His analysis describes political, religious, economic and agrarian aspects of the culture, land conflicts linked to their worldview, and the kinship and the rituality of the Mazatec people. It also illustrates how the Mazatec people interact within their own culture and with the mestizo Mexican State. Similarly, it shows the symbolic aspects of

the culture that have a decisive influence on the social relations of the people. These relationships are of course, wide and varied.

Another author who was important in this thesis is Carlos Incháustegui, who conducted many studies about the Mazatec, mainly those living in the highlands. His studies focus on aspects of their worldview and the supernatural in relation to the practice of shamanism. Incháustegui has been key in showing from an emic perspective, the relationship of the Mazatec to the supernatural. This relationship is critical for those studying shamanism and traditional medicine because the supernatural has a lot to do with the origin of diseases based on the worldview of this people.

Ekart Borge (1988) in his text *Los Mazatecos ante la nación*, refers to the name with which many Mazatecs called/call themselves *ha shuta en nimá*, translated into English as meaning "humble people" or "people from the mountains". (Boege, 1988) This is a literal translation of the name reference in the Mazatec language. Today the Mazatecs of this area call themselves *Ndi'yajan*, which translates into English as "people from the same house, of the same roof, of the same language, of the same thought"; or family of families. Perhaps understood as a united people since the Mazatec are almost always conceived as members of a community or a people and not as an isolated person.

In much of the research done on traditional medicine (Carlos Incháustegui, Álvaro Estrada, Renato García Dorantes, Witold Jarcorzynnski, Xicohténcat Luna Ruīz, Federico Neinburg, Gordon Wasson, to name a few) the indication is that it is primarily popular in rural areas and not urban areas where there is more access to allopathic medicine, but in both areas it appears to be more readily available to economically challenged people from rural areas. The implication being that this type of medicine is strictly for the poor in Mexico is perhaps too much of a generalization because it

overlooks cultural values and "alternative therapies". People of means would generally not choose traditional medicine because it has been stigmatized for so many years. As in the Cuetzalan area of Puebla, the research indicates that the local populations may be stigmatized into feeling that they cannot afford anything better or that traditional medicine is inferior despite the incorporation of traditional medicine options in the public hospital. Although, several doctors and researchers said that the *Ley general de salud de México* which provides for traditional medicine in hospitals, is only "on paper" but not actually applied in most areas. This *desprecio* and marginalization of traditional medicine is another form of the hegemonic and/or colonial imposition on a vulnerable and susceptible population. There are many attempts by the national health system, to incorporate traditional medicine into public hospitals and clinics, by giving them a diminished role, albeit a place. Unlike the *Hospital Integral* of Cuetzalan, there are no such traditional medicine modules in Huautla or Oaxaca so traditional medicine remains separate and apart from allopathic practice.

Traditional Medicine in rural communities

In the mountainous Mazatec area, there is an ethnic identification within each group, which has to do with a sense of belonging to a place, a territory, a culture and a language in which each person lives as a member of that community. Although they are considered Mazatec, the people of each locality have their own distinct identity. For example, the people of Huautla are *chota ni'yá* ..., The people of San José Tenango are known as *chojota xchaxá.* From the moment they are born and raised they belong to a place and are considered inhabitants of the mountains that link them to a specific *Chikon* or guardian. To live in that place implies that one belongs the guardian of the hill, the *Chikon*.

As in the Cuetzala area , I have found a great mélange of economic, political religious beliefs in Huautla. The majority of the population is not at all ignorant of Western trends. They look at cellphones and electronics as a convenient development, a basic improvement, even as a way to be modern. The people of the Huautla area have experienced changes in their thinking and worldview due to the access to media. Through the different generations, the belief system has been modified and the strength of its traditional customs have changed; traditions and practices have decreased. Today new values are at play. They have forgotten some older beliefs. (Piña, 2015)

In Huautla, Oaxaca, there is no traditional medicine module in the community hospital. All of my work there was with traditional healers many of whom consumed *plantas sagradas* (hallucinogenic plants), as part of their healing.



36

Despite globalization, there are still Mazatecs who preserve their traditions, their customs, their language, their beliefs about life, death as well as the world in general. I will try to show the vision of the these Mazatecs who still have that unique way of conceiving the world based on an ancient belief system. These beliefs are made up of rules and morays carried on by those who have not forgotten the traditions, some of these rules are more unquestionable than others and constitute the fundamental pillars of this their worldview.

In an attempt to explain the many forms of traditional medicine I will sometimes share practices that are not readily available to the general public except as translated through new shamans or by locals who often offer them as almost a commodity. I have tried to limit the interviews to healers, curanderos or shamans who

practice in a more traditional way. By sharing this information in an academic forum, it is not my intent to minimize the importance of such traditions nor to breach any confidences. There are many who could appropriate these practices claiming that they in fact are qualified to employ them. There is and has been a strong question as to whether this is ethically right. As an example, Sarai Piña in her thesis from ENAH, "En búsqueda del Ndi Xijto: Turismo y neochamanismo en la sierra mazateca, Oaxaca", presents the many ways in which Mexicans as well as foreigners have claimed to have learned and become proficient in practicing traditional medicine and charge considerable fees for these services (Piña, 2015). It is my intention to draw attention to this abuse and to be clear that the methods and practices that I describe, are from practitioners who have been acknowledged by their communities.



37

Four Directions

Cardinal directions, are the edges of the earth-table. In the east, sunrise, the day is born, the light is originated by Father Sun. It is the place and dwelling of the creator and protector god, and the place where the spirits of the *Chijota Ndiyó* (ancient folks, the ancestors) hope to arrive to reach divine grace. Its toward in this direction that prayers are directed and most of the offerings are given during placatory and therapeutic rituals. In addition, the family altars are installed towards the east, for this reason when sleeping, it is recommended to position the head towards the east. The west, is conceived as the dark, feared and dangerous place where evil resides, from there, bad vibrations and illnesses arise, it is in the west that healers must return the diseases and misfortune. During funerals, the dead person's head should be buried facing the west. The north, the "right arm" of the world, and the south, the "left arm" of the world, are locations that do not seem to have the same mystical importance as the other directions.

Mazatec Cosmovision: General

General World View

Despite the diversity of the population, many Mazatecs retain their traditions, customs, language, and beliefs about life, death and the world in general, essentially they still retain their worldview. This is despite the fact that the younger generations are testing and modifying the belief system, the strength of its customs, its traditions and its cultural practices which have been modified. Today they have given new values to external symbols. They have even forgotten some older ones and have also put aside some beliefs.

I will show here the vision of the Mazatecs which still retains that unique way of conceiving the world based on an ancient belief system.

These beliefs are made up of the rules, some of which are more unquestionable than others and constitute the control rules or the foundation of their worldview. First, I will describe the beliefs about the distribution of the world, then about the beliefs about the beings that inhabit it; and how everyday life evolves from some of these beliefs. Last, I will speak about beliefs with a religious perspective, and the origin of the religious practices of the Mazatecs.

The origin of everything

The Mazatecs, within their belief system, consider a father and a mother as the givers of life and creators of all that exists. I met Mr. Leonardo Martínez three years ago in …when I visited the Mazateca for the first time. He gave me a book of myths and told me about the gods: he said that they call them *Na'in* or *Niná* which means

father/mother, they never call them gods but rather, father. *Niná* is for example, the father of the Earth is the creator, that is, who created everything. This seemed to me very Christian or Catholic but with elements of Mazatec myth.

The belief in a deity superior to what is named God persists, but for the Mazatecs this god corresponds to a dual deity, mother-father, or *Niná*. However, many have the belief in the divine idea of the Catholic Church in which the father and mother are Jesus Christ and the Virgin Mary creators of the world, is undeniable and unquestionable, others told me they know it because they have seen it during *veladas* with *Ndi Xijto* claiming that Jesus and Mary had taught them the creation according to the Bible.

Some Mazatecs have no problem in believing both versions about a divine origin of worlds. Both beliefs give life to the Chikon and the Catholic saints. Both belief systems become unified: the ancient beliefs in the natural elements and the guardians of the hills along with the beliefs in the deities of the Catholic Church, ranging from the divine trilogy, through Jesus Christ and the virgin Mary, saints and archangels etc. This combination of both religious systems integrates what today is the religious syncretism of the Mazatecs. Sometimes it is not the Judeo-Christian god or the Catholic saints who are celebrated with *fiestas* and rituals, but a different entity or deity. Sometimes it is believed that the *Chikón* of a place is the same Catholic patron saint but manifests itself in another form. Other times it is believed that the patron saint is a different entity and that it allies itself with the *Chikón* instead, to protect the space. This is why sometimes, when a local person is sick, both representations working through and with a *chjota chjine* shaman, intervene on their behalf and together with the ritual specialist work to restore personal balance, or on other occasions, to resolve collective conflicts.

Je Sonde / Physical World

The traditional Mazatec way of seeing the world follows a Mesoamerican understanding of seeing the world in two parts. Divided into opposite and yet complementary parts forming the unification of the universe and of life as lived on earth. This dual notion is the starting point for explaining the world. They believe that everything that exists is related. There are plants and animals, all nature in all its species that have life have spirit. That spirit, sometimes called *Chikón*, belongs to the spirit world and lives in each cave, forest, spring, plant. For them there is no separation between people and the universe. In this cosmovision the universe is considered one, all encompassing, but is constituted of these two dimensions, the material and the spiritual. The material world is *je sonde*. It is composed of everything that can be seen, the mountains, the rivers, the cities and buildings, the clouds, the stars. The spiritual world, *ringo sonde* however, is a place where many entities are known to exist but cannot be seen or touched in ordinary life. *Ringo sonde* is made up of several sub-planes or levels, each with its different inhabitants. (Lidia Manrique, 2004; Batolomé, 2013; Inchaustegui, 1994)

Many Mazatec elders and the *chjota chjine* hold a conception of the world / universe that essentially divides reality into three levels: the upper world, terrestrial space or middle world, and the underworld, all connected by caves, streams, springs, trees and other geographical conduits. Special territorial spaces, being powerful and yet elusive, inhabited by power animals and sacred entities that transit and can protect humans are visited by the human spirit entities that leave the physical body during certain circumstances such as sleep, journeying with or without entheogens. It was clear

to me that the summarized descriptions of the universe here from Araceli, Matilda and Grisell are very similar to what Michael Harner has described in *The Way of the Shaman*. This will be described further in the Cosmosion sections. (Alicia M Barabas, 2008; Harner, Mishlove, & Bloch, 1990) Incháustegui (1983) also mentions the existence of seven levels of the sky and seven of the underworld. Boege (1988) mentions the existence of 12 sacred pairs or couples.

For the Mazatecs, their geography is sacred, inhabited and protected by a set of territorial animistic entities with whom they coexist, the local population and communicates with them through multiple rituals. The mountains, caves, and water sources and many natural resources are conceived as points of access to parallel worlds where these entities circulate. They can trap and damage the balance, capture a person if they cross without precaution. They are also powerful spaces, appropriate for performing propitiatory rites with offerings, offer payment for a captive alter ego and to recover lost health, or to arrange that punishments be sent to those who have hurt them in some way.

Ringo Sonde / Beings of the Spiritual World

In the other world, *ringo sonde*, inhabit all the supernatural entities, deities, spirits of the dead: those who rest in peace and those who move unsettled, as well as the beings of nature. The *se na* belongs to the spiritual world but remains in this middle world with the person and when it is moved, the spirit will usually return to the place where it is based. Sometimes when the person is seriously ill, the spirit leaves him/her and travels to the other world for a certain time. If death is implied, there it will stay, if it is not, it will return to the middle world and integrate with people stabilizing physical

balance.

The spiritual world of the Mazatecs is divided into several levels or planes. Some say there three some say there are seven, some more say there are 13. (Inchaustegui, 1984) There is no exact version. There is concurrence that at the highest level in the upper world, lies the supreme deity, god represented by a duality, Niná or Nainá, male-female, mother-father. There are also the spirits of the dead who reach "purity" after seven years of traveling the world in mourning their faults. Beings of nature inhabit the other levels or planes in which the, the Chikones, guardians or lords of the natural places, rivers, mountains, waterfalls, springs, caves, etc.

> En un nivel más bajo se encuentran los dueños, los güeros, los dioses, etc., que son los señores de los diferentes accidentes geográficos, son los Chikón Nangí, dueños del suelo, los Chikón Nindú, de los cerros los La'a, los dueños particulares de los grandes ríos. El encuentro con cualquiera de estos señores es funesto; más aún el encuentro puede producirse en vigilia o en sueños. Éstos sobrenaturales junto con los malos aires o los vientos, siempre están al acecho (Inchaustegui, 1984, p. 46)

It is considered that the beings of nature, *Chikón Tokoxo*, is the supreme being. He is known as the *güero of the hill* and in stories that refer to him, he is considered a giver of wealth, but meeting him may also be ambivalent because he can also produce diseases of the spirit. He can be seen at any time of day when he appears or materializes and seeks conversation. Some Mazatecs relate *Chicón Tokoxo* with *Quetzalcoatl* because they are both bearded and light skinned.



38

Na'in Sonde Padre tierra, empezó a preocuparse, porque su creación los humanos, ya se multiplicaron, empezaron a tener problema entre ellos, ya no podía intervenir en forma directa, envió un ser y dijo: "Enviaré a un personaje semejante a ellos pero de diferente aspecto físico. Tes blanco, cabello blanco, barba blanca, montarás siempre su Mazatl compañera, unos fieles lobos, el representará como padre del pueblo Mazatl, llevará por nombre de *Chicón Tokoxo* (hoy Cerro de la Adoración), *Nindo Xoman* (hoy Cerro Verde) y será un reformador de problemas y padre de los labradores, porque el vivirá en sus dos palacetes, desde esos lugares visitarán, los habitantes del pueblo de Mazatl, pedirán sus deseos, de diversos problemas, buena cosecha, fortuna, donde su mensaje recibiré a través de mi enviado será guía del pueblo de Mazatl. Interview with Leonardo Martinez (Chano Moreno) November 2, 2018

Beings of this the Middle World

Among the Mazatecs it is believed that the person, *chjota*, inhabitant of this middle world, is made up of both a material and a spiritual aspect. One part is made up of the body, flesh, organs, bones, etc., and, on the other, the *sen na,* the spirit.

(Inchaustegui, 1984; Minero 2012; Boege, 1988)

Sen na o *sen ni chi na*, that I the spirit that "God" gave us, and is made up of psychic entities (energies) that reside in the body, doubles, companion animals. Even though the *sen na* belongs to the spiritual world it remains in this world and resides in the heart. It must remain there and be the driving force of one's life, only then can it form a complete, integrated person.

However, it is believed that this spirit has the power to detach itself from the body either involuntarily or voluntarily to interact in the other world. The first possibility occurs when the person is asleep, when dinner suddenly leaves the body because of strong impressions or shock and is trapped somewhere out of the body. The second occurs when one seeks *k'ianga 'nyajinnle,* the sacred voyage with the consumption of *ndi xijto* mushrooms.

This separation can occur when one is asleep, or when the *sen na* suddenly leaves the body because of strong fright (*susto* or *espanto*) and can thus become stuck in another place. This detachment may occur when one takes a "sacred journey" with one of the *plantas sagradas*, through the ingestion of entheogens. (Minero Ortega, 2016) Inchausetgui also reports that the *sen na* (similar to the *tonalli* of the nahua) after a *susto*, will exit the body through the mouth or the fontanelle. Furthermore, (Zolla & Márquez, 2004; Eliade, 1972), report that a shaman is the only one capable of curing this situation, by first seeing the escaped spirit, retrieving it and thus reintegrating the spiritual whole of the individual. (Bartolomé, 2013)

This Mazatec description of the anemic entities or energies in the body are quite different from the Nahua. Of course, the Nahua have the benefit of historical recording in the codices and with the intervention of the Spanish friars with the benefit of clear explanations as in the Florentine Codex, or Lopez-Austin's detailed

explanations. In the case of the Mazateca oral transmission was the main historical avenue for cultural and basically all transmission of information from one generation to the next. The clearest difference is in the description of the spirit. For the Mazatec I have heard that one anemic entity may leave the body after a shock, or after taking mushrooms or during sleep coming from the heart. Whereas, the Nahua describe three anemic entities centered in the body; the *teyolía*, the life force, resides in the heart but never leaves the body when it does, it is in death. According to the Nahuas, the *tonalli* is the spirit force that lives in the head and does at times leave the body and travel after the person experiences a shock or fright or simply voluntarily during sleep, as my Mazatec friends Inti and Saraí describe it.

In this middle world there are also plants and animals, all of nature as a whole has life and has a spirit. That spirit, or Chikón, belongs to the spiritual world, but it converges with the Mazatecs in this middle world because it inhabits each river, mountain, cave, spring, forests, etc.

The Mazatecs that I have known, generally co-exist in their physical and spiritual spheres, with the supreme and contrary deities, with the *Chikones*, with other human beings, with other spirits, with plants and animals, thus creating multiple and complex relationships. The interactions can be intentional or accidental. The daily life of the Mazatecs takes place in both worlds, on different levels, individually and collectively; a person lives with others and is as a member of a family or as a member of a community. The Mazatecs believe that in their day to day lives they should walk cautiously, live and respect living beings, humans, plants and animals. Above all, they believe that they must respect the deities and beings of nature and all the entities of the earth. Otherwise, coexistence may become conflictive or end. If this occurs, it can generate a physical and spiritual imbalance causing sickness, misfortune, or death. Mazatecs seek a harmonious

coexistence with their natural, social, spiritual and cultural environments. But it's not always possible; there are different ways of seeing the world, in which the life experiences of each person come into play and influence the coexistence of others.

Envy, *kjuaxrikon,* is an example of an emotion that can cause imbalance. There are envious people, *chjota kjuaxrikon.* According to the Mazatecs, envy is a feeling that is built on interaction with other people and can cause serious health consequences. In another modality, someone may want the other to stop possessing what he/she lacks and in return, wishes them misfortune, illness and even death.

The shamans look for the Chikónes, San Pedro-San Pablo to ally with them; once they are allied, they issue an opposing force to contradict this emotional state. This would be in extreme cases, when there are conflicts going generations back, or when there are material interests involved. Of course, social relations do not always take this course, and not all Mazatecos have strong feelings of envy, or at least there are many degrees. The reality is that it is a powerful motivation and generates conflicts.

The origin of everything

The Mazatecs, within their belief system, consider a father and a mother as the givers of life and creators of all that exists. I met Mr. Leonardo Martínez three years ago in …whenI visited the Mazateca for the first time. He gave me a book of myths and told me about the gods: he said that they call them *Na'in* or *Niná* which means father, they never call them gods but rather, father. *Niná* is for example, the father of the Earth is the creator, that is, who created everything. This seemed to me very Christian or Catholic but with elements of Mazatec myth.

The belief in a deity superior to what is named God persists, but for the Mazatecs

this god corresponds to a dual deity, mother-father, or *Niná*. However,many have the belief in the divine idea of the Catholic Church in which the father and mother are Jesus Christ and the virgin Mary creators of the world, is undeniable and unquestionable, others told me they know it because they have seen it on during *veladas* with *Ndi Xijto* claiming that Jesus and Mary had taught them the creation according to the Bible.

Some Mazatecs have no problem in believing both versions about a divine origin of worlds. Both beliefs give life to the Chikon and the Catholic saints. Both belief systems become unified: the ancient beliefs in the natural elements and the guardians of the hills with the beliefs in the deities of the Catholic Church, ranging from the divine trilogy, through Jesus Christ and the virgin Mary, saints and archangels etc. This combination of both religious elements integrates what today is the religious syncretism of the Mazatecs. Sometimes it is not the Judeo-Christian god or the Catholic saints who are celebrated with *fiestas* and rituals, but a different entity. Sometimes it is believed that the Chikón of a place is the same Catholic patron saint but manifests itself in another form. Other times it is believed that the patron saint is a different entity and that it allies itself with the Chikón instead to protect the space. This is why sometimes, when a local person is sick, both representations working through and with a *chjota chjine* shaman, intervene in their health and together with the ritual specialist work to restore personal balance and on other occasions, to resolve collective conflicts.

Many Mazatec elders and the *chjota chjine* hold a conception of the world / universe that essentially divides reality into three levels: the upper world, terrestrial space or middle world, and the underworld, all connected by caves, streams, springs, trees and other geographical conduits. Special territorial spaces, being powerful and yet elusive, inhabited by power animals and sacred entities that transit and can protect humans are visited by the human spirit entities that leave the physical body during

certain circumstances such as sleep, journeying with or without entheogens. It was clear to me that the summarized descriptions here from my contacts are very similar to what Michael Harner has described. (Alicia M Barabas, 2008; Alicia M. Barabas, 2008; Harner, Mishlove, & Bloch, 1990; Incháustegui,1983) also mentions the existence of seven levels of the sky and seven of the underworld but does not. Boege (1988) mentions the existence of 12 sacred pairs or couples.

For the Mazatecs, their geography is sacred, inhabited and protected by a set of territorial animistic entities with whom they coexist, the local population and communicates with them through multiple rituals. The mountains, caves, and water sources and many natural resources are conceived as points of access to parallel worlds where these entities circulate. They can trap and damage the balance, capture a person if they cross without precaution. They are also powerful spaces, appropriate for performing propitiatory rites with offerings, offer payment for a captive alter ego and to recover lost health, or to arrange that punishments be sent to those who have hurt them in some way.

Mazatec Cosmovision: Upper and Lower Worlds

In the "other worlds" (Upper and Lower World) live all the unearthly, non-human, immortals, essences of the deceased, malignant spirits etc. but not all are unsavory or insalubrious spirits. There are many who are at peace, but then there are those who wander unsettled, scuttling and bringing turmoil, also present are those beings of the natural world, they all co-exist there together. As I said, the *sen na* belongs to the spiritual world but remains in this world within the person, but when one sees a person die, one may see the spirit leave the body to return to the place where it came from, the "other world." Sometimes when a person is seriously ill the spirit leaves him/her and travels to the "other world" for a period of time. If one's destiny is to die, then, there it will stay, if it is not time, it will return to "this world" and integrate with the person again to help stabilize and balance with the material body. The key objective is to achieve balance. (Incháustegui, 1983)

The spiritual world of the Mazatec is divided into several planes (some Mazatecs have a world view that establishes the world as flat thus planes rather than spheres) (Manrique, 2004). Some say there are three, some say seven, some say they are 13 planes or layers. It is only known that at the highest level, in the supreme world, dwells the supreme deity, God the duality, he-she, the mother-father. The spirits of the deceased, those that have died, also live in this place, but in lower planes, traveling the world and amending their sins. (Incháustegui, 1983). Margarita explained this to me:

> El cuerpo tiene un espíritu principal con otros siete espíritus menores que pueden tomar muchas formas desde las montañas hasta los animales. Podemos saber el estado de una persona todos los días. Estos estados de ánima, no solo están adentro sino que también se reflejan afuera. Nuestro espíritu principal está en todo nuestro cuerpo y está en

contacto con los otros siete espíritus. Cuando viajamos es posible ver un espiritu débil o espíritus muriendo, esto suele ser la causa de las enfermedades. Si todos los espíritus mueren o al menos la mayoría, el espíritu principal también morirá porque no hay nada, ninguna fuente de energía para mantenernos vivos. (Margarita, Huautla 2018)

The body has a main spirit with seven other minor spirits that can take on many forms from mountains to the animals. We can know the status of a person all the time. These states of being are not only inside but are also reflected outside. Our main spirit is in our whole body and is in contact with the other seven spirits. When we travel we sometimes see a weak spirit or dying spirits, these are usually the cause of diseases. If all spirits die, or at least the majority of them, the main spirit will also die because there is nothing left, no source of energy to keep us alive. (Margarita, Huautla 2018)

We have a main spirit that protects us from evil, a protection. Usually, it is the spirit of an animal that lives within us, within our body. I think that when we are awake it remains inside, but when we sleep it leaves and travels. The *chjota chjine* tell us that it is because of this that we dream of flying, or that we dream that we are in a high place or inside a cave, because our protector has gone and does not sleep. (Margarita, Huautla, 2018)

Beings of nature inhabit other planes or levels in which the *Chikones*, spirits or guardians of natural resources like mountains, rivers, waterfalls, springs, caves. That is their domain and it is in "this world" but, they inhabit a different plane in the spiritual world. Human being and nature beings converge or cross at certain times and at certain places. That is why it is believed that at times one should not. However, if it is necessary to cross, you can request permission and give an offering so as to travel through or by one of these places. The *chikons* also coexist with other entities of nature among which are elves, sometimes naughty, sometimes playful beings and yet they are capable of causing harm. For this reason, the Mazatecs consider some of the places that they travel as sacred sites to which respect must be kept. (Conversation with Inti Garcia, Huautla, 2017 translated)

When we consume a few mushrooms the spirit that travels, it comes from the brain (the second spirit), the heart spirit remains (the main spirit), so that the body is not left alone, because the heart has to continue working to keep the body whole and functioning and not leave it alone. (Felix, Tenango, 2018)

Mazatec Cosmovision: The Upperworld

The Upperworld or Mazatec celestial space is subdivided into two planes: the upper one is made up of 13 skies or floors, by way of steps, forming an arc that starts in the east and ends in the west, coinciding with the sun's path over the surface of Mother Earth. These skies or levels are thought ordered as follows: six rise in an arc from the east to the zenith where the seventh sky is located in the center, at the moment of maximum light from the sun, then the six remaining levels are of descent, going from the zenith to the west. On each floor there is a level served by a sacred couple; the first sages considered as common ancestors of the ethnic group. On the seventh level are Father-Mother God *N'ai na Niná*, which is the most important couple, considered as the eternal creator, dual parents of the world.

In the lower plane of the sky, below the arch, lives thunder father, using lightning, light or thunder, and its associated sound elements of the same meteorological realm: rain, revered for its importance in agriculture, but also feared for the damage of its potentially destructive force that can cause flooding. (Manrique, 2004)

The middle world or the earth surface is conceived as flat and rectangular, like a huge table supported by four columns also supported by angels or in reference to traditional Mazatec houses on pillars made of logs and other natural materials of the region. This conception of the world supported by pillars is observed empirically in the construction of the houses in the region. It is also imagined that the earth is supported by four huge mountains located in the corners. Regarding the two truths and careers, they point out that the house, the *milpa*, the altar and the ritual table in square angular form are spaces that reproduce the surface of the earth. The guardian and caretaker of the *jchinga sabé* Earth, is also the guardian of the dead. There is a custom in much of the

Mazateca that before drinking something, one first spills a little or spits out a little to give a taste to mother earth.

It is felt that the house, the milpa, the altar and ritual table, in square or rectangular form, are spaces that reproduce the surface of the earth. In this way, the surface of the earth is divided into high spaces such as mountains and hills as well as deep spaces such as caverns, cellars, streams, springs. There are also cultivated areas such as *milpas* (cornfields) or vegetable parcels that sustain and feed the inhabitants of the region. Connecting these there are roads and paths which can also be traveled by *Chikones*. The *Chikon*es are capable of trapping and kidnapping the alter ego of people who roam unprotected through dangerous or sacred places causing illness or death. The *la'a, nchja la'a* or *chakjie* are conceived as small beings, like children or elves with blond or silver hair who live among the undergrowth, on the shores of the water sources and caves". (Carrera González & Van Doesburg, 1996)

Inti Garcia and I were discussing traditional beliefs and customs, in his house in Huautla, when he described the *Chikones* to me as beings that control a certain territory, be it a river, a well, a mountain, caves, paths, etc. But above all of them is the *Chikon Tokoxo (el cerro de la Adoración)*; "I think that the *Chikon* is the wise one, the one who brings you wisdom and with whom you can dialogue when you ingest *ndi xijto* or mushrooms. Of course, in ceremony." Inti García quote



39

"At times I believe that there is a political reference to Chikones as proprietors, *señores*, *güeros, or catrines* (elegant but arrogant), which could be reference to the large landowners, particularly those of the large coffee plantations who were mostly foreigners and controlled the politics and the economy of the region for years. This is the more politicized version." (Inti interview July 14, 2018)

The town or urban area is the opposite of the countryside however, in it, there are collective sacred places such as the church, the cemetery, private spaces such as domestic altars. Inside homes, it is common to find a family altar, *nachan le niná*, and a *fogon* (hearth), *nachan l'i*. The latter is considered the heart of the house and is usually chosen by enemies to bury evil objects that will seriously harm the family, so it is recommended to guard it jealously through rites and offerings. Lidia Manrique, has indicated that in the kitchens (domestic or otherwise) where food is going to be cooked

for a festive social event, rites of protection are held so that the meats cook well and yield enough for all the attendees, and in this way, the words of the dissatisfied guests criticizing or cursing do not affect the welfare of the family. In the cases of hearths used for funeral meals, once concluded, 40 days after the death, the stones of the hearth are thrown down a ravine and replaced by new stones, so as to eliminate any contamination from the death. (Manrique, 2004)

Mazatec Cosmovision: The Lower World

Below the earth's surface is the underworld or the Lowerworld, also conceived of in two levels. The first, the superior, is connected to the middle world through portals or entrances in a similar way as the Lower World, by means of caves, caverns, roots of trees, streams, and other natural means. It is the place where the *Chikon nanguí*, guardian of the depths lives. This world is also visited by the *chjota chjine* during altered states of consciousness, which can be accessed in a dream, in the fevered state of a serious disease, or by the ritual consumption of entheogens. situations in which the animistic entities may leave the human body.



40

The second part of the cosmology is the Lower World (not to be confused with Hell or purgatory which is inhabited by sinners and evil doers), it is conceived as an arch of levels that starts in the west and ends in the east. This lower arch is formed

by seven steps or places where the dead peregrinate. The seven digit is found associated with the Lower World. It is the number of years that the body takes to disintegrate, there are seven capes of the year in which the deaths are eaten and the number of years that must elapse for a spirit to reach the glory. It is also the number of seasons that a *huehuenton* (ritual dancer) must go out to dance to fulfill their commitment to the deceased ancestors. Each of these seven rungs are places of suffering where you pay for mistakes made in life. The more you fail, the more difficult it is to go through with, and the greater the torment.

According to Manrique, after 40 days of death, the spirit begins its journey going from one to another of the seven planes of the underworld and on this journey, first, a space with a very strong wind which makes it difficult to advance, then, to a place full of thorny shrubs, in which the deceased pull at you while crossing it, suffering painful scratches, then entering a place full of fire where one suffers intense burns. Finally, one enters a plane where evil animals that do not exist on earth, attack the spirit so as defend itself must wear the braided worsted belt. (Manrique, 2004)

In general, the voyage through the underworld described by Manrique, is quite similar to Dante's voyage across the river Lethe or in Greek mythology the river Styx. In traveling through the Underworld, Barabas (2002) makes the contention that many of the images and symbolic representations may be reflections of society and its structural components: greed, envy, conflict, and the need to get through these obstacles unscathed. These territorial animistic entities are conceived as organized in a stratified society, which serves both as a mirror and model of the social structure of the Mazatec community. (Barabas, 2002, p.164) This is in contrast to the Underworld or Lower World described by Harner (1990), where one would travel to encounter a power animal, an ally, a source for support in a pleasant place with light and rivers not the

darkness and temptations of Hades or biblical Hell. This exemplifies the fact that the Catholic or Christian concept of Hell may have superimposed itself over the Mazatec concept of the Lower World or underworld. Thus, it becomes a Purgatory of obstacles from which the spirit must escape and ascend to a higher level according to one's prior sins. (Barabas, 2008; Harner et al., 1990; Manrique, 2004)

Forced Syncretism

In Huautla, as well as some of the communities I have visited, there is a wide variety of evangelical religions such as Jehovah's Witnesses, Seventh Day Adventists, Iglesia Universal del Reino de Dios, Pentecostals, and others. These new religious beliefs in the area started attacking and denigrating ancient religious practices as well as bringing in considerable wealth to the communities for various church activities. Because of this religious and social pressure, some people changed their perception about their religion, influencing their respect for traditional medicine and shamanic practices. The new protestant religions frowned upon belief in the spiritual world, and in the deities and the beings from nature. Since the churches' arrival in the area, the idea of a unique, true and only God was proclaimed. Once their communities were established, the presence and teaching of the evangelical religions ridiculed indigenous beliefs, calling their customs into question, thus undermining self-confidence, destroying respect for traditional authorities, and consequently stimulated political or social conflict. This process opened the way for a form of colonial repression, much in the spirit of the early Inquisition. It became a form of cultural imperialism unbridled in its attempt to win over the many indigenous people, unhappy with their diminished role in a catholic heirarchy that had established hegemony in "a concerted assault on values and the religious or spiritual sanctions underlying them, in ways which appeared to create 'the psychological basis for the politics of colonialism." (Cuthbertson, 1987, pp. 16-17)

This began early on when the early Spanish chroniclers and friars determined that the Indians had great stigmas: idolatry, human sacrifice, cannibalism, paganism, witchcraft, polygamy, incest. A key attribute for the construction of the

discrediting imaginary about the Indians was (and remains) witchcraft, associated with idolatry and paganism, as a set of prohibited religious beliefs and practices and in the service of the Devil. (Bárabas, 2000)

Edward Said, in his book *Culture and Imperialism* attempts to describe the confrontation between the Western and non-Western worlds which involves an abstract or metaphysical sense of oneself contrasted with the conception of the "other." These distinctions are exhibited in differences of race, language and history. Subsequently, there is the assumption of the universal applicability of these Western perceptions or discourses as demonstrated and legitimized by the growth of western global domination of the non-western world. This domination is certainly present in the Protestants domination of the Mazatec region as well as their sordid expansion into Chiapas. (Said, 1994)

In *la zona Mazateca*, it was claimed that the belief in the *Chikones* was nothing more than Devil worship because there could not be more than one God and everything else was false. Many stopped believing in *Nina*, the father-mother (dual god) creator of everything that exists, they stopped believing in a spiritual world accessible through dreams or the by the ingestion of different entheogens. Many stopped believing in "the wise ones", *chjota chjine.* They replaced everything with one God, through Jesus Christ.

But then, some Mazatecs have no problem believing that two versions of a divine origin of the world are possible at the same time. Both convictions give life to the *Chikones* with the catholic saints. Both belief systems coexisted after the imposition of Catholicism on indigenous beliefs, leaving the indigenous religions to be practiced in secrecy because of extensive and brutal suppression by the Spanish, but through the years both doctrines became practiced together: the old beliefs in the natural elements and in the compassionate spirits of the hills as well as the malignant ones. This

combination of both religious elements, integrates into the syncretism of the the practices of the Mazatecs today. Entities from both religious beliefs are honored, celebrated and offerings made, although the statues and images on the altars of the curanderos that I visited recently, generally portrayed virgins and catholic saints. Sometimes it is believed that the *Chikon* is the same as a Catholic patron saint, but manifests itself in another way. I have also been told, that at times the patron saint allies itself with the *Chikon* to protect the land. This is perhaps why, when a local person becomes sick, both entities are asked to intervene together, guided by a ritual specialist to restore personal balance.

Concepts of the Human Body Spirits

In the Mazatec worldview or their cosmovision, the Middle World of the cosmos hosts humans, who inhabit a dual body, similar to what López Austin, decribes among the ancient Náhuas. (Lopez Austin, 1984) In this perception, the body is made up of biological material/matter and psychic entities. Some only leave the body at death while others have the capacity to temporarily leave it during certain occasions: in dreams, during the "veladas" and consumption of entheogens, during a serious illness or after serious accidents. During these times there is the risk that these personal psychic entities either become lost or captured by an earthbound entity. Many Mazatecs believe that human beings are made up of a biological body with a set of animistic entities, the main entity is the one based in the head *sen nizh'gin* (as described earlier), and secondary entities located in the heart and the liver, but which circulate throughout the body in the blood. These spirit type entities bear resemblance to the human animistic entities found in (López Austin 1984) and (Signorini & Lupo 1989), both studies looking specifically at the ancient Nahua concept of the body.



The main spirit or "core", the *sen nizh'gin* is more central than the *tonas* or other vital energies in the body, because it is the principal vital force of the body, it lives in the head or in the heart, however, in a *susto* or *espanto* (a scare) can change its location and circulate through the veins with the blood, this is why healers (especially *pulsadores*) seek its position, its strength and its temperature in the joints of the arms and in the veins inside the wrist. These are the places where *piciete* is rubbed, cacao water and other therapeutic substances during healing rituals (interview with don Felix in Tenango). This spirit entity does not leave the body during life, but after death, it usually leaves permanently through the mouth, as air or breath; it coexists for a time with friends and family, and visits the places visited in life and finally, after the *leventada de cruz*, which is 9 days after death, the spirit entity starts its journey to the Underworld, Lower World. There is usually an association with air, heat and blood, elements present in the healing rituals performed on weak patients in order to increase their strength. (interview don Felix, Tenango, July 21, 2018).

The *sen nizh'gin* can leave the body at night, and when you experience dreams in foreign places or places far away the spirit is in fact doing what you dream. In many conversations people would refer to this spirit as a person's *double* or a reflection. This is very similar to the Nahua *tonalli* referred to by López Austin.

This theological concept of *tonalli* (Nahua) is described as a spirit entity (entidad anímica), generated by the sun, *Xsu'it* (Mazatec) *Tonatiuh* (Nahua). An individual's health, life force, destiny and even his / her relationship with the environment depends on the stability of the *sen nizh'gin*, since it can be influenced by deities as well as by plants and animals. The word in Náhuatl is a verb, *tona*: to radiate, which implies daytime, making reference to the forces that are incorporated into each newborn, according to the calendar day of his or her birth which will influence the

name. Therefore, name and *tonalli* were associated representing the link that unites man with the gods, and through them to the entities of nature. (López Austin, 1989)

There is much similarity between the Mazatec and Nahua conception of these anemic forces. There is the idea that people have several *anima* forces taking the form or spirits of wild animals of different types; they can also take the form of celestial or atmospheric bodies. These psychic and extrasensory entities may be one of many, and throughout life they may die, causing varying degrees of pain depending upon the affected anemic forces; those that survive the death of the *sen nizh'gin* yield to it and share in its destiny. The Nahua describe *anima* forces: the *teyolia*, the *ihjiyotl* and the *tonalli* each with its own characteristic and affect, whereas my understanding is that the Mazatec have one anemic force functioning more like the *tonalli*.

Although, don Felix of Tenango, refers to these secondary spirits or reflections that we are all born with, women having seven and men having five implying that the woman has more power in general. Don Felix claims that the main force, the main spirit, the *sen nizh'gin* is located in the head and that its force permeates throughout the body. He claims that these multiple spirits or forces working together (primary and secondary) are present not only in human beings but also in deities, animals, plants and generally all of life.

For example, as all beings have *sen nizh'gin*, I have observed when the Mazatecs go to pick mushrooms, gather the leaves of *la Pastora* (Shepherdess) *salvia divinorum*, or collect the seeds of the Virgen (*ololiuhqui*), *turbina corymbose*, or collect any other plants used for therapeutic purposes, before cutting them they quietly speak to them, they explain that it is necessary take them to cure a sick person and ask for permission to pick them and forgiveness for harming them, often leaving an offering as a gift or compensation on the ground from where they are taken. The people that I have

observed have a very respectful relationship with plants.

These sacred herbs, are considered deities in themselves, acting by virtue of their numinous properties; that is, it is not the herb itself that cures but rather the divinity, or a part of the divinity or magical power that is imbued in it. For the power to remain in the plant, a complicated ritual is necessary, both during its harvest and in its preparation and use; if it is not carried out, its use becomes completely ineffective, in fact, in the communities it is believed that it is not the pharmacological properties of the herbs that cure, but rather, the mystical properties.(Aguirre Beltrán, 1963)

Balance

Mazatecs have often made reference to humans respectfully sharing spaces and energies with all their environment, flora, fauna, atmospheric and celestial elements. There is often a great deal of attention and effort placed in the health of the natural environment, and of the community and then of the individual, all preserved when the relations of reciprocity between human beings and nature are respected as well as with the other-than-human entities. Reciprocity with other-than-human entities usually involves an exchange of favors repaid through, or sought, with offerings given. There is a delicate balance between these entities and the social, moral and spiritual canons of the group that must be respected, since transgressing can bring serious consequences in the form of catastrophes, storms, droughts, diseases and a variety of epidemics as well as social conflicts. Curing or stopping these outbreaks and restoring the balance often require many rituals and offerings with a *chjota chjine* often involved in helping to restore the balance.

Illnesses and causes

The interpretation of illness and disease is bound by a social and cultural system in the home community. Differences in belief and customs, family structure, religion, and economic class create different expectations for healthcare and in any given community. Therefore, the interpretation of disease and illness including both health belief systems and rehabilitation is connected to culture. For example, culture teaches us to interpret pain in ways that are meaningful to the individual as part of a group.

The Mazatec cultural framework acknowledges the existence of two sources of illness, one natural and one spiritual. The natural or biological source is recognized and treated by modern medicine or by a *curandero* or by an *herbero*; the spiritual source is recognized and treated by a *chjota chine*. An illness can come from either source. The sick person may have the same symptoms regardless of which source prompted the disease. Natural diseases are cured by herbs, pharmaceutical drugs, surgery and other medical procedures and interventions. When these interventions fail it is thought that perhaps the illness is caused by a spell or "*una mirada caliente*" and these require treatment by a curandero or shaman.

Most Mazatec people know what the causes of diseases are, and they usually feel that they are related to a person's negative attitudes or arrogance. The most important punishments are directed by the *Chikones* and *nchjala'a* for breaking rules or being disrespectful, or for exposed or unguarded encounters with these entities during dreams or even in waking states. These confrontations produce *susto* (fright), *espanto* (shock) and *encanto* (enchantment), This can result in damage to or the loss of *sen nizjin*.(Barabas, 2008; Incháustegui Díaz, 1994)

Shamans concept of the "natural" cause or source of illness is similar to that

of the medical model. The basic premises of Western medicine are generally accepted. These "natural" illnesses are seen as being equally treatable by Western physicians or with herbal remedies and occasionally with spirit intervention with a shaman or curandero. However, shamans believe that spiritual or negative energy may also cause illness, not related to natural causes. This is where traditional medicine and Western medicine differ. Margarita indicated that any particular illness suffered by a patient could in theory be caused by either natural or supernatural means. She claimed that there is a natural form of tuberculosis and one caused by psychic or supernatural means, invoked by a *tje'e.* She went on to say that this could apply to any number of illnesses from cancer to drug addiction.

Many blame illnesses on the "mirada caliente", a fierce and glaring stare that transfers negative force to a person through the intense look, sometimes used in conjunction with the help of a sorcerer or *tje'e*. The Mazatecs consider that some people possess a kind of energy in the glare, which can be sent from one person to another voluntarily or involuntarily, this force or form of power that resides in the look, is said to be stronger and more developed in the elderly since they have developed *la mirada caliente.* The most direct victims are children (*mal de ojo*), that is why they are protected with either amulets or kept from potential harm. But there are people who have such power that they can harm anyone. It was explained to me by Margarita, Lucio and Micaela that many times the damage is requested as punishment for wrongful acts, then it can be considered not as an act of evil, but rather as one of justice.

The frequency and intensity with which diseases occur depends a lot on the strength or spiritual fragility of each person. Matilde, in Huautla, told me that there are spirits, *sen nizjin* that are very strong and that there are those that are weak, she told me that the latter may result in the person becoming quite sick. Germina said that she knew

people who almost never get sick, and others who get sick every month. She, as a midwife, healer, can recognize an ongoing symptom, and can take measures to heal it, but if there is no good healer available, the person can die quickly. She explained that in the communities around her town, there are many healers but if a person does not seek help in a timely fashion, they risk death.

There are many traditional procedures for determining how sick a patient is, as well as what may be the cause of such an ailment. Some of the practices used that I have observed are; divination with pieces of copal; the cause may be sought by pulsing the veins of the wrists and forearms of the patient; or reading the yolk and egg white poured into a glass of water after being passed over the patients head and body; the reading of corn kernels that have been cast onto a flat surface; the interpretation of the flames from bee's wax candles; or consultation with the animal companion or other-than-human helper; or exploratory voyages made with the help of entheogens, sometimes even with the help of tarot cards. But perhaps the most revealing diagnosis is the interpretation of the patient's and/or shaman's dreams.

Turner describes a ritual as being "prescribed formal behavior for occasions not given over to technological routine, having reference to beliefs in mystical beings or powers." (Turner, 1969, p. 27) For this purpose many ritual specialists, such as curanderos or shamans, use the above named material objects along with non-material objects such as prayer or invocations or energy healing. Illnesses may range from the very simple to the very complex, including very serious psychological problems

Relevent and frequent illnesses associated with *Síndromes de Filiación Cultural*

I am going to discuss the following afflictions: *susto; espanto; mal de ojo; mal*

*aire; encanto; caída de mollera; levantada de alma; empacho; bilis***.** These illnesses are treated using the materials, rituals and prayers common to the Mazatec community although I have observed many practices in the Zapotec community as well as those previously described in the Nahua community in Cuetzalan, Puebla. There is a widespread knowledge of these afflictions and appropriate healing rituals throughout Mexico, as well as in Mexican American communities that I have known in Los Angeles. Families often treat these illnesses without a curandero or shaman but on their own, as many family members have observed curanderos and feel that they know how to help in the healing process. Usually, only the most serious illnesses are treated by a curandero or a shaman, although results may not be as effective if healed without complete understanding of healing rituals.

Susto and *espanto*, illnesses seem to be the same, both mean fright, but they are different for the Mazatecs; in the *susto* real people and animals intervene or are experiences of everyday events while *espanto* is produced by the appearance of an extra human entity that appears before the victim with the clear purpose of capturing one of his/her spirits. And although in each case the cause is different, the consequence is the same, the capture of some human spirit by territorial spirit entities. I will discuss each more clearly.

It appears that there is far less attention paid in traditional medicine to physical and social problems than perhaps in Western medicine. In speaking with Germina, don Lucio, doña Micaela and other healers, it is clear that they deal with social, psychological and spiritual problems as well as with physical ailments. In many cases it appears that these problems overlap. They often offer strong psychological advice along with herbal and ritual remedies.



42

A frequent reason why people get sick, whether accidental or from suffering economically or socially, is due to the work of *trabajos de maldad* (witchcraft); petitions made in rites, by a *tje'e*, a sorcerer, who knows how to injure her/his victims. Rejection is due to several factors, the main ones being envy and revenge; envy is the desire to possess what others have and at the same time hoping that they lose it all. In most human socio-economic settings where there is a shortage of goods and services, it is common that there be a feeling of envy towards those who have, especially if there is the believe that the inequality is due to the more affluent individuals or families.

Angela, a curandera in San Mateo Yoloxochitlán told me that in her neighborhood there is an epidemic of gossip about earnings that sometimes leads to disputes and fights among members of the community resulting in envious behavior leading to witchcraft and violence. This is explained in the Cosmovision: General

section.

Revenge, the second affliction mentioned, is often described as a valid justification for harming rivals; when an economically or politically powerful person taking advantage of his/her interests, causing harm to the inhabitants of the town, the residents will try to stop his/her abuses by retaining a *tje'e brujo* who with witchcraft can punish the abusive person and teach him/her a lesson. Generally, for this type of action, the *Chikons* or the saints or the evil spirits are summoned to exact a price.

A frequent custom is to send poisonous animals, or to incite auto accidents or to instigate accidents at work, these are examples of the types of punishments used to settle pending tabs. Another way to punish enemies is to lead them to where the Chikon can trap their spirit and imprison them or by generating or causing an illness provoking symptoms similar to a heart attack, a stroke or cerebral palsy, making it difficult to recognize the true cause, but all leading to an almost certain death.

Another "*trabajo de maldad*" involves removing the *sen nizjin* from the body of an adversary using witchcraft, and thereby transforming it into an animal allowing it to wander into dangerous situations that could be fatal. (Incháustegui, 1983; Manrique, 2004; Barabas, 2008; Bartolomé & Barabas, 2013)

Finally, as described earlier, the other category of diseases are engendered from natural causes. The biological diseases, which are due to either infectious illnesses, or to genetic and degenerative ones. These are often thought to be sent by God, examples are, the flu, diabetes, the common cold, measles and chickenpox, high cholesterol, these are often considered to be curable or controllable by allopathic means, with patent medicines if, however, the medicines have no effect, it can be said that they may have a psychic or spiritual origin.

The hypotheses about illnesses being exacted by the territorial entities,

inflicted with spells and bewitchments by sorcerers; being gazed at with "*la mirada caliente*", suffering *susto or espanto*, to name a few. These maladies still afflict people's everyday life in the Mazatec communities that I visited. Subsequently, this explains why there is still a large number of shamans and neo-shamans working in the region, providing attention to the local communities as well as to tourists.

Limpias and other rituals

Today, there are many other non-institutionalized religious practices, that many Mazatec people incorporate into their lives, one of which is going on pilgrimages and honoring saints or virgins worshiped by the catholic religion. However, these are not officially sanctioned Catholic events. One important feature shared by both the ancient and modern civilizations is a reverence for geographical features such as caves, mountains, lakes, springs, and rivers. The landscape itself is sacred, and it plays an important part in religious beliefs and rituals, then as well as now. For example, it is a common belief among today's Mazatec that powerful spirits live in specific locations throughout the countryside. Some may live at the peak of a certain mountain, like *Chikon Tokoxo* or *Chikon Nindo*, or perhaps where water flows from a spring. In order to honor these spirits, people must periodically travel to these sacred sites and deliver gifts to the beings who reside there. Because of these beliefs, both the ancient and modern people of the region organize pilgrimages to visit the sacred locations in the regions where they live.

These pilgrimages are organized by local devotees of a *chjota chjine*, usually not the *chjota chjine* themselves. The entire community may sponsor a ritual, or a single household or family may sponsor it. The ritual will bring the sponsor recognition and prestige. One of the most venerated virgins in Oaxaca is in Santa Catarina de Juquila, people come from all over Mexico on pilgrimage to pay respect to this miraculous virgin who is reputed to bestow good luck and health to those visiting. By the same token, there are frequent pilgrimages by Mazatecos to the *Cerro de la adoración* to pay homage to *Chikon Tokoxo* when the need arises for health and balance, but the official day is on May 1, on this day rituals are performed and offerings are brought for *Chikón*

Tokoxo.

There are also numerous Mazatec rituals that are non-institutionalized religious practices. People perform rituals of protection, purification, therapy, healing and gratitude. These rituals take place at different times and places and are not usually conducted exclusively by *chjota chjine*. They may also be dedicated to plants, animals, objects, houses or properties. Rituals such as cleansings can also be practiced inside Catholic temples, for example, during the Sunday morning Mass but do not fall specifically into the domain of the Catholic Church or the official religion. At other times, purification rites are performed inside the Catholic churches when there is no mass. People arrive to make their requests, their prayers and perform their cleansing with herbs and candles.

These rituals are performed for protection or to ask the deity or the patron saint of place/guardian or a *chikon*, permission and protection to travel through "this world" or specific sacred or dangerous places. Often, cleansings are performed in homes or in the countryside and have little or nothing to do with the Catholic religion. For example, when one walks from one place to another, way is cleansed with herbs for protection. The inside of a house may be cleansed before taking residence or when leaving the place. Often when people go to *Chicón Nindo,* there they will perform a cleansing, because it is a sacred place; or when leaving the cemetery, after paying respects; or in front of a cross in the countryside.

In the Nahua region of Veracruz, I once participated in a pilgrimage to *Postectli,* a volcanic hill with historic reference to corn. There are small caves near the summit that are said to be the homes of thunder spirits and *Apanchanej*, the Water Dweller. Nahua pilgrimages are organized by a ritual specialist called a *tlamatiquetl*

shaman in the Nahuatl language. Anyone can aspire to become such a "shaman-priest" if they are willing to undergo the long grueling apprenticeship or receive a don at an early age. To organize a pilgrimage, a person of knowledge or *tlamatiquetl* must first notify friends and helpers in his or her own village and in neighboring communities.



43

Rituals for healing.

All therapeutic rituals are a form of request. The deities are asked to show the shaman the causes and origins of the disease, as well as the necessary procedures to heal it (this is similar to descriptions in the Cuetzalan section). The objective of the ritual is to recover the physical and spiritual balance of the afflicted person. Those responsible for performing these rituals besides a chjota chjine, can be the elders of the community, midwives, *hueseros* (bonesetters), including other specialists. Often, a member of the family or friend who has a calling for healing will perform the required cleansing and

ritual.

These rituals and therapeutic procedures are well established; first, the necessary plants are obtained so that the patient can drink teas, *brebajas* potions, and/or to *baños* bathe in specific herbs. Then, often, long therapeutic procedures are performed involving several rituals, until relief or healing is achieved these may include cleansings, divination rituals, or rituals within *temazcales*. Subsequently, other rituals amay be performed based on the ingestion of certain foods. Each therapeutic ritual is conducted differently but all are directed at healing. Each case requires different procedures because each sspecialist works according to what he/she has learned in his/her journey as a *chjota chjine*. Each therapeutic ritual holds to a common structure within the three levels of treatment, the material, the spiritual and/or the mental or psychological.

Many Mazatecs also make wishes to the deities, to the beings of nature, to the Catholic saints and to the *chikones* as well as to the spirits of the deceased, beings of the spiritual world. For example, health is petitioned, fertility for the land, a good harvest, or rain is requested but always preceded by a giving of thanks for life itself and for the previous opportunities granted.

Generally speaking, rituals of petition and thanks are intended to benefit people or the community and are the most common and the ones that I heard of the most, I almost never heard rituals requesting harm, disease, misfortune or death to someone, as I believe these petitions are usually done in private and avoided. Each ritual requires its own objects and its own offerings, depending on the needs and the ritual specialist. As the existing situation becomes more difficult, or the problem more serious, the ritual required is more frequent with more offerings.

The belief and need to make offerings are present in most religions of the

world. (Eliade, 1974; Knab, 2009; Neurath, 2008; Peters & Price-Williams, 1980). It is of importance to Mazatecs to try to maintain balance with these divine and opposing forces. It is said that all these beings are benevolent except the Chikones, who may at times become enraged at people who are not respectful of their homelands, and thus capture the spirit of those who have disrespected their lands. As a consequence for such an offense, an offering to the Chikon is essential and must be made depending upon the severity of the breach. If an offering is not made to the Chikon, the person might fall seriously ill or even die.

When someone has healed from a serious disease, offerings are also given to the deities and the Chikón for having mediated in the recovery of the person. The offerings, depending upon the ritual, but some consist of the following: candles are offered or *piciete* (tobacco powder, derived from *picietl* in Nahua, it is wild tobacco ground and mixed with lime, garlic, yerba santa, rue and other herbs to increase its power also known as San Pedrito, San Pedro or San Pablo (powdered tobacco). *Piciete* is often rubbed into the joints for protection, also offered are: copal, flowers, chocolate, lime and eggs. Magic amulets or packages are made that contain substances and objects that are associated with the deity that requests it or that has been offended. Other rituals foods are offered: fruit, alcohol, breads, mole, beans and tortillas.

Sacrifices are commonly made with animals; a chicken is slaughtered and a little blood is extracted from the animal which represents the life force. Blood is particularly prized because life is not possible without it (seen in pre-Hispanic codices). Another form of offering is abstention, to limit oneself, to stop eating or abstain from doing something, then, to offer this abstention in exchange for healing. Ultimately, it is always an exchange or at least an offering.

Finally, there is the Mazatec *velada* involving the consumption of *ndi xitjo* (the mushroom ceremony). The Mazatecs kept these practices hidden since the conquest until Blas Pablo Reko in 1919 gathered some spores and reported religious ceremonies involving them; Weitlaner (1936) and then Wasson (1955) and Furst, (1976), published materials on the existence of this religious medical form. Over the years many Catholic saints and symbols from the Catholic religion have been incorporated into the ceremonies, during which, instead of a *Chikon* appearing or one of the forces or deities from nature, a Catholic saint will appear giving aid or help to the afflicted. (R. G. Wasson, 1961; Weitlaner, 1952). These are further described in the Veladas section as well as the Training to become a Shaman section.

Lectura de huevo / Egg Reading

While in Huautla I wanted to meet practitioners of traditional medicine the *Chjota Chijne*. We didn't know any in the town. I was lucky to be given the name of a contact by Dr. Fagetti of the Benemérita University of the Americas in Puebla. Driving in, we took a few wrong turns a couple of times before finding Inti's house but once there, he greeted us warmly and invited us in to chat. We talked about anthropology, his father, fungi, the *Ndi Xijto*, teaching (he is a teacher) and more. His wife and children were great. He invited us to stay a week. During the course of our stay he told me about a healer who could talk to us: doña Mary.

We went to see her. She lived about a kilometer away. I guessed that she must have been in her 50s, serious and calm, I told her that we were apprentices and that we were conducting a study about *Chjota Chjine*, "men and women of knowledge", ('shamans' in the Mazatec region) and that we had been referred to her by Inti.



44

I was surprised by the gentle, quiet atmosphere of her house. We were in a room painted green with an altar and several lit candles and many dozens of eggs in the back of her altar. Everything seemed to be in its place, we could hear the neighbor's radio blaring in the background while she talked with us about her life and work.

She told us that when she was twelve, she was stung by a spider and that as a result of its poison she had lost consciousness, she developed a fever and her body began to swell. They quickly brought a doctor but since he couldn't feel a pulse or hear her heart, he diagnosed her dead and injected no antidote. Several hours passed during which the family began to prepare for the funeral.

Her mother, inconsolable, hugged her desperately, crying profusely. This went on for several minutes, when suddenly, she opened her eyes hugged her mother and told her not to worry, that she was fine.

A few days later Mary went to the fields with her grandmother, who was riding a *burro* mule, Mary was walking. Suddenly, Mary heard the gobble sound of a turkey followed by intense breathing. She asked his grandmother and did not touch the donkey but saw his ears moving furtively, as if anticipating a danger. Her grandma had not heard anything but grabbed the reins and led him to her house. This was the beginning of her ability to sense and to perceive. Mary realized a little later, that she could remove ailments, cure diseases and solve the problems of patients who increasingly came to see her.

Depending on what they had Mary made them an individualized treatment. Some patients she received she cleansed with eggs and herbs, and others she treated by placing her hands on different parts of their body. For others, Mary took a look or a view (*una mirada*) that allowed her to diagnose and plan her treatment. Mary claims to be able to distinguish if the people who come to visit her are sick or have a psychic power that they have not developed.



45

Viewing of an egg (broken into a glass of water) is a common practice among the shamans and healers of Mexico. It consists of first, rubbing a fresh egg (in the shell) over all the patient's body; starting with the head and ending with the feet. The egg is then poured into a glass containing clean water. Depending on the forms acquired by both the white and the yolk, the shaman interprets the patient's health and offers a diagnosis.

In general, the clear yolk or egg white is the spiritual part of the patient and its way of indicating to the shaman the energies that surround the body, how they influence and control the person.

The yolk, on the other hand, represents the physical body. In it excrescences mean diseased areas of the body, flows mean infections in process and dark areas model aspects of much negativity.

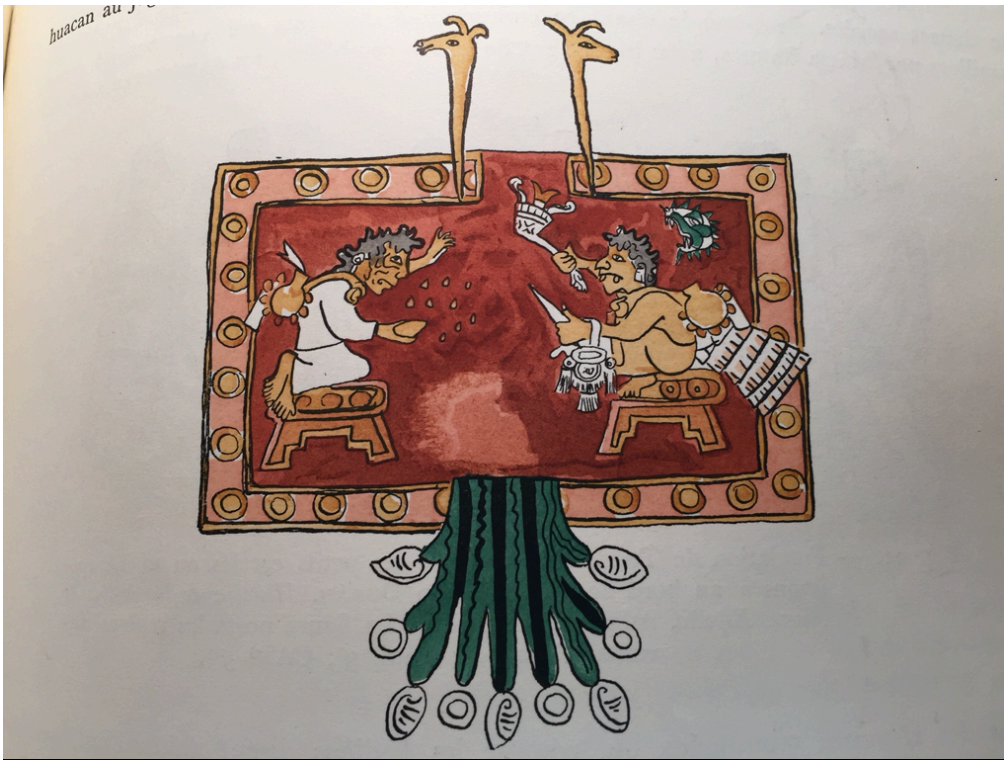
- Bubbles in the white are interpreted as beings associated with the patient's energy field. Depending on their position, the diagnosis varies.
- When the yolk is covered by a protein veil and there are also bubbles on the surface, the diagnosis is negative.
- If the yolk is clear or an isolated bubble is found floating inside the white, it is interpreted as positive meaning the presence of a guide or protector of the patient.
- When two large bubbles surrounded by a veil floating over the yolk are observed, the diagnosis is of a being who watches the patient and has been placed there by an enemy as a result of jealousy or jealousy.
- When the bubble is embedded in the yolk it is considered that there is a drowned spirit.

Actually, the description I just made barely does justice to the complexity of the diagnosis associated with the ways of viewing the egg. Then, depending upon the visual analysis and diagnosis, Mary decides upon her treatment.

This may consist of a cleansing by using her (the healer's) own body, especially her hands with branches from plants as instruments to remove areas of imbalance, or the use of eggs that are rotated on the patient's head, back, chest, hands, arms and legs to absorb negative energies. She says that she often works the temples, in order to clear negative energies from the head.

Lectura de maíz / Corn Reading

One of the important diagnostic tools that some *Chjine* shamans employ in the Mazateca is *la lectura del maíz* or the reading of corn, a form of divination. The *consulta* consultation is essentially a linking of the patient and shaman to the spirits, the supernatural. The diagnosis of illness is determined based on throwing the corn onto a table and interpreting the resulting patterns. Reading corn is common throughout Mexico. Aguirre Beltran believes that this indigenous practice became mixed with an African variant. (Aguirre Beltran, 1963, pp. 191-2)



46

I will give an account of a reading method I observed in Huautla with doña Hermina. She first cleared and brought out a small a wooden table, on which she lay a white embroidered cloth. After smoothing the cloth, she placed several dark jade stones

along the edge of the cloth. She took out a small pouch that contained the corn kernels, she poured them into her hands and began to pray or chant in Mazateco, I believe there were 14 or 15 kernels. She mentioned her patient's name in the course of the prayers and then suddenly threw the corn with one hand (her right) onto the cloth. She carefully observed the corn kernels, the formation they took and the proximity to the jade pieces. Hermina made comments to her patient about different challenges in her (the patient's) life and about the persistent headaches that she was experiencing. Hermina was able to identify an oppressive spirit that was feeling neglected and was causing her patient harm. She identified the spirit as an envious neighbor and suggested that she make an offering of copal and *piciete* with beezwax candles on the hill Chikon Tokoxo.

After the reading she was offered a monetary cooperation, however she refused to receive it. And she only accepted a plate mole that the patient's family had just made, as she had not eaten yet. It is important to highlight this point because, because the Mazatec are still connected with a reciprocal relationship with the beings that inhabit the sacred world, and they do so with the members of the community. *Chjine*'s work does not have a tacit economic value, it is understood that they do not handle economic rates, the relationship is one of exchange or reciprocity.

The work of some *Chjota Chjine* is not limited to the Sierra Mazateca as doña Hermina commented, she sometimes made trips to Mexico City, to carry out this work with Mazateco residents of the city, and that often in addition to reading the corn, she also performs *veladas* "evenings" with *Ndi Xijto* mushrooms. Revealing that healing practices are recontextualized according to space and time, and that these practices are given a new reading and meaning in urban contemporary settings.

Doña Matilde

I met doña Matilde one Saturday afternoon, in her consultation room. I observed her features: indigenous, strong, with two white braids marking her oblong face, without many wrinkles, maturity and understanding. I asked her: why did your ability to heal begin with the death your son? She replied that this was normal when someone in a family had the *don* the gift, when he died, he would pass it to another member of the same family. Doña Asunción assured me that she could heal wounds and heal diabetics during her trances. She also said that she does not have to take *Ndi Xijto* to enter a trance, although mushrooms help.

As I sat with her, her eyes closed her patient in front of her, she began to exhibit changes/alterations in her breathing, as she appeared to enter a mediumistic trance. She began to talk to her patient in Mazatec. It was an incredible situation; it was very clear that they were communicating closely. Their bodily gestures, kinesics, were clearly synchronized and intuitive. It was clear that they understood each other, moreover, they discussed something of importance judging by their gestures. Then Matilde made her patient lie on a blanket covered *tapete* and began a procedure placing her hands on her patient's forehead for about a minute and then placed her hands on her stomach, massaging and rubbing deeply, talking all the while with the patient. Finally, she blew air into either side of the patient's head. And then said a few things that I did not understand. Then Matilde opened her eyes and went to get water that she splashed on her face. She asked me how I was.

I wondered what this all meant. How and why do these shamans lose their daily consciousness and heal in an altered state? How would I be able to better understand those mysteries?

There are certainly many different levels of consciousness, each with its own phenomenology, although with apparently common characteristics. She told me that during deep meditation she can feel the presence of an inner center filled with sensitivity and wisdom.

Perhaps some native healers are able to place themselves into this central internal area of being, but due to a strong sense of humility, consider it totally alien and contrary to their own individual consciousness. Perhaps this is why they call it their protecting spirit, their ally.

The clearest explanation I remember about the different states and levels of consciousness is what I read about the Mexican nagual-shaman, Don Juan Matus, as reported and expounded by Carlos Castañeda in his books. According to him, every human being has a mechanism that aligns two bands of conscious (mind) emanations.

On the one hand, some emanations are associated with the body, the internal ones. The others are external emanations coming from the very same origin: consciousness. According to don Juan, there are many possible energy bands (animate energy), with a mechanism that joins one's conscious awareness with one of these to form a point of animate energy (strength). The point of heightened consciousness (strength) that acts as a luminous magnet and attracts certain internal bands of energy, connecting them to the external ones. Each time this occurs, a human being enters an altered state of consciousness.

Generally, we all have a point of heightened consciousness, but it remains in a stationary or neutral position. When it moves, we penetrate into altered states of consciousness. Most ordinary people are not able to enter this heightened consciousness at will so as to place it in the position that suits him or her best. Only a shaman can mediate his/her levels of consciousness and the associated energy fields.

Only the *chjota chjine,* people of knowledge have control over these energy fields of this energy point and can modify them at will.

Veladas

Among traditional Mazatec doctors, consuming mushrooms is a procedure that is frequently used for different purposes, including for therapeutic purposes. It is a ceremony in which both the *shaman* and the patient, who has requested their services, consume mushrooms to diagnose the disease that afflicts the patient. In the Mazateca culture there is a particular respect for hallucinogenic mushrooms, since, according to them, these are *santitos* saints, *niños sagrados* sacred children. In some communities of the Mazateca region they are known as San Pedro or *teonanacatl* or the flesh of God. In the worldview of this indigenous group, certain mushrooms are possessed with supernatural powers, which guide the shaman and the patient in search for the origin of the ailment, which is the beginning of healing and treatment.



47

The ritual is intricate, and for it to be successful, a series of careful preparations are required. Because the mushrooms are of sacred properties, the participants of the ceremony must be "cleansed"; in this way, before participating, the patient and the therapist observe "una dieta" sexual abstinence of four days; in the same way, the patient must come with an empty stomach. *La velada* the ceremony is

always held at night, usually, each *chjota chjine* or shaman conducts the ceremony on certain days of the week those that are more powerful for them, and most favorable to achieving success. The *chjota chjine* usually work out of their homes where they have special place where the ritual is realized. The patient may be accompanied by family and friends. The traditional elements to perform the ceremony, in addition the mushrooms, are: copal, holy water, tobacco as *piciete*, beeswax candles and an egg. The ceremony begins in front of the altar where the sacred images that the therapist venerates are located, and songs and payers are performed: the Virgin of Guadalupe, San José, San Pedro and San Pablo, María Magdalena. I have been told that some *chjota chjine* include Virgen del Carmen, San Ramón, and San Donato. While the ritual practitioner prays, a candle is lit to cleanse the patient, s/he sits on the floor or *petate*; while copal is passed over the patient's head and body and then over the *ndi xijto* mushrooms, subsequently over the mushrooms which are also moistened with holy water. The most frequently used mushrooms consumed by the Mazatec healers are: *derrumbe, San Isidro and pajarito*. The doses depend on the type of mushroom; traditionally they are always consumed in pairs representing the concept of duality, male-female and can be seen historically represented in the Badiano codex. If *derrumbe* are consumed, three or four pairs are taken; however, if *pajarito* or *San Isidro are taken*, five or six pairs is the custom. One patient told me it took her four to five hours to feel the mushrooms, but usually after an hour the healer can begin to see what they (the mushrooms) want to reveal about the cause of the ailment in the patient. Most veladas are conducted in the dark. Margarita, a healer in Huautla said: "I pray and pray, afterwards I begin singing so that the patient remains happy and on the right path, because we are going to see the truth about the illness; as the mushrooms begin to "speak", we begin to see what it is going wrong, I continue to pray and pray until the

mushrooms effect (strength) diminishes. I will again light more copal so that the smoke purifies us and accompanies the mushrooms. I will often hold the head of the patient and tell him/her to follow my guidance, until the strength of the mushrooms end and our heart is left happy."

Once the therapist has discovered the origin of the condition, the healing treatment begins, a cleansing with an egg and a candle, while praying and appealing to all the saints to make the illness disappear. The same plea is directed to the *Chikones* in the mountains, especially el Cerro de la Adoración. At the end of the ritual, she prepares a tobacco amulet that she gives the patient to carry in his pocket for protection.

During the four days following the healing ceremony, the patient must try to stay home, but is s/he needs to leave, s/he is advised to do so only accompanied by someone in the family.

Healing Practices

As we have seen, traditional medicine in Mesoamerica today is a system of ideas, concepts, with symbolic representations using a theoretical basis for the interpretation of illness and disease and then applying a set of practical therapeutic applications to heal. It should always be noted that the Western medical model (or hegemonic medical model) imposes an ideological and judgmental weight on traditional models, which in practice is resolved by the transformation and/or appropriation of traditional medicine, which increasingly is made up of conflicting and complementary divisions. Conditions such as *susto, levantada de alma, mal aire, empacho*, or *brujería* witchcraft, among many others, and are often considered folk beliefs or superstitions by Western medicine; instead, are often diagnosed and construed to be dehydration, stress, malnutrition, or psychological issues. These illnesses, as described in traditional medicine, are common in the Sierra Mazateca, and are not treated by institutional doctors, since they are not scientifically proven and therefore are only recognized by the local community, thus being treated by practitioners of traditional medicine that continue to live in the villages where their services and knowledge are needed to treat these problems.

Traditional medicine is essentially a system of ideas, concepts, symbolic representations, and theoretical and practical knowledge by which there is a way to interpret the illness, the misfortune or the death and where the worldview is the set of ideas that guide and determine the therapeutic practice. Shamanism is a practice in a specific social context that is transformed, renewed and above all applies its knowledge in social practice, with healing therapy being its principle objective.

As we have seen, there are many shared cultural characteristics in

Mesoamerica. There are many similarities in cosmology, for example, the notion that a person is endowed with animistic entities that have the characteristic as being immaterial, with the ability to separate from the human body voluntarily or involuntarily, temporarily or permanently. On the basis of this shared conception, there is the view that health is determined by the psychic, physical, emotional, and spiritual balance, and that any disturbance in any of these aspects will lead to a disease. For the Mazatecs and Nahuas, as for many other Mesoamerican cultures, the causes and the explanation of illness begins when an imbalance or a lack of harmony between the individual and his environment occurs. Therefore, there must be a reconciliation or resolution between man/woman and the cosmos in order to regain his/her health.

The shaman is thus the most effective in "psycho-spiritual" healing in attempting to reestablish balance; he/she knows the secret energies of nature, especially those of the plant kingdom, and encourages them to initiate the healing process. To achieve this, he/she must first find the origins of the illness and whether it is caused by a state of misalignment that can be the result of imbalances triggered by: an intrusion of a malignant spirit; breaking a religious or social rule, sorcery, or the loss of a spirit or animal protector.

In traditional Mazatec medicine there are different specialists that treat ailments using different techniques, patients go to each of them depending on the condition they have. The specialists offer different types of attention, the most distinguished being the shaman or *chjota chjinee* in the Mazateca region, who is concerned with sufferings of the spirit.



48

There are also specialists like don Lucio in Puebla, who call themselves *hueseros*, who treat fractures, dislocations or sprains that people suffer. They are specialists in treating broken bones and utilize plants and strong massage as means of alleviating pain, then placing the limb or body in a splint.

There are midwives, like doña Micaela in Puebla, they are most important because they help with menstrual or other women's health issues, especially for those who are going to give birth and do not want to avail themselves, do not trust or cannot afford allopathic medical care. They will often treat using a temezcal, a traditional spiritual steam house using herbs and invocations.

The *chupadores* are practitioners specialized in sucking out the ailment depending on what part of the body it is located. What they extract from the body is usually saliva with blood, they can also extract objects: stones, small bones of animals, insects etc. These objects that are sucked out, are considered as being symbolic of the

ailment or the problem, and should not be taken as a medical sleight-of-hand. Many are cured in this way.

A *pulsador* is a specialist whose sense of touch is very sensitive and can feel the flow of blood that runs in the patient's veins at the joints. The sanguineous rhythm data is obtained and is interpreted to give a diagnosis, because the *pulsador* has a sensitivity that allows him to recognize a problem in the person not limited to taking blood pressure.

A *chjota chjinee* has the ability to understand and to manipulate spirits for healing through trance, whereas a *tje'e* can do the same but with the purpose of harming. They are both *sabios* (wise ones). The sorcerer does not cease to be wise, wise in doing good or wise in doing evil. He/she may be an evil wise one, but it does not stop him/her from being wise. However, it should be emphasized that not all shamans have the same goals, that is, not all shamans heal, or seek the common good or to maintain order. Their practices are constantly tested by the townspeople who are their patients, and there is no national norm that would apply to all shamans, that generally seeks the health and equilibrium of the community.

Eliade mentions:

> It is here that we see all the advantage of employing the term shaman in its strict and proper sense. For, if we take the trouble to differentiate the shaman from other magicians and medicine men of primitive societies, the identification of shamanic complexes in one or another region immediately acquires definite significance. Magic and magicians are to be found more or less all over the world, whereas shamanism exhibits a particular magical specialty, … mastery over fire, magical flight and so on. By virtue of this fact though the shaman is, among other things, a magician, not every magician can properly be termed a shaman. The same distinction must be applied in regard to shamanic healing; every medicine man is a healer, but the shaman employs a method that is his and his alone. As for the shamanic techniques of ecstasy, they do not exhaust all the varieties of ecstatic experience documented in the history of religions and religious etymology. Hence any ecstatic cannot be considered a shaman; the shaman specializes in a trance during which his/her soul is believed to leave his body and ascend to the sky or descend to the underworld. (Eliade, 1972)

When I first went to Huautla, it was very difficult for me to determine whether those who claimed to be shamans were in fact not charlatans. This was to a large extent due to the many years of mushroom tourism there, whereby anyone from the community can claim to be a shaman with the objective being financial gain rather than healing. Of course, I also met people, whom I believe to be true shamans, but who wear two hats, who serve their community in one way but also cater to the tourist population in another. Those who enjoy recognition, even outside of their community, are usually older healers who are dedicated to healing, earning greater confidence. The social responsibility of each shaman depends on their ability to project this confidence. The *chjota chjinee* acquires a prestige inside and outside his/her community for achievements in dealing with supernatural powers and especially for the established relationship with spirits.

Altered States of Consciousness:

In general, some shamans can enter a trance without the consumption of any plant nor with the guidance of any of the various psychotropic plants that grow in La Cañada (the mountainous region of the Mazatec people). But the contrary is usually true, most shamans that I met use sacred plants *plantas sagradas* to enter into an amplified state of consciousness and thus come into contact with the helping spirits that will give them the necessary information on how and when to carry out the healing. She or he can also be a sorcerer, since to relieve any evil, one must know it in depth, in any case he/she can be a "healing sorcerer", but this is a sensitive issue because people are not always willing to talk about evil, since there is the belief that talking about it, invokes it. Thus, a shamanic practice is not solely made up of performing therapeutic rituals and techniques, but it can go into the other realm, the other world.

Years later, Munn (1976: 124-125) explained that the simple consumption of mushrooms does not characterize the Mazatec shaman; rather, it is their ability to heal through them that defines their social role. The Mazatec healers are shamans in the full sense of the word and are charged with the power to unite what is separated: s/he is able to cure the divided personality by freeing vital energies, to reveal the ecstatic life of the integrated ego; and through a sudden synthesis of intuition, of the scattered clues, manages to find the solution to problems.

The spirits of the sacred plants are considered to be teachers as well because they contain and share knowledge, for they are highly respected in the region but even while obtaining knowledge from plant beings, the shaman, in his life experience, has a developed intuition and sensitivity. (Incháustegui Díaz, 1994; Ripinsky-Naxon, 1993)

Becoming/training to become a shaman or chjota chjinee

One can become a shaman (*tepajtiani - nahuatl*), (*chjota chjine - mazateco*) in a number of ways. Like any vocation there is an initiation process, in this case it is one of recognizing the capacity to enter alternate realities enabling its practitioners to access information that is not ordinarily attainable by members of their immediate social group.

A shaman is initiated in many different ways depending on the situation. In any case, most initiations, intentional or unintentional, involve sacrifice, pain or suffering. Inti told me once, that many shamans learn their gift through dreams or visions, appearances of teachers or other-than-human helpers. He went on to say, that many are also born with a *don* or a gift, covered with a white film-like envelope at birth, *el velo blanco* o *nace de vientre*. They are apparently born with the natural ability to enter an ecstatic state and discover disease and initiate healing. Others learn from a family member who has the skill or capacity and the desire to pass on the skill/vocation with the initiate observing. Others experience a serious illness or are struck by lightning provoking a *muerte chiquita*, short period of death, while observing another dimension.

Then there is the shaman that develops within nature and lives in nature and comes into contact with spirits in an innate way, to learn the language of the land, of wind, water and fire, and can give an interpretation and to reach a healing through all those who seek a healing and to make a vehicle of healing between the divine and the earthly.

Many shamans believe that they have attained their powers and knowledge through the consumption of entheogens. It should be noted that this training occurs in the context of a strict ritual and is an essential preparation. Being trained in this way

does not imply that he/she will always rely on entheogen consumption for healing sessions. ''Shamanism is an ecstatic healing tradition which at its core is concerned with the techniques for inducing, maintaining, and interpreting the experience of enhanced visual mental imagery'' (Noll et al., 1985 p. 445). Similarly, Peters writes that ''The shaman is a visualizer . . .'' and that, ''In shamanism, the key to the transpersonal is through visualization'' (Peters, 1989 p. 130-129)

To heal others, one must be able to visualize and to remember. A practitioner knows deeply the process of an illness, because he /she is has experienced it and has healed him/her/self, therefore through this visualization they are most likely able to heal the ailment of others. The shaman is not just a recovered sick woman or man, he/she is above all, a sick woman or man who has managed to recover by curing themselves. Many times, when the vocation of the shaman or the *chjota chjine* is manifested through a illnesses and disease, the initiation of the candidate is equivalent to a healing. It should be clear, that the shaman does not only treat diseases from which s/he has recovered but can use the techniques for healing that she/he has learned. (Eliade, 1974)

Dreams and entheogens

Dreams play an important role in Mazatec shamanic healing practices. Many practitioners and patients with whom I spoke put importance in dreams not so much as a continuation or reflection on social life but also as a way to better diagnose and seek a healing. Usually, a family interprets the dream experience from the context, codes, myths of their culture.

In a social context, the Mazatec analyze their dreams, and modify their actions or that of others within the context of the dream learning. Moreover, there are specific dreams where there is communication between the dreamer and the dreamed in that dream world, that is, individuals who meet each other in dreams without knowing each other in waking life, come to interact through dreaming, and from this experiential perspective, dreams are taken as a space for the continuation of activities and social relations.

The anthropologist Jackson S. Lincoln (1935), in his book *The Dream in Primitive Cultures*, wrote a broad review of dreaming in various cultures, arguing that dreams in which the dreamer receives a direct message from God, or from a deity, are so imbedded with cultural belief that they are not open to personal interpretation. He called these "cultural pattern dreams," and described them as being so stereotyped in form that they did not allow for the expression of any personal meaning that could be interpreted or analyzed. (Kracke, 1987; Lincoln, 1935)

The importance of culture and its effect on dreaming is clear, but this would go against Freud's *The Interpretation of Dreams* (Freud, 1932) and his belief that unconscious meaning comes through every image no matter how stereotyped it may be, while personal meaning continues to be expressed. The significance of a dream depends

on what dreaming means for the dreamer within his or her culture, and on the types of interpretations that a culture supports for the dreams but can also have a personal or individual interpretation. In Mazatec culture and epistemology, dreams are culturally imbued with significance from their myths and shamanic beliefs, and are considered to be an important form of communication.

Dreaming is a powerful means of perception that gives the curandero, shaman as well as the ordinary person the ability to foretell future events, to recognize the presence of evil spirits or energies, and to communicate with healing spirits and other-than-human-helpers. In addition, ordinary people can foresee future events through their dreams; if properly interpreted, shamans can also intervene in their dreams, to bring about events or to diagnose and cure an illness. For some people, dreaming entails a kind of identification with shamanic power. It is crucial in understanding the meaning of their dreams and to take into account their belief in the power of dreams to have shamanic effect in the waking world, for good or ill.

Thus, one of the most important functions of the shaman is rooted and based on the interpretation of dreams, that his/her practice reveals the unquestionable influence of the form and spirit of indigenous medicine. In this context, wakefulness and sleep form a continuity, they occur in the same natural plane to the Mazatec people that I have spoken with. Perceptions obtained during sleep provide data as real and valuable as that collected in wakefulness; both perceptions are reached at during different states of being, but both are true. The perceptions achieved by the dream add to the objective experience of the waking world, invisible and intangible it can only be achieved through the mystical experience of dreaming and they are sometimes intertwined.

Lucia, an extremely gentle, blind shaman that I met in 2018 in Huautla who

was known for her ability to use her perception in dreams for curing. She is the wife of don Leonardo Martinez (previously mentioned). Doña Lucia was a warm, and perceptive woman who loved to tell of her experiences as well as myths that intertwined with her dreams. She had her own "mesa" in a dark basement room beneath her home in San Andrés. One afternoon, when several research colleagues went for a healing session, she told us the following dream, recorded in my field notes:

> It was dark, maybe it was sunset and I was walking along a lonely narrow path. Walking between narrow stone walls, they were about four meters high, some of the pieces in the wall were falling out. Then I came to an opening in the wall and I saw many men and *burros* working around some huge trees stumps with trees lying on the ground. I noticed some of the trees were blocking my path. I climbed over them but as I walked, the road became muddy and then muddier. I was alone and I became frightened. But I knew I had to get back I just had to keep walking even though my feet were wet and cold.

For the Mazatec there is also a distinct relationship between the time of night in which a dream manifests itself and how important or divinatory the dream is. The closer one gets to sunrise, the more real the dream is. What you dream at four or five in the morning, she told me, is most likely to occur in the near future.

Conclusion

Concluding Remarks

In the course of this research we've come to see many forms of healing that do not follow a Western or allopathic logic and linear progression. Whether bone setters, herbalists, midwives, temazcal leaders, shamans, or of the many manifestations of healers in the two areas that I studied, I find not only different approaches but effective means for healing that match cultural expectations and definitions for the identification of illness, disease and subsequently that initiate healing.

From some of the cases reported in this research we have seen how curanderos and shamans associate with certain entities or power spirits, through sleep and dreams and thus receive the insight, which is to recognize and interact with non-human entities in order to treat their peers. I have described how these healers request and expect help from companion animals and spirit entities that transmit specific qualities to each subject and that in the spiritual realm, they lead a parallel existence that affects the health and fortune of humans. This is effective if the *tonales* are captured in a constant dynamic of spiritual hunting in which they are usually prey (possessed) to the "flying" spirits or non-human malignant entities. Likewise, the stories about this vulnerability show once again the connections between humans, spirit energies and animals where a transformation between species provide for consumption and the sacrifice of the former by the latter. In view of the many stories, the search and synergetic efforts to recapture the *tonal* becomes a major effort of the shamans and healers in the communities in Oaxaca and Puebla.

What is most impressive is the survival today of these healing approaches and methods. Despite the brutal repressive genocidal tactics imposed by the Spanish and other European and North American conquerors, the resilience and tenacity of the

indigenous community, nourished by their cultural roots, ancient wisdom and experience, has commanded survival into this century. And the people in the communities that I studied continue to seek healers trained and knowledgeable in the "old ways." However, as mentioned earlier, there are very few young people learning the healing traditions, which is the subject of considerable concern. Lucio Flores questions what the future may hold. He has one daughter interested in his knowledge and therapeutic techniques but at times, he says, she is ambivalent and prefers spending time on her cellphone. Don Felix has no family member interested in doing his work, although, several younger members of the community gather mushrooms to sell to tourists.

In this research I found very few shamans or traditional healers who claimed that their knowledge or "don" was obtained by divine selection although, in anthropological literature it is often mentioned. Generally, I discovered that they took this work and responsibility from personal experience, almost always from within the family, often by the imposition of their parents.

In this study, the archetypal method of anthropology, participant observation, was indispensable to me in obtaining information about these healers, in this case, people who, as we see, have been dominated, segregated, manipulated and integrated according to the needs of the dominant groups throughout the history of Mexico, which today is in the hands of a "national culture" (Vasconcelos, 1966) that emerged as dominant at the beginning of the twentieth century.

This method of participant observation allowed me to obtain first-hand data for the description and analysis of the different problems caused by the imposition of a Western lifestyle on indigenous cultures. As a Westerner to the communities that I studied, my position on this influence of the State (whether Spanish conquistadores or

North American doctors) and the changes that were generated in terms of the traditional medical practices, is not neutral. I could see in Huautla and Cuetzalan, which both have a wide range of "traditional medicine", that these communities have been seriously affected by the State imposition of a Western vision in medical matters, and rather than attempting to understand Mazatec or Nahua indigenous medicine it imposes the hegemonic model. In addition, the interaction of traditional and official medicine in Cuetzalan, in and out of the Hospital General, generated a series of contradictions, which are far from being solved.

It will be necessary to continue to explore and demonstrate how traditional medicine continues to evolve and serve the communities, as well as to monitor the impact of official medicine on these communities while being vigilant of all researchers and neo-shamans seeking to consciously or unconsciously turn indigeneity into a constructed paradigm and a commodity.

More exhaustive field work is necessary, focused on recovering the greatest amount of experiences from healers so as to have a more complete view of these practices before they disappear. As many before me have demonstrated, it is not enough to spend a few years gathering and interpreting material, but rather a more revealing and accurate documentation requires a lifetime.



49

Bibliography

1. Abram, D. (1996). The spell of the sensuous : Perception and language in a more-than-human world. New York: Pantheon Books.

2. Abram, D. (1996). The spell of the sensuous : Perception and language in a more-than-human world. New York: Pantheon Books.

3. Acevedo-Rodrigo, A. (2010). The Sun God and the Savior: The Christianization of the Nahua and Totonac in the Sierra Norte de Puebla, Mexico. The Americas, 66(3), 395-396.

4. Aguirre Beltrán, G. (1963). Medicina y magia; el proceso de aculturación de la estructura colonial.

5. Aguirre Beltrán, G. (1987). Medicina tradicional y atención primaria : ensayos en homenaje a Gonzalo Aguirre Beltrán (1a ed.). México, D.F.: Centro de Investigaciones y Estudios Superiores en Antropología Social.

6. Aguirre Beltrán, G. (1989). La población negra de México : estudio etnohistórico (3. ed.). Jalapa, Mexico
Mexico City
Jalapa
México, D.F.: Universidad Veracruzana ;
Instituto Nacional Indigenista ;
Gobierno del Estado de Verzcruz ;

Fondo de Cultura Económica.

7. Aguirre, J. C., & Jaramillo, L. G. (2015). El papel de la descripción en la investigación cualitativa. Cinta de moebio(53), 175-189.

8. Ak'abal, H., & Animalero, E. (1996). Tradiciones de chamanismo en la Mazateca Baja. Alteridades, 6(12), 49-59.

9. Almendro, M. (2000). The healing power of shamanism in transpersonal psychology. International Journal of Transpersonal Studies, 19(1), 9.

10. Anzures y Bolaños, M. d. C. (1983). La medicina tradicional en México. Proceso hist6rico, sincretismo y conflictos. Mexico City: Universidad Nacional Aut6noma de Mexico.

11. Aramoni Burguete, M. E. (1990). Talokan tata, talokan nana: nuestras raíces: hierofanías y testimonios de un mundo indígena.

12. Arce, J. M. R., & Balma, C. M. Q. (2012). Las plantas y los hongos alucinógenos: reflexiones preliminares sobre su rol en la evolución humana. Reflexiones, 91(2), 2.

13. Arguedas, J. M. (1983). Relatos completos. Madrid; Buenos Aires: Alianza ; Editorial Losada.

14. Arguedas, J. M., & Arguedas, S. A. d. (1985). Indios, mestizos y señores. Lima, Per˙: Editorial Horizonte.

15. Arguedas, J. M., & Izquierdo Ríos, F. (1970). Mitos, leyendas y cuentos peruanos. Lima: Casa de la cultura.

16. Arguedas, J. M., Uzquiza Gonzalez, J. I., & Universidad de, E. (2011). Manuscrito de Huarochiri : Libro sagrado de los Andes Peruanos : version biling¸e quechua-castellano. Madrid: Biblioteca Nueva : Universidad de Extremadura.

17. Aron, E. N. (2015). A Table for Four: My Dinner with CG Jung, Martin Buber, and Maharishi Mahesh Yogi. Psychological Perspectives, 58(1), 44-71.

18. Atkinson, J. M. (1992). Shamanisms today. Annual Review of Anthropology, 21(1), 307-330.

19. Austin, A. L. (1967). Términos del nahuallatolli. Historia mexicana, 17(1), 1-36.

20. Austin, A. L. (1971). De las plantas medicinales y de otras cosas medicinales. Estudios de cultura Náhuatl(9), 121.

21. Bachelard, G. (1968). La poétique de la rêverie (4e édition. ed.). Paris,: Presses universitaires de France.

22. Bachelard, G. (1969). The poetics of reverie. New York,: Orion Press.

23. Bachelard, G. (1983). Water and dreams: An essay on the imagination of matter. Dallas: Pegasus Foundation.

24. Bachelard, G. (1988). Air and dreams: An essay on the imagination of movement. Dallas: Dallas Institute Publications, Dallas Institute of Humanities and Culture.

25. Baer, R. D., Weller, S. C., de Alba Garcia, J. G., Glazer, M., Trotter, R., Pachter, L., & Klein, R. E. (2003). A cross-cultural approach to the study of the folk illness nervios. Culture, Medicine and Psychiatry, 27(3), 315-337.

26. Bahr, D. (1994). Native American dream songs, Myth, memory, and improvisation. Journal de la Société des Americanistes, 73-93.

27. Bahr, D. M., Gregorio, J., Lopez, D. I., & Alvarez, A. (1974). Piman shamanism and staying sickness (ká: cim Múmkidag): Univ of Arizona Pr.

28. Bahr, D. M., & Haefer, J. R. (1978). Song in Piman curing. Ethnomusicology, 22(1), 89-122.

29. Balma, C. M. Q., BADILLA, B., & BADILLA, S. The Hallucinogens: Their History, Anthropology, Chemistry, and Pharmacology.

30. Barabas, A. (2003). La ética del don en Oaxaca: los sistemas indígenas de reciprocidad. La comunidad sin límites. Estructura social y organización comunitaria en las regiones indígenas de México, 1.

31. Barabas, A. (2006). Dones, duenos y santos/Offerings, Owners and Saints: Ensayo Sobre Religiones En Oaxaca/Essay on Religions in Oaxaca: Miguel Ángel Porrúa.

32. Barabas, A. M. (2002). Etnoterritorios y rituales terapéuticos en Oaxaca. Scripta Ethnologica(24).

33. Barabas, A. M. (2008). Cosmovisiones y etnoterritorialidad en las culturas indígenas de Oaxaca. Antipoda. Revista de antropología y arqueología(7), 119-139.

34. Barabas, A. M. (2015). Impactos de la Práctica de la Teología India entre los Mazatecos de Oaxaca. Ilha Revista de Antropologia, 17(1), 5-31.

35. Barre, W. L. (1970). The Ghost Dance. In: Doubleday and Co., New York.

36. Barrera Caraza, E. B. (1994). Síntesis sobre modelos médicos, curanderos y terapeutas enteogénicos. Synthesis about medical models, medicine-men and entheogenic therapeutists., 54(3), 231-259. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=156729&site=ehost-live

37. Barrios Esp, M. (1952). Bruja curandera de Tzinacatepec. Tlatoani, 1(2), 7-8. Retrieved from:

http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=490789&site=ehost-live

38. Bartolomé, M. A., & Barabas, A. (2013). Los sueños y los días: chamanismo y nahualismo en el México actual (Vol. 5): Instituto Nacional de Antropología e Historia.

39. Bartolomé, M. A., & Barabas, A. M. (2013). Introducción. Los sueños y los días. Chamanismo y nahualismo en el México actual. Los sueños y los días. Chamanismo y nahualismo en el México actual, 4, 15-48.

40. Baud, M. (1997). Imagining the Other: Michael Taussig on mimesis, colonialism and identity. Critique of Anthropology, 17(1), 103-112.

41. Beattie, A. (2008). La personificación del espíritu en el ritual chamánico: un enfoque multidisciplinario. Boletín Antropológico, 26(74).

42. Beaucage, P. (1994). Los estudios sobre los movimientos sociales en la Sierra Norte de Puebla (1969-1989). Revista Mexicana de Sociologia, 33-55.

43. Beaucage, P., & Cusminsky, R. (1988). La condición indígena en México. Revista Mexicana de Sociología, 191-211.

44. Benedict, R. F. (1922). The Vision in Plains Culture. American Anthropologist, 24(1), 1-23. doi:DOI 10.1525/aa.1922.24.1.02a00020

45. Benedict, R. F. (1924). A Brief Sketch of Serrano Culture. American Anthropologist, 26(3), 366-392. doi:DOI 10.1525/aa.1924.26.3.02a00080

46. Berenzon Gorn, S., Alanís Navarro, S., & Saavedra Solano, N. (2009). El uso de las terapias alternativas y complementarias en población mexicana con trastornos depresivos y de ansiedad: resultados de una encuesta en la Ciudad de México. Salud mental, 32(2), 107-115.

47. Bernardino, d. S. (1969). Historia general de las cosas de Nueva España: Porrúa.

48. Bernardino, d. S. (1969). Historia general de las cosas de Nueva España: Porrúa.

49. Bilhaut, A. G. (2003). … Soñar, recordar y vivir con eso. Estudios atacameños(26), 61-70.

50. Blau, H. (1963). Dream Guessing: A Comparative Analysis. Ethnohistory, 10(3), 233-249. doi:10.2307/480694

51. Boas, F. (1930). The religion of the Kwakiutl Indians. New York: Columbia University Press.

52. Boas, F. (1969). Contributions to the ethnology of the Kwakiutl. New York: AMS Press.

53. Boas, F. (1969). Kwakiutl culture as reflected in mythology. New York New York,: The American folk-lore society, G. E. Stechert and co. Kraus Reprint Co.

54. Boas, F. (1969). Contributions to the ethnology of the Kwakiutl. New York: AMS Press.

55. Boege, E. (1988). Los mazatecos ante la nación : contradicciones de la identidad étnica en el México actual. México: Siglo Veintiuno Editores.

56. Boege, E. (2008). El patrimonio biocultural de los pueblos indígenas de México: hacia la conservación in situ de la biodiversidad y agrodiversidad en los territorios indígenas. Retrieved from

57. Bolton, R. (1981). Susto, hostility, and hypoglycemia. Ethnology, 20(4), 261-276.

58. Bonfil Batalla, G. (2005). México profunda civilización negada (9685957339). Retrieved from

59. Booi, B. N., & Edwards, D. J. (2014). Becoming a Xhosa healer: Nomzi's story. Indo-Pacific Journal of Phenomenology, 14(2), 1-12.

60. Borbély, A. (1993). El secreto del sueño: nuevos caminos y conocimientos: Siglo XXI.

61. Bosnak, R. (2003). Embodied imagination. Contemporary Psychoanalysis, 39(4), 683-695.

62. Bottomore, T., Harris, L., Kiernan, V., & Miliband, R. The marxist thought.

63. Bourguignon, E. (1973). Religion, altered states of consciousness, and social change: The Ohio State University Press.

64. Bourguignon, E. (1979). Psychological anthropology: an introduction to human nature and cultural differences. New York: Holt, Rinehart and Winston.

65. Briones, J. d. J. M. (1964). Atla: etnografía de un pueblo náhuatl (Vol. 14): Instituto Nacional de Antropología e Historia.

66. Broda, J., Báez-Jorge, F., & Consejo Nacional para la Cultura y las, A. (2001). Cosmovisión, ritual e identidad de los pueblos indígenas de México. México: Consejo Nacional para la Cultura y las Artes: Fondo de Cultura Económica.

67. Cabanilla, E. (2015). Impactos culturales del turismo comunitario en ecuador sobre el rol del chamán y los ritos mágico-religiosos. Estudios y perspectivas en turismo, 24(2), 356-373.

68. Caicedo, A. (2007). Neochamanismos y modernidad. Nómadas (Col)(26), 114-127.

69. Calavia Sáez, O. (2013). A ética da pesquisa na era da autoria Direito intelectual

indígena, socialidade e invenção antropológica. Revista Brasileira de Ciências Sociais, 28(83).

70. Campos, M. (1994). La medicina tradicional de los pueblos indígenas de México.

71. Campos Navarro, R. (1992). La antropología médica en México (9686382615). Retrieved from

72. Campos-Navarro, R. (1997). Curanderismo, medicina indígena y proceso de legalización. Nueva Antropología, 16(53), 67-87.

73. Campos-Navarro, R. (2010). La enseñanza de la antropología médica y la salud intercultural en México: del indigenismo culturalista del siglo XX a la interculturalidad en salud del siglo XXI. Revista Peruana de Medicina Experimental y Salud Pública, 27(1), 114-122.

74. Campos-Navarro, R., & Ruiz-Llanos, A. (2001). Adecuaciones interculturales en los hospitales para indios en la Nueva España. Gac Med Mex, 137(6), 603.

75. Carrera González, F., & Van Doesburg, G. B. (1996). Contribución sobre el calendario agrícola mazateco. Anders Ferdinand, Luis Reyes García y Maarten Jansen, Códice Ixtlilxochitl: apuntaciones y pinturas de un historiador, Akademische Druck und Verlagsanstalt y FCE, México.

76. Castaneda, C. The art of dreaming.

77. Chidester, D. (2008). Zulu dreamscapes: Senses, media, and authentication in contemporary neo-shamanism. Material Religion, 4(2), 136-158.

78. Clifford, J. (1988). The predicament of culture : twentieth-century ethnography, literature, and art. Cambridge, Mass.: Harvard University Press.

79. Clifford, J. (2013). Returns : becoming indigenous in the twenty-first century.

80. Clifford, J., Marcus, G. E., & School of American, R. (1986). Writing culture : the poetics and politics of ethnography : a School of American Research advanced seminar.

81. Comaroff, J. (1978). Medicine and culture some anthropological perspectives. Social Science & Medicine. Part B: Medical Anthropology, 12, 247-254.

82. Congreso Internacional de, A. (2010). Memorias del 53o. ICA 53o. Congreso Internacional de Americanistas : los pueblos americanos, cambios y continuidades, la construcción de lo propio en un mundo globalizado = 53o. International Congress of Americanists : the peoples of the Americas, changes and continuities, the construction of one's own in a globalized world = Congresso Internacional de Americanistas : os povos americanos, mudanÁas e continuidades, a construÁ„o do proprio em um mundo globalizado, México.

83. Contreras, A. T. R. (2001). Visiones sobre el temazcal mesoamericano: un elemento

cultural polifacético. CIENCIA ergo-sum, 8(2), 133-144.

84. Coronado, G. (2005). Competing health models in Mexico: an ideological dialogue between Indian and hegemonic views. Anthropology & medicine, 12(2), 165-177.

85. Cunha, M. C. d. (1998). Pontos de vista sobre a floresta amazônica: xamanismo e tradução. Mana, 4(1), 7-22.

86. Cuthbertson, G. (1987). The English-speaking churches and colonialism. Theology and Violence: The South African Debate. Johannesburg: Skotaville, 15-30.

87. de Alarcón Hernando, R. (1987). Tratado de las supersticiones y costumbres gentilicas que hoy viven entre los indios naturales desta Nueva Espana. El alma encantada. Mexico. INI-Fondo de Cultura Econômica, 125-226.

88. de Alarcón Hernando, R., Richard, A. J., & Ross, H. (1984). Treatise on the Heathen Superstitions That Today Live among the Indians Native to This New Spain, 1629. Trans, and ed. J. Richard Andrews and Ross Hassig. Norman: U of Oklahoma P.

89. de Alarcón, H. R. (2014). Tratado de las supersticiones y costumbres gentílicas que hoy viven entre los indios naturales de esta Nueva España: Linkgua digital.

90. De Castro, E. V. (1998). Cosmological deixis and Amerindian perspectivism. Journal of the Royal Anthropological Institute, 469-488.

91. De la Garza, M. (1990). Sueño y alucinación en el mundo náhuatl y maya: Unam.

92. de León, A. G. (1969). El universo de lo sobrenatural entre los nahuas de Pajapan, Veracruz. Estudios de cultura náhuatl(8), 111.

93. de Mori, B. B. (2012). About magical singing, sonic perspectives, ambient multinatures, and the conscious experience. Indiana, 29, 73-101.

94. de Rios, M. D., & Winkelman, M. (1989). Shamanism and altered states of consciousness: An introduction. Journal of Psychoactive Drugs, 21(1), 1-7.

95. Dehouve, D. Nuevas perspectivas sobre un modo de expresar los conceptos en náhuatl: la metáfora corporal.

96. dell'Aquila, V., Dalmasso, D., Gaillard-Corvaglia, A., & Duchamp, A. G. H. Emergence forte versus émergence faible en écologie linguistique: le cas du mazatec.

97. Demanget, M. (2003). Maria Sabina, femme de savoir Mazatèque ou chamane des étrangers? Le coulisses de l'ethnicité: au delà d'un embleme culturel (Indiens, Mazateques de Huautla de Jiménez, Oaxaca, Mexique). Cahiers des Amériques latines (Nouvelle Série), 44(3), 41-60. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=XRAI2000s-38204&site=ehost-live

98. Dentan, R. K. (2017). Ethnographic Considerations of the Cross Cultural Study of Dreaming. In Sleep and dreams (pp. 318-358): Routledge.

99. Derrida, J., & Anidjar, G. (2002). Acts of religion. New York: Routledge.

100. Descola, P. (2006). Beyond nature and culture. Paper presented at the Proceedings-British Academy.

101. Devereaux, G. (1961). Two Types of Modal Personality Theory. Studying Personality Cross-Culturally. Bert Kaplan, ed. Evanston: Row, Peterson.

102. Devereux, G. (1957). Dream learning and individual ritual differences in Mohave shamanism. American Anthropologist, 59(6), 1036-1045.

103. Díaz, J. L. (1979). Ethnopharmacology and taxonomy of Mexican psychodysleptic plants. Journal of Psychedelic Drugs, 11(1-2), 71-101.

104. Díaz, J. L. (2003). Las plantas mágicas y la conciencia visionaria. Arqueología Mexicana, 10(59), 18-25.

105. Díaz, J. L. (2014). Salvia divinorum: psychopharmacological enigma and the mind-body interstice. Salud Mental, 37(3), 183-193.

106. DOMBECK, M. T. B. (1994). The Telling and Interpretation of Psychic Dreams: The Interpreted/Interrupting Self. Ethos, 22(4), 439-459.

107. Doore, G. (1988). Shaman's Path: Healing, Personal Growth & Empowerment: Random House Incorporated.

108. Duarte-Gómez, M. B., Brachet-Márquez, V., Campos-Navarro, R., & Nigenda, G. (2004). Políticas nacionales de salud y decisiones locales en México: el caso del Hospital Mixto de Cuetzalan, Puebla. salud pública de méxico, 46(5), 388-398.

109. DuBois, T. A. (2009). An introduction to shamanism: Cambridge University Press Cambridge.

110. DuBois, T. A. (2011). Trends in contemporary research on shamanism. Numen, 58(1), 100-128.

111. Edgar, I. R. (2002). Invisible elites? Authority and the dream. Dreaming, 12(2), 79-92.

112. Eggan, D. (1949). The significance of dreams for anthropological research. American Anthropologist, 51(2), 177-198.

113. Eggan, D. (1952). The manifest content of dreams: a challenge to social science. American Anthropologist, 54(4), 469-485.

114. Eisenberg, L. (1977). Disease and illness distinctions between professional and

popular ideas of sickness. Culture, medicine and psychiatry, 1(1), 9-23.

115. Eisner, B. (1995). Huautla: place where eagles are born. Jahrbuch für Ethnomedizin und Bewusstseinsforschung/Yearbook for Ethnomedicine and the Study of Consciousness, 4, 13-33. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=517517&site=ehost-live

116. Eliade, M. (1964). Shamanism: archaic techniques of ecstacy (Rev. and enl. ed.). London: Routledge & K. Pauk.

117. Eliade, M. (1972). Shamanism: archaic techniques of ecstasy. Princeton, N.J.: Princeton University Press.

118. Eliade, M. (1974). Shamanism: archaic techniques of ecstacy (Rev. and enl. ed.). Princeton, N. J.: Princeton University Press.

119. Eliade, M. (1976). El chamanismo y las tecnicas arcaicas del extasis (2a ed.). Mexico: Fondo de Cultura Economica.

120. Estrada, Á. (1989). Vida de María Sabina: la sabia de los hongos: Siglo XXI.

121. Estrada, E. (1992). Jardines botánicos comunitarios. Plantas medicinales. Domesficación de plantas medicinales en, 84.

122. Evans, K. L. (2016). Shamanic vision quest: Native American ritual, depth psychology, and renaissance natural magic. NeuroQuantology, 14(2).

123. Fabrega, H. (1970). Dynamics of medical practice in a folk community. The Milbank Memorial Fund Quarterly, 48(4), 391-412.

124. Fagetti, A. (1998). Tentzonhuehue : el simbolismo del cuerpo y la naturaleza (1. ed.). Puebla, México
México, D.F.: Benemérita Universidad Autónoma de Puebla ;
Plaza y Valdés Editores.

125. Fagetti, A. (2003). Los que saben: testimonios de vida de medicos tradicionales de la region de Tehuacan.

126. Fagetti, A. (2010). Ixtlamatki versus nahualli: Chamanismo, nahualismo y brujería en la Sierra Negra de Puebla. Pueblos y Fronteras digital, 6(10), 1.

127. Fagetti, A. (2010). Iniciaciones, trances y sueños. Investigaciones sobre el chamanismo en México. México: Plaza y Valdés.

128. Fagetti, A. (2010). Iniciaciones, trances, sueños-- : investigaciones sobre el chamanismo en México (1. ed.). Puebla, Mexico
México, D.F.: Benemerita Universidad Autónoma de Puebla
Plaza y Valdés.

129. Fagetti, A. (2012). Cuando" habla" la semilla: adivinación y curación con enteógenos en la Mixteca oaxaqueña. Cuicuilco, 19(53), 229-255.

130. Fagetti, A., Fagetti, A., & Benemérita Universidad Autónoma de Puebla. Instituto de Ciencias Sociales y Humanidades. (2015). Iniciaciones chamánicas : el trance y los sueños en el devenir del chamán (Primera edición. ed.). México, D.F.: Benemérita Universidad Autonóma de Puebla, Instituto de Ciencias Sociales y Humanidades, Alfonso Vélez Pliego.

131. Feinberg, B. (1997). Three Mazatec wise ones and their books. Critique of Anthropology, 17(4), 411-437. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=473947&site=ehost-live

132. Feinberg, B. (2006). "I was there" : competing indigenous imaginaries of the past and the future in Oaxaca's Sierra Mazateca. Journal of Latin American anthropology, 11(1), 109-137. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=587937&site=ehost-live

133. Fellowes, W. H. (2013). The Treatises of Hernando Ruiz de Alarcón. Tlalocan, 7.

134. Fericgla, J. M. (2012). Los chamanismos a revisión: de la vía del éxtasis a internet: Editorial Kairós.

135. Ferreira Junior, W. S., Cruz, M. P., Vieira, F. J., & ALBUQUERQUE, U. P. d. (2010). Are hallucinogenic plants efficacious in curing diseases? Boletín Latinoamericano y del Caribe de Plantas Medicinales y Aromáticas, 9(4).

136. Flores Morales, R. (2003). Chamanismo y curación en la mazateca: Un estudio sobre las articulaciones cuerpo-mente-cultura en los procesos curativos con enteógenos. Shamanism and healing among the Maz-150 Miroslav Horák et al.

137. Florescano, E. (2000). La visión del cosmos de los indígenas actuales. Desacatos(5), 15-29.

138. Foster, G. M. (1943). The geographical, linguistic, and cultural position of the Popoluca of Veracruz. American Anthropologist, 45(4), 531-546.

139. Foster, G. M. (1944). Nagualism in Mexico and Guatemala.

140. Foster, G. M. (1953). Relationships between Spanish and Spanish-American folk medicine. The Journal of American Folklore, 66(261), 201-217.

141. Foster, G. M. (1967). Tzintzuntzan: Mexican Peasants in a Changing. World.

142. Foster, G. M. (1973). Dreams, character, and cognitive orientation in Tzintzuntzan. Ethos, 1(1), 106-121.

143. Foucault, M. La verdad y las formas jurídicas (Vol. 1080).

144. FRANCH, J. A. (1994). Plantas medicinales para el" temazcal" mexicano. Estudios de cultura Náhuatl(24), 2.

145. Freud, S. (1932). The interpretation of dreams (3d, completely rev. ed.). London New York: Allen & Unwin ;
Macmillan.

146. Freud, S. (1952). On dreams. London: Hogarth Press and the Institute of Psycho-analysis.

147. Freud, S., & Strachey, J. (1960). The interpretation of dreams (3d rev. English ed.). New York: Basic Books.

148. Fuentes, C., & Lagarde, P. (2008). Chac Mool: Instituto Nacional de Antropología e Historia.

149. Furst, J. L. M. (1997). The natural history of the soul in ancient Mexico: Yale University Press.

150. Furst, J. L. M. (1998). The nahualli of Christ: The Trinity and the nature of the soul in ancient Mexico. RES: Anthropology and Aesthetics, 33(1), 208-224.

151. Furst, P. T. (1976). Hallucinogens and culture: Chandler & Sharp Pub.

152. Galin, D. (1974). Implications for psychiatry of left and right cerebral specialization. A neurophysiological context for unconscious processes. Arch Gen Psychiatry, 31(4), 572-583. Retrieved from https://www.ncbi.nlm.nih.gov/pubmed/4421063

153. Galinier, J. (1990). La mitad del mundo: cuerpo y cosmos en los rituales otomíes: Centro de estudios mexicanos y centroamericanos.

154. García, M. A., & Spadafora, A. M. (2009). Visitantes oportunos e inoportunos de la noche pilagá. Derivaciones del sueño en la vida diurna. Indiana, 26, 149-167.

155. Gingras, B., Pohler, G., & Fitch, W. T. (2014). Exploring shamanic journeying: Repetitive drumming with shamanic instructions induces specific subjective experiences but no larger cortisol decrease than instrumental meditation music. PloS one, 9(7), e102103.

156. Glazer, M., Baer, R. D., Weller, S. C., De Alba, J. E. G., & Liebowitz, S. W. (2004). Susto and soul loss in Mexicans and Mexican Americans. Cross-Cultural Research, 38(3), 270-288.

157. Glockner, J. (2012). Aquí, allá y en todas partes: trascendencia e inmanencia en el uso de enteógenos. Cuicuilco, 19(53), 283-300.

158. Gobeil, O. (1973). El susto: A descriptive analysis. International Journal of Social Psychiatry, 19(1-2), 38-43.

159. Graham, L. R. (1999). Dreams. Journal of Linguistic Anthropology, 9(1-2), 61-64.

160. Gramsci, A. (2000). The Gramsci reader: selected writings, 1916-1935: NYU press.

161. Greathouse-Amador, L. M. (2005). Tourism and policy in preserving minority languages and culture: The Cuetzalan experience. Review of Policy Research, 22(1), 49-58.

162. Grinberg-Zylberbaum, J. (1989). Los chamanes de México.

163. Grof, S. (1989). El viaje chamánico: observaciones de la terapia holotrópica. Harner. M, y otros (1989). El viaje del chaman. Barcelon: Ed Kairós.

164. Guarnaccia, P. J., DeLaCancela, V., & Carrillo, E. (1989). The multiple meanings of ataques de nervios in the Latino community. Medical Anthropology, 11(1), 47-62.

165. Guzmán, G. (2008). Hallucinogenic mushrooms in Mexico: an overview. Economic botany, 62(3), 404-412. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=XRAI2000s-83036&site=ehost-live

166. Hagood, L. (2006). Awakening to dreams. Journal of Religion and Health, 45(2), 160-170.

167. Halbmayer, E. (2012). Debating animism, perspectivism and the construction of ontologies. Indiana, 29, 9-23.

168. Halifax, J. (1979). Shamanic voices: A survey of visionary narratives (Vol. 525): Plume.

169. Hallowell, A. I. (2002). 1. Ojibwa ontology, behavior, and. Readings in indigenous religions, 22, 17.

170. Halton, E. (1992). The reality of dreaming. Theory, Culture & Society, 9(4), 119-139.

171. Hamayon, R. N. (1998). 'Ecstasy'or the West-dreamt Siberian shaman: na.

172. Hanks, W. F. (1996). Exorcism and the description of participant roles. Natural histories of discourse, 160-200.

173. Harguindeguy, L. C. (2007). Un discurso new age para intelectuales. Mitológicas, 22, 19-32.

174. Harner, M. (2010). A core shamanic theory of dreams. Shamanism, 23, 2-4.

175. Harner, M. J. (1973). Hallucinogens and shamanism. New York: Oxford University Press.

176. Harner, M. J., Mishlove, J., & Bloch, A. (1990). The way of the shaman: HarperSanFrancisco New York.

177. Harvey-Wilson, S. B. (2000). Shamanism and alien abductions: A comparative study.

178. Heiras Rodríguez, C. G. (2017). Una noche de espanto. Los otomíes en la obscuridad. Trace (México, DF)(71), 191-195.

179. Hendrickson, B. (2015). Neo-shamans, curanderismo and scholars: Metaphysical blending in contemporary Mexican American folk healing. Nova Religio: The Journal of Alternative and Emergent Religions, 19(1), 25-44.

180. Hersch, P., & González, L. (2011). Enfermar sin permiso. Un ensayo de epidemiología sociocultural a propósito de seis entidades nosológicas de raigambre nahua en la colindancia de Guerrero, Morelos y Puebla. México: INAH.

181. Hobson, J. A. (2004). Los Sueños Como Delirio: Fondo de Cultura Económica.

182. Holzinger, B. (2009). Lucid dreaming–dreams of clarity. Contemporary Hypnosis, 26(4), 216-224.

183. Hsu, F. L. K. (1972). Psychological anthropology. Cambridge, Mass.: Schenkman Pub. Co.; distributed by General Learning Press [Morristown, N.J.].

184. Huber, B. R. (1990). THE RECRUITMENT OF NAHUA CURERS: ROLE CONFLICT AND GENDER1. Ethnology, 29(2), 159-176.

185. Humberto Ruz, M. (2012). Sueño y éxtasis. Visión chamánica de los nahuas y los mayas. Península, 7(1), 137-144. Retrieved from http://www.scielo.org.mx/scielo.php?script=sci_arttext&pid=S1870-57662012000100008&lang=pt

186. Ichon, A. (1990). La religión de los totonacas de la Sierra Norte de Puebla. México: Instituto Nacional Indigenista y el Consejo Nacional para la Cultura y las Artes.

187. Incháustegui, C. (1977). Relatos del mundo mágico mazateco: Centro Regional Puebla-Tlaxcala, Instituto Nacional de Antropología e Historia.

188. Incháustegui, C. (1983). Figuras en la niebla: Relatos y creencias de los mazatecos (Vol. 10): Premià Editora.

189. Incháustegui Díaz, C. (1994). La mesa de plata. In. México: Instituto Oaxaqueño de las Culturas.

190. Irwin, L. On Lucid Dreaming: Memory, Meaning, and Imagination. Lucid

Dreaming: New Perspectives on Consciousness in Sleep, 103-126.

191. Irwin, L. (1994). The dream seekers : Native American visionary traditions of the Great Plains. Norman: University of Oklahoma Press.

192. Irwin, L. (1996). Visionary worlds : the making and unmaking of reality. Albany: State University of New York Press.

193. Irwin, L. (2000). Native American spirituality : a critical reader. Lincoln: University of Nebraska Press.

194. Irwin, L. (2008). Coming down from above : prophecy, resistance, and renewal in Native American religions. Norman: University of Oklahoma Press.

195. Irwin, L. (2014). Memory, Meaning, and Imagination in Lucid Dreams. Lucid Dreaming: New Perspectives on Consciousness in Sleep [2 volumes]: New Perspectives on Consciousness in Sleep, 103. Retrieved from https://books.google.com/books?hl=es&lr=&id=uRGJBAAAQBAJ&oi=fnd&pg=PA103&dq=Eros,+Angels,+and+the+Colors+of+Nature.+Romanyshyn&ots=P7nTIznp5t&sig=usE7iUko6pUxXOpgR4KyLRMqm0k#v=onepage&q=Eros%2C%20Angels%2C%20and%20the%20Colors%20of%20Nature.%20Romanyshyn&f=false

196. Irwin, L. (2017). Reincarnation in America : an esoteric history. Lanham, Maryland: Lexington Books, an imprint of The Rowman & Littlefield Publishing Group, Inc.

197. Italo, S., & Lupo, A. (1989). Los tres ejes de la vida. Almas, cuerpo, enfermedad entre los nahuas de la Sierra de Puebla, Universidad Veracruzana, Xalapa.

198. Jaenke, K. (2006). Dreaming the ritual onward. ReVision, 29(1), 3-11.

199. Janes, C. R. (1999). The health transition, global modernity and the crisis of traditional medicine: the Tibetan case. Social Science & Medicine, 48(12), 1803-1820.

200. Joralemon, D. (1990). The selling of the shaman and the problem of informant legitimacy. Journal of Anthropological Research, 46(2), 105-118.

201. Jouvet, M. (1992). Sommeil et le Rêve (Le): Odile Jacob.

202. Jung, C. G. (1984). El hombre y sus símbolos/Man and his symbols: Luis de Caralt.

203. Kainthla, R., Kashyap, R., Deopujari, J., Purohit, H., Taori, G., Daginawala, H., . . . Unit, E. G. (2006). Effect of Effect of Hemidesmus indicus Hemidesmus indicus Hemidesmus indicus (Anantmool) extract on IgG (Anantmool) extract on IgG production and adenosine deaminase production and adenosine deaminase activity of human activity of human lymphocytes lymphocytes in vitro. Indian J Pharmacol, 38(3), 190-193.

204. Kakar, S. (1991). Shamans, mystics and doctors: A psychological inquiry into India and its healing traditions: University of Chicago Press.

205. Kaplan, L. N. (1956). Tonal and nagual in coastal Oaxaca, Mexico. The Journal of American Folklore, 69(274), 363-368.

206. Karadimas, D. (2012). Animism and perspectivism: Still anthropomorphism? On the problem of perception in the construction of Amerindian ontologies. Indiana, 29, 25-51.

207. Kay, M., & Yoder, M. (1987). Hot and cold in women's ethnotherapeutics: The American-Mexican west. Social Science & Medicine, 25(4), 347-355.

208. Kehoe, A. B. (2000). Shamans and religion: An anthropological exploration in critical thinking: Waveland PressInc.

209. Kilborne, B. (1981). Pattern, structure, and style in anthropological studies of dreams. Ethos, 9(2), 165-185.

210. King, L. (1999). Learning through the Soul: Concepts Relating to Learning and Knowledge in the Mayan Cultures of Mexico. International Review of Education, 45(3-4), 367-370. Retrieved from https://rd.springer.com/article/10.1023/A%3A1003809725890

211. Klein, J. (1978). Susto: The anthropological study of diseases of adaptation. Social Science & Medicine. Part B: Medical Anthropology, 12, 23-28.

212. Kleinman, A. (1978). Concepts and a model for the comparison of medical systems as cultural systems. Social Science & Medicine. Part B: Medical Anthropology, 12, 85-93.

213. Kleinman, A., & Sung, L. H. (1979). Why do indigenous practitioners successfully heal? Social Science & Medicine. Part B: Medical Anthropology, 13(1), 7-26.

214. Knab, T. J. (2009). The dialogue of earth and sky: Dreams, souls, curing, and the modern Aztec underworld: University of Arizona Press.

215. Kohn, E. (2013). How forests think: Toward an anthropology beyond the human: Univ of California Press.

216. Kracke, W. (1987). Myths and dreams, thoughtin images:An Amazonian Contribution to psycoanalitic theory of primary process. In B. Tedlock (Ed.), Dreaming: Anthropological and psychological interpretations: CUP Archive.

217. Kracke, W. H. (2006). To dream, perchance to cure: dreaming and shamanism in a brazilian indigenous society. Social Analysis, 50(2), 106-120.

218. Krippner, S. (1981). Dreams and other altered conscious states. Parapsychological Journal of South Africa.

219. Kroeber, A. L. (1902). Preliminary sketch of the Mohave Indians. American Anthropologist, 4(2), 276-285.

220. Kuiken, D., Lee, M.-N., Eng, T., & Singh, T. (2006). The influence of impactful dreams on self-perceptual depth and spiritual transformation. Dreaming, 16(4), 258.

221. Lagarrita Attias, I. (1988). Algunos elementos chamánicos entre los iluminados o alumbrados de la Nueva España.

222. Langdon, E. J. (2007). Shamans and Shamanisms: Refections on anthropological dilemmas of modernity. Virtual Brazilian Anthropology, 4(2), 27-48.

223. Langner, T. S. (1962). A twenty-two item screening score of psychiatric symptoms indicating impairment. Journal of Health and Human Behavior, 3(4), 269-276.

224. Laughlin, C. D., & Rock, A. J. (2014). What can we learn from shamans' dreaming? A cross-cultural exploration. Dreaming, 24(4), 233.

225. Lerín Piñón, S. (2004). Antropología y salud intercultural: desafíos de una propuesta. Desacatos(15-16), 111-125.

226. Linares, E., & Bye, R. A., Jr. (1987). A study of four medicinal plant complexes of Mexico and adjacent United States. Journal of ethnopharmacology, 19(2).

227. Lincoln, J. S. (1935). The dream in primitive cultures.

228. Lisbona Guillén, M. (2013). Los sueños y los días: Chamanismo y nahualismo en el México actual. II. Pueblos Mayas. Península, 8(2), 105-109.

229. López Austin, A. (1980). Cuerpo humano e ideología. Las concepciones de los antiguos nahuas, 2, 76-77.

230. López Austin, A. (1989). Cuerpo humano e ideologíalas concepciones de los antiguos nahuas (9685828962). Retrieved from

231. López Austin, A. (1993). Textos de medicina náhuatl (9683629881). Retrieved from

232. Lorente Fernández, D. (2009). Notions of Nahua ethnometereology: the ahuaque-granicero complex in the Texcoco Sierra, Mexico. Revista española de antropología americana, 39(1), 97-118. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=XRAI2000s-85333&site=ehost-live

233. Lupo, A. (1994). La cruz de San Ramos. Estudios sobre las Culturas Contemporáneas, 6(17), 319-332.

234. Lupo, A. (1998). Apostillas sobre las transformaciones de la medicina tradicional en México. La cultura plural. Reflexiones sobre diálogo y silencio en Mesoamérica (Homenaje a Italo Signorini), México, UNAM/Universitá di Roma "La Sapienza, 221-255.

235. Lupo, A. (1998). Los cuentos de los abuelos. Un ejemplo de construcción de la memoria entre los nahuas de la Sierra Norte de Puebla, México. Paper presented at the Anales de la Fundación Joaquín Costa.

236. Lupo, A. (1999). Aire, viento, espíritu. Reflexiones a partir del pensamiento nahua. El aire. Mitos, ritos y realidades, 229-261.

237. Lupo, A. (2001). La cosmovisión de los nahuas de la Sierra de Puebla. Cosmovisión, ritual e identidad de los pueblos indígenas de México, 335-390.

238. Madsen, W. (1955). Shamanism in Mexico. Southwestern Journal of Anthropology, 11(1), 48-57.

239. Malvido, E., & Viesca, C. (1985). La epidemia de cocoliztli de 1576. Historias México, DF, 11, 27-33.

240. Manderson, L. (1987). Hot-cold food and medical theories: overview and introduction. Social Science & Medicine, 25(4), 329-330.

241. Manrique, L. (2004). Rituales de pasaje en tres comunidades mazatecas. (Licenciatura
). ENAH,

242. Marey-Thibon, P. (2001). De l'usage de l'ololiuhqui dans le Mexique colonial. Caravelle (1988-), 289-294. Retrieved from https://www.persee.fr/doc/carav_1147-6753_2001_num_76_1_1306

243. Marín, J. C. P. (2018). "Todas las tradiciones inmutables se transformaron anteayer" Tras la (re) invención del chamanismo. Sociedad y religión, 28(50).

244. Marion, M.-O. (1997). La oniromancia maya: un recurso ante el infortunio. In: Universidad de Ciencias y Artes de Chiapas, Centro de Estudios Superiores de México y Centroamérica.

245. Martínez, B. G. (1987). Los pueblos de la Sierra: el poder y el espacio entre los indios del norte de Puebla hasta 1700: Colegio De Mexico AC.

246. Martínez González, R. (2006). Le nahualli-tlahuipuchtli dans la monde nahuatl. Journal de la SociÈtÈ des AmÈricanistes de Paris.

247. Martínez González, R. (2006). Nahualli, imagen y representación. Dimensión Antropológica, 38, 7-47.

248. Martínez González, R. (2006). El neonahualismo y otras evoluciones contemporáneas. Alteridades, 16(31), 107-117.

249. Martínez González, R. (2006). El ihiyotl, la sombra y las almas-aliento en Mesoamérica. Cuicuilco, 13(38).

250. Martínez González, R. (2009). El chamanismo y la corporalización del chamán: argumentos para la deconstrucción de una falsa categoría antropológica. Cuicuilco, 16(46), 197-220.

251. Martinez-Cruz, P. (2011). Women and knowledge in Mesoamerica : from east L.A. to Anahuac. Tucson: University of Arizona Press.

252. McKenna, T. (1991). The archaic revival. New York: HarperSanFrancisco.

253. McKenna, T. (1999). Food of the Gods: The Search for the Original Tree of Knowledge: A radical history of plants, drugs and human evolution: Random House.

254. McKenna, T. K. (1993). The invisible landscape: Mind, hallucinogens, and the I Ching.

255. Menéndez, E. (1988). Modelo médico hegemónico y atención primaria. Segundas jornadas de atención primaria de la salud, 30, 451-464.

256. Menéndez, E. (1992). Investigación antropológica, biografía y controles artesanales. Nueva Antropología, 13(43), 23-37.

257. Menéndez, E. (1994). La enfermedad y la curación¿ Qué es medicina tradicional? Alteridades(7), 71-83.

258. Menéndez, E. L. (1981). Clases subalternas y el problema de la medicina denominada" tradicional" (Vol. 32): Centro de Investigaciones y Estudios Superiores en Antropología Social.

259. Messer, E. (1981). Hot-cold classification: theoretical and practical implications of a Mexican study. Social Science & Medicine. Part B: Medical Anthropology, 15(2), 133-145.

260. Messer, E. (1987). The hot and cold in Mesoamerican indigenous and Hispanicized thought. Social science & medicine, 25(4), 339-346.

261. Metzner, R. (1998). Hallucinogenic drugs and plants in psychotherapy and shamanism. Journal of psychoactive drugs, 30(4), 333-341.

262. Milano, C. (1980). La legitimación de las medicinas indígenas en México. El ejemplo de Cuetzalan del Progreso (Puebla). Social Science and Medicine, 14, 191-195.

263. Minero Ortega, F. 4.2 Vi na choa" cuando uno se desvela". Uso terapéutico de" hongos sagrados" entre los mazatecos de Oaxaca. ETNOBOTÁNICA Y FITOTERAPIA EN AMÉRICA, 257.

264. Minero Ortega, F. (2012). Las mujeres sabias y las Veladas con “hongos sagrados”: el chamanismo mazateco. Tesis de Licenciatura, ENAH-INAH, México,

265. Minero Ortega, F. (2016). Viajar al otro mundo en busca de conocimiento y poder.

Tesis de Maestría.

266. Montero, G. (2016). La cosmovisión de los pueblos indígenas. línea en: https://www. uv. mx/blogs/iihs/investigadores/199-2.

267. Morante López, R. B. (2000). El universo mesoamericano: Conceptos integradores. Desacatos(5), 31-44.

268. Moreno, Y., & Morales, J. G. (2012). Prácticas médicas y representaciones del cuerpo en un curandero náhuatl de la Sierra Norte de Puebla, México. Archivos en Medicina Familiar, 14(4), 81-86.

269. Morgan, W. (1932). Navaho dreams. American Anthropologist, 34(3), 390-405.

270. Moura, V. L., & Moss, D. (2016). Jaguar medicine: a qualitative study of healing and transformation. International Journal of Health Promotion and Education, 54(3), 126-136.

271. Munn, H. (1973). The mushrooms of language. Hallucinogens and shamanism., 86-122. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=321113&site=ehost-live

272. Nájera C, M. I. (2014). Sueño y éxtasis: Visión chamánica de los nahuas y los mayas. Estudios de cultura maya, 43, 199-205. Retrieved from http://www.scielo.org.mx/scielo.php?script=sci_arttext&pid=S0185-25742014000100010&lang=pt https://revistas-filologicas.unam.mx/estudios-cultura-maya/index.php/ecm/article/download/151/152

273. Nash, J., & Hernández Ceballos, T. (1975). Bajo la mirada de los antepasados: creencias y comportamiento en una comunidad maya. Retrieved from

274. Neurath, J. (2000). El don de ver: El proceso de iniciación y sus implicaciones para la cosmovisión huichola. Desacatos(5), 57-77.

275. Neurath, J. (2008). Cacería ritual y sacrificios huicholes: entre depredación y alianza, intercambio e identificación. Journal de la Société des Américanistes, 94(94-1), 251-283.

276. Noll, R., Achterberg, J., Bourguignon, E., George, L., Harner, M., Honko, L., . . . Preston, R. J. (1985). Mental imagery cultivation as a cultural phenomenon: The role of visions in shamanism [and comments and reply]. Current Anthropology, 26(4), 443-461.

277. Noy, P. (1969). A revision of the psychoanalytic theory of the primary process. Int J Psychoanal, 50(2), 155-178. Retrieved from https://www.ncbi.nlm.nih.gov/pubmed/4948274

278. O'Nell, C. W., & Selby, H. A. (1968). Sex differences in the incidence of susto in two

Zapotec pueblos: An analysis of the relationships between sex role expectations and a folk illness. Ethnology, 7(1), 95-105.

279. Oeric, O. T. O. O. N. (1985). <psilocybin_magic_mushrooms_growers_guide_(psilosophy.info).pdf>.

280. Oss, O., & Oeric, O. (1992). Psilocybin: Magic Mushroom Grower's Guide: A Handbook for Psilocybin Enthusiasts: Ed Rosenthal.

281. Ott, J. (1993). Pharmacotheon. Natural Products Co., Kennewick, USA.

282. Pagel, J. F. (2014). Dream science: exploring the forms of consciousness: Academic Press.

283. Pedersen, D., & Baruffati, V. (1989). Healers, deities, saints and doctors: elements for the analysis of medical systems. Social Science & Medicine, 29(4), 487-496.

284. Pelcastre-Villafuerte, B. (1999). La cura chamánica: una interpretación psicosocial. salud pública de méxico, 41, 221-229.

285. Peña, F. d. l. (2000). Más allá de la eficacia simbólica del chamanismo al psicoanálisis. Cuicuilco, 7(18).

286. Pérez Quijada, J. (1993). Las tradiciones del chamanismo en la Mazateca Baja: trances de posesión. Anales de Antropología, 30, 351-358. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=519327&site=ehost-live

287. Pérez Quijada, J. (1996). Shamanism traditions on the low Mazateca area. Alteridades, 6(12), 49. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=XRAI1980-90s-151018&site=ehost-live

288. Pérez Ruiz, M. L., & Argueta Villamar, A. (2011). Saberes indígenas y diálogo intercultural. Cultura y representaciones sociales, 5(10), 31-56.

289. Perrin, M. (1990). Antropología y experiencias del sueño: Colección 500 años 21.

290. Peters, L. G. (1982). Trance, initiation, and psychotherapy in Tamang shamanism. American Ethnologist, 9(1), 21-46.

291. Peters, L. G. (1983). The role of dreams in the life of a mentally retarded individual. Ethos, 11(1-2), 49-65.

292. Peters, L. G. (1989). Shamanism: Phenomenology of a spiritual discipline. Journal of Transpersonal Psychology, 21(2), 115-137.

293. Peters, L. G., & Price-Williams, D. (1980). Towards an experiential analysis of

shamanism. American Ethnologist, 7(3), 397-418.

294. Pickering, A. (2017). The ontological turn: taking different worlds seriously. Social analysis, 61(2), 134-150. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=XRAI17J0405Za-1334&site=ehost-live

295. Piña, S. (2015). En búsqueda del Ndi Xijto: Chamanismo y neochamanismo en la sierra mazateca, Oaxaca.

296. Piñeiro, J. J. (2000). El despertar del hongo: Chamanes y plantas de poder: Grijalbo Mondadori.

297. Pizzani, J. (2012). ¿ Esquizofrenia o chamanismo? El caso de un diagnóstico prematuro y reduccionista. Boletín Antropológico, 30(83).

298. Platvoet, J. G., & Molendijk, A. L. (1999). The pragmatics of defining religion: Contexts, concepts, and contests (Vol. 84): Brill.

299. POIRIER, S. (1993). PRACTITIONERS OF THE DREAM-AN EXAMPLE OF SHAMANISM-FRENCH-PERRIN, M. In: AMER ANTHROPOLOGICAL ASSOC 4350 NORTH FAIRFAX DRIVE SUITE 640, ARLINGTON, VA ….

300. Portal, M. A. (1986). Cuentos y mitos en una zona mazateca (Vol. 153): Instituto Nacional de Antropología e Historia.

301. Poveda, J. M. (2001). Chamanismo: el arte natural de curar. España, Ediciones temas de hoy.

302. Price-Williams, D., & Hughes, D. J. (1994). Shamanism and altered states of consciousness. Anthropology of Consciousness, 5(2), 1-15.

303. Qi, Z. (2013). WHO Traditional Medicine Strategy. 2014-2023. Geneva: World Health Organization.

304. Quijada, J. P. (1996). Tradiciones de chamanismo en la Mazateca Baja. Alteridades(12), 49-59.

305. Quintana, J. G. (1969). El baño ritual entre los nahuas, según el" Códice Florentino". Estudios de cultura náhuatl(8), 106.

306. Raby, D. (2006). Mujer blanca y dolor verde: usos de los colores, del género y de los lazos de parentesco en el Tratado de Ruiz de Alarcón. Estudios de cultura náhuatl, 37, 293-315. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=XRAI2000s-65589&site=ehost-live

307. Ramo y Affonso, A. M. (2010). Modos de conocimiento: la lección de Castaneda.

LiminaR, 8, 155-172.

308. Rätsch, C. (2005). The encyclopedia of psychoactive plants: ethnopharmacology and its applications: Simon and Schuster.

309. Reyes Valdez, A. (2009). Aprendiendo a soñar. El papel de los sueños como motores de reflexividad entre los tepehuanes del sur de Durango, México. Indiana, 26, 47-59. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=XRAI10D0304z-770&site=ehost-live

310. Ríos, E. (1988). Etnomedicina y salud comunitaria. Retrieved from

311. Ríos, E. (1988). Etnomedicina y salud comunitaria. Retrieved from

312. Rioux, D. (1996). Shamanic healing techniques: toward holistic addiction counseling. Alcoholism Treatment Quarterly, 14(1), 59-69.

313. Ripinsky-Naxon, M. (1993). The nature of shamanism: Substance and function of a religious metaphor: SUNY Press.

314. Rock, A. J., & Krippner, S. (2008). Proposed criteria for the necessary conditions for shamanic journeying imagery. Journal of Scientific Exploration, 22(2), 215-226.

315. Rodiles, J. (1998). Una terapia prohibida: biografía de Salvador Roquet, 1920-1995: Grupo Editorial Planeta.

316. Romero, L. (2007). La noción de persona y el concepto de ixtlamatki en la visión del mundo de los nahuas de la Sierra Negra de Puebla. Revista Pueblos y Fronteras digital(4), 0.

317. Romero Méndez, R. (2012). Ja' apokäät o la narración de la curandera = : Ja' apokäät or the shaman's tale. Ja' apokäät or the shaman's tale, 18 (2012), 79-123. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=648350&site=ehost-live

318. Roquet, S., & Favreau, P. (1981). Los alucinógenos : de la concepción indígena a una nueva psicoterapia. Mexico: Ediciones Prisma.

319. Rubel, A. J. (1964). The epidemiology of a folk illness: Susto in Hispanic America. Ethnology, 3(3), 268-283.

320. Rubel, A. J., O'Nell, C. W., & Collado-Ardon, R. (1991). Susto: A folk illness (Vol. 12): Univ of California Press.

321. Ruiz de Alarcón, H., Coe, M. D., & Whittaker, G. (1982). Aztec sorcerers in seventeenth century Mexico : the Treatise on superstitions by Hernando Ruiz de AlarcÛn. Albany, N.Y.: Institute for Mesoamerican Studies, State University of New York at Albany.

322. Ruiz, L. (2007). Mazatecos.

323. Ruz, M. H. (2012). Mercedes de la Garza, Sueño y éxtasis. Visión chamánica de los nahuas y los mayas. Península, 7(1).

324. Rzedowski, J., & Equihua, M. (1987). Atlas Cultural d México. Flora. Editorial Planeta, México, 51.

325. Said, E. W., & Said, E. W. (1994). Culture and Imperialism: Vintage.

326. Saldaña RamÌrez, A. (2013). En busca de la cura: Practicas adivinatorias y terapéuticas entre los nahuas del Alto Balsas (Guerrero) presentes en Morelos. Cuicuilco, 20(56), 203-222.

327. Saler, B. (1964). Nagual, witch, and sorcerer in a Quiche village. Ethnology, 305-328.

328. Sánchez Díaz de Rivera, M. E., & Almeida Acosta, E. (2005). Las veredas de la incertidumbre. Relaciones interculturales y supervivencia digna.

329. Sandstrom, A. R. (1991). Corn is our blood: Culture and ethnic identity in a contemporary Aztec Indian village (Vol. 206): University of oklahoma Press Norman.

330. Schmid, C. (2014). A comparative analysis of the usage of entheogens. Curare, 37(3), 212. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=XRAI15e03y-845&site=ehost-live

331. Schultes, R. E., & Hofmann, A. (1979). Plants of the gods: origins of hallucinogenic use: McGraw-Hill New York.

332. Schweber, J. M. (2018). El psicoanálisis de grupo y los sueños en comunidades originarias del territorio mexicano. Vínculo, 15(2), 92-98.

333. Scuro, J. (2015). De religión y salud a espiritualidad y cura. El neochamanismo como vehículo del cambio. Ciencias Sociales y Religión/Ciências Sociais e Religião, 17(22), 167-187.

334. Scuro, J. (2018). (Neo) chamanismo. Aspectos constitutivos y desafíos analíticos. Horizontes Antropológicos(51), 259-288.

335. Scuro, J., & Rodd, R. (2014). Neo-shamanism. Encyclopedia of Latin American Religions, 1-6.

336. Sharon, D. (1978). Wizard of the four winds: A shaman's story: Free press.

337. Shulgin, A., & Shulgin, A. (1992). PiHKAL. Ann Shulgin. Part 1//Transform Press, 1991.–P. 192, 198.

338. Signorini, I. (1982). Patterns of fright: multiple concepts of susto in a Nahua-Ladino community of the Sierra de Puebla (México). Ethnology, 21(4), 313-323.

339. Signorini, I., & Lupo, A. (1989). Los tres ejes de la vida: almas, cuerpo, enfermedad entre los nahuas de la Sierra de Puebla: Editorial UV.

340. Smith, H. (2000). Cleansing the doors of perception: The religious significance of entheogenic plants and chemicals: JP Tarcher.

341. Solana, E. E. (1996). Tres procedimientos diagnósticos de la medicina tradicional indígena. Alteridades(12), 19-26.

342. Solana, E. E. (2014). Tres procedimientos diagnósticos de la medicina tradicional indígena. Alteridades(12), 19-26.

343. Somellera Somellera, D. P. (2016). ¿ Médico o curandero? Universidad Iberoamericana Ciudad de México. Departamento de Ciencias …,

344. Sosa, E. (2005). Los sueños. Diánoia, 50(55), 3-16.

345. Stewart, C. (2004). Introduction: Dreaming as an object of anthropological analysis. Dreaming, 14(2-3), 75.

346. Taussig, M. (1987). Shamanism, Colonialism, and the Wild Man: A Study in Terror and Healing.

347. Tedlock, B. (1982). Time and the highland Maya (1st ed.). Albuquerque: University of New Mexico Press.

348. Tedlock, B. (1983). A phenomenological approach to religious change in highland Guatemala. Heritage of Conquest: Thirty Years Later, 235-246.

349. Tedlock, B. (1987). Dreaming: Anthropological and psychological interpretations: CUP Archive.

350. Tedlock, B. (1987). An interpretive solution to the problem of humoral medicine in Latin America. Social science & medicine, 24(12), 1069-1083.

351. Tedlock, B. (1992). Dreaming : anthropological and psychological interpretations. Santa Fe, N.M.
Seattle, Wash.: School of American Research Press ;
Distributed by the University of Washington Press.

352. Tedlock, B. (1992). The beautiful and the dangerous : encounters with the Zuni Indians. New York: Viking.

353. Tedlock, B. (2005). The woman in the shaman's body : reclaiming the feminine in religion and medicine. New York: Bantam Books.

354. Tedlock, B. (2006). Bicultural dreaming: an intersubjective communicative process. Etnograficheskoe obozrenie, 6, 16. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=XRAI2000s-66020&site=ehost-live

355. Tedlock, D., & Tedlock, B. (1975). Teachings from the American earth : Indian religion and philosophy (1st ed.). New York: Liveright.

356. Téllez, I. P. (2015). Ontología y chamanismo entre los Nahua de Cuacuila,Huauchinango, Puebla. Historicas Digitales, Serie Antropológica, 23(23), p. 245-262.

357. Tobon, M. (2015). Dreams as ethnographic tools/Los suenos como instrumentos etnograficos. Revista de Antropologia Iberoamericana, 10(3), 332-355.

358. Toffelmier, G., & Luomala, K. (1936). Dreams and dream interpretation of the Diegueno Indians of Southern California. The Psychoanalytic Quarterly, 5(2), 195-225.

359. Tola, F. C. (2005). Personas corporizadas, multiplicidades y extensiones: un acercamiento a las nociones de cuerpo y persona entre los tobas (qom) del chaco argentino. Revista Colombiana de Antropología, 41, 107-134.

360. Torquemada, J. d. (1975). Los veinte y un libros rituales y Monarquía Indiana, con el origen y guerras de los indios occidentales, de sus poblaciones, descubrimientos, conquistas, conversión y otras cosas maravillosas de la misma tierra. México, Universidad Nacional Autónoma de México-Instituto de Investigaciones Históricas.

361. Tousignant, M. (1979). Espanto: a dialogue with the gods. Culture, Medicine and Psychiatry, 3(4), 347-361.

362. Trigueros, E. M. La Etnopoética y los cantos de María Sabina.Una Approximacion.

363. Trotter, R. T. (1982). Susto: the context of community morbidity patterns. Ethnology, 21(3), 215-226.

364. Trotter, R. T., & Chavira, J. A. (1997). Curanderismo, Mexican American Folk Healing: University of Georgia Press.

365. Turner, V. (1969). Liminality and communitas. The ritual process: Structure and anti-structure, 94, 130.

366. Turner, V. (1969). The Ritual Process: Structure and Anti. Structure, 1969.

367. Turner, V. (1974). Liminal to liminoid, in play, flow, and ritual: an essay in comparative symbology. Rice Institute Pamphlet-Rice University Studies, 60(3).

368. Turner, V. (1979). Frame, flow and reflection: Ritual and drama as public liminality. Japanese Journal of religious studies, 465-499.

369. Turner, V., Abrahams, R. D., & Harris, A. (2017). The ritual process: Structure and anti-structure: Routledge.

370. Uzzell, D. (1974). Susto revisited: illness as strategic role. American Ethnologist, 1(2), 369-378.

371. Vacas Mora, V. (2010). "Shamanism" and worldview on the north Sierra of Puebla. Anales. Museo de América (Madrid), 18, 28-55. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=XRAI13D02Z-695&site=ehost-live

372. Valdés III, L. J., Díaz, J., & Paul, A. G. (1983). Ethnopharmacology of ska maria pastora (Salvia divinorum, Epling and Játiva-M.). Journal of ethnopharmacology, 7(3), 287-312.

373. Valdes, L., Hatheld, G., Koreeda, M., & Paul, A. (1987). Studies ofSalvia divinorum (Lamiaceae), an hallucinogenic mint from the Sierra Mazateca in Oaxaca, Central Mexico. Economic Botany, 41(2), 283-291.

374. VALENCIA, H. G. (2006). Religión, política y brujería. Dimensión Antropológ-ica, 13, 151-180.

375. VanPool, C. S. (2009). The signs of the sacred: Identifying shamans using archaeological evidence. Journal of Anthropological Archaeology, 28(2), 177-190. doi:https://doi.org/10.1016/j.jaa.2009.02.003

376. Vargas, L. A., & Casillas, L. E. (1989). Medical anthropology in México. Social Science & Medicine, 28(12), 1343-1349.

377. Vasconcelos, J. (1966). La raza cósmica: misión de la raza iberoamericana: Aguilar Madrid.

378. Vélez Cervantes, J. C. (1996). Nahualism and Tapahtiani-Nahualmej people from Cuetzalan, Puebla. Alteridades, 6(12), 33. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=XRAI1980-90s-151015&site=ehost-live

379. Victorino-Ramírez, L., Velázquez-Rodríguez, E. B., & Ruíz-González, R. O. (2014). THE FORMATION OF THE ECOLOGICAL AWARENESS IN ACADEMICS: A TALE ABOUT THE CENOTES IN YUCATÁN, MÉXICO. Ra Ximhai, 10(6).

380. Viesca T, C. (1999). The Mexican Graniceros: ancient priests, modern healers. Curare, 22(2), 135-140. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=539807&site=ehost-live

381. Villoldo, A. (2007). The Four Insights: Hay House, Inc.

382. Villoldo, A. (2010). Courageous dreaming: How shamans dream the world into

being: ReadHowYouWant. com.

383. Villoldo, A., & Krippner, S. (1987). Healing states: A journey into the world of spiritual healing and shamanism: Simon and Schuster.

384. Wallace, W. J. (1947). The dream in Mohave life. The Journal of American Folklore, 60(237), 252-258.

385. Walsh, R. (1989). What is a shaman? Definition, origin and distribution. Journal of Transpersonal Psychology, 21(1), 1-11.

386. Wasson, G., & R. (1980). The wondrous mushroom: Mycolatry in Mesoamerica. New York.

387. Wasson, R. G. (1961). The hallucinogenic fungi of Mexico: an inquiry into the origins of the religious idea among primitive peoples. Botanical Museum Leaflets, Harvard University, 19(7), 137-162.

388. Wasson, R. G. (1962). A new Mexican psychotropic drug from the mint family. Botanical Museum Leaflets, Harvard University, 20(3), 77-84.

389. Wasson, R. G., Hofmann, A., & Ruck, C. A. THE ROAD TO ELEUSIS.

390. Wauchope, R. (1969). Handbook of Middle American Indians, Volumes 7 and 8: Ethnology: University of Texas Press.

391. Wax, M. L. (2004). Dream sharing as social practice. Dreaming, 14(2-3), 83.

392. Weitlaner, R. J. (1952). Curaciones mazatecas. Paper presented at the Anales del Instituto Nacional de Antropología e Historia.

393. Weller, S. C., Baer, R. D., de Alba Garcia, J. G., Glazer, M., Trotter, R., Pachter, L., & Klein, R. E. (2002). Regional variation in Latino descriptions of susto. Culture, Medicine and Psychiatry, 26(4), 449-472.

394. Whorf, B. L. (2012). Language, thought, and reality: Selected writings of Benjamin Lee Whorf: Mit Press.

395. Williams García, R. (1963). Los tepehuas. Universidad Veracruzana/Instituto de Antropología, Xalapa, Mexico.

396. Winkelman, M. (1990). The evolution of consciousness: An essay review of Up from Eden (Wilber 1981). Anthropology of Consciousness, 1(3-4), 24-31.

397. Winkelman, M., & Finelli, P. (2006). El kusiyai: chamanismo entre las poblaciones yumanas del norte de Baja California. Culturales, 2(3), 111-131.

398. Wright, P. (2015). Sueño, shamanismo y Evangelio en los Qom (Tobas) del Chaco

argentino. Sociedad y Religión: Sociología, Antropología e Historia de la Religión en el Cono Sur, 25(44), 30-61.

399. Zacharias, S. (2017). On cultural variety of therapeutic application of altered states of consciousness in traditional Mexican medicine and western psychotherapy. Curare, 40(3), 176. Retrieved from http://search.ebscohost.com/login.aspx?direct=true&db=ant&AN=XRAI17s10y-1239&site=ehost-live

400. Znamenski, A. A. (2007). The beauty of the primitive : shamanism and Western imagination. Oxford ; New York: Oxford University Press.

401. Zolla, C. (1980). Traditional medicine in Latin America, with particular reference to Mexico. Journal of ethnopharmacology, 2(1), 37-41.

402. Zolla, C., & Márquez, E. Z. (2004). Los pueblos indígenas de México: 100 preguntas (Vol. 1): unam.