

# CURANDERISMO: THE PREVALENCE OF TRADITIONAL HEALING IN THE CONTEXT OF WESTERN MEDICINE

Institute for Latino Studies | University of Notre Dame | Student Research Briefs

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“Curandero” Painting © Mario Gonzalez Chavajay

## Research Purpose

The purpose of researching the impacts of *curanderismo*, a folk healing practice commonly found among Latin American populations, on the public healthcare system in the United States is threefold. First, this research will uncover how curanderismo functions as either a supplementary or complementary system to biomedicine for certain demographics in the United States, especially when considering certain aspects of curanderismo like generational retention and the impact of religion on the practice. Second, the research will point to the inequalities in the healthcare system where work must be done to provide medically underserved demographics more access to healthcare services.

Finally, the research will stress the importance of healthcare providers growing in awareness of curanderismo and other cultural components of their patient populations in order to provide a better quality of care. Awareness and education are crucial in serving the Latino population well in terms of public health.

## Terms

**Curanderismo:** A system of spiritual folk healing that is popular in Mexican and Latin American communities.

**Espiritismo:** A 19th-century, philosophical practice originally from Europe and practiced in Puerto Rico that consisted of calling the spirits to ask for help, communicating, and administering healing via spirits.

**Traditional Healer:** Practitioners who practice alternative medicine; do not necessarily have to be educated in medicinal practices and usually do not align with Western practices. They typically rely on the use of plants, herbs, and spiritual cleansing rituals.

**Biomedicine:** Western medicine which is rooted in the scientific method, research, and biology. Biomedicine is practiced in hospitals and clinics by medical doctors.

**Greek Humoral System:** The Greek theory of how health is tied to the four bodily humors: blood, black bile, yellow bile, and phlegm which can be in or out of tune with the four elements.

**Botanica:** A store for purchasing religious paraphernalia, alternative medicines, and items used in traditional healing practices.

**Rituals:** A religious practice that contains repetitive ceremonial components and is conserved over time

## Introduction and Overview of Curanderismo

Curanderismo, the practice of “traditional” healing in Latin American countries, is rooted in tradition, culture, spirituality, and occasionally magic and emphasizes symbolism in practices. Latin American immigrant communities in the U.S. and cultures often have traditional healers or shamans who practice medicine as either a substitute or supplement to Western biomedicine. *Curanderas* are often highly respected women of the community, although, on occasion, a well-respected male in the community could decide to be a *curandero* as well. These healers employ many techniques and often use what works best according to their personal preference or that of their local community. They typically depend on a multifactorial approach that focuses on the spiritual, emotional, and physical dimensions of health and illness. A common belief is that health issues have natural and supernatural causes and remedies (Sanchez, 2018). In addition to offering spiritual advice, counseling, nutritional support, and alternative medical consultation, they wield a botanical toolkit. Healers utilize plants with active ingredients that act as “laxatives, emetics, diuretics, diaphoretics, and styptics” to cleanse the body by eliminating toxicity which

symbolizes evil forces (Kiev, 1968, p.23). They also utilize physical techniques like massage, and acupuncture along with spiritual techniques like prayer, the lighting of incense or candles, and other ritualistic methods (Sanchez, 2018).

### The Curandera Vocation

While some curanderismo rituals and expressions are ingrained in the culture and dialect and are practiced by the laity, curanderas are highly trained and well-regarded cultural pillars that serve their community. The position of curandera comes with authority and esteem, but also an obligation to serve one's community. In contrast to biomedical practitioners, curanderas do not become healers as a product of schooling or testing; they are "chosen" spiritually (Wiley & Allen, 2021). Their position in the community is one of reverence due to divine affirmation rather than a status achieved by rites of passage like the White Coat Ceremony, where medical students don a white coat at the initiation of their training, which is common in western biomedical professions (Wiley & Allen, 2021). Compared to curanderas, biomedical doctors are not so much revered as they are respected; their status is seen as an achievement and so they are regarded as professionals of their trade.



Photograph © Colin Boyle/Book Club

#### Interview with an Espiritista

Sometimes the vocation to begin the manual healing practice like curanderismo or the spiritual healing practice like espiritismo is based on a trickle-down process of cultural inheritance. A ritualistic spiritual healer, Victoria Taufique, who is settled in Chicago Illinois, owns a shop in Humboldt Park's Paseo Boricua, a Puerto Rican neighborhood. The shop, *Botanica Victoria*, is a place where locals can go to visit Taufique and receive a variety of services that range from spiritual guidance and advice to herbal "prescriptions" for whatever may ail them. Taufique considers her vocation to be a product of her mother's influence. "It is something you just come to learn as you are raised within your culture. You don't study it," she says. Taufique also implements into her practice the knowledge gained from her studies in botany and chemistry. In her experience, her ability to help others and know what they need is a natural and inherent part of who she is. The decision to use her gifts in a profitable way was merely a decision of necessity - "to keep [herself] afloat". However, she is more than happy to offer her services for free whenever she can and to do good with the gifts she has.

Curandera training, referred to as *desarrollo* by many who practice, trains individuals with the "healing gift" (*el don*) to utilize prayer, religious objects, and rituals to heal. The gift of healing is not something that can be learned, it is seen as a gift from God. As mentioned above, it can be a gift that is passed down from mother to daughter. Curanderas must feel a "calling," strong

desire, or yearning in their life in order to engage in the practice (Salazar, 2013). Curanderismo is a vocation and healers boast “piety and integrity that confirm the divine affirmation of [their] work” (Kiev, 1968, p. 30). Healing is seen as a divinely inspired power that curanderas feel a calling to pursue. In some cases, it is a practice that is passed down from generation to generation to be kept alive in a community. After discovering their gift, curanderas have an average of five and a half years of training where they normally study in an apprenticeship-type model (Padilla, 2001). Curanderas normally accept payment only in the form of donations and live in the community that they serve. They share a similar social class as their clients and thus they will also use other sources outside of healing for income (Padilla, 2001).

Curanderas tend to work out of *botanicas*, local shops that sell spiritual and herbal goods to Latino clients, and for purposes of curanderismo they function as a pseudo-pharmacy (Murphy, 2010). Botanicas contain religious paraphernalia, herbal remedies, cultural items, and other such merchandise. Clients can seek out curanderas and their treatments by visiting one of these shops which are usually found in their local communities. Botanicas are businesses that have, as a result of being introduced to the United States, modernized; in the U.S. they are more established businesses for clients rather than a shop found in a healer’s home which is more common in Latin America where the curanderismo practice and the presence of botanicas is found. However, there are some curanderas who continue to work out of their homes (Padilla, 2001).



Shop shelves, Botanica Victoria, Chicago, IL. Photograph © Nydia Morales Soto

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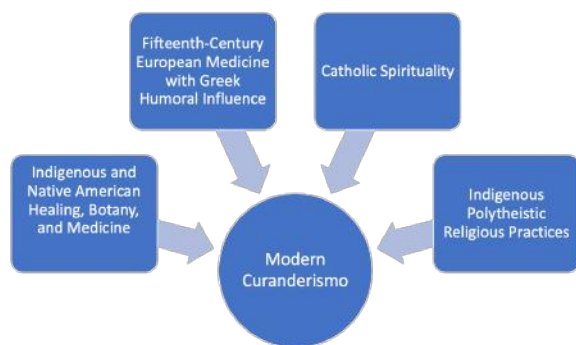
## History and Origins of Curanderismo

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Curanderismo practices intersect multiple cultures, religions, and healing systems. The medicinal practices can be traced back to fifteenth-century European medicine which is based on the Greek humoral medicinal system. The Greek humoral system emphasizes maintaining a balance between the four bodily humors, blood, black bile, yellow bile, and phlegm, and their respective natural humors. Spanish colonizers brought this healing system to the new world which was

adopted and blended with the healing traditions of indigenous groups including the Aztecs and Mayans. This system was frozen in time while European medicine advanced due to Mexico being “cut off from the Renaissance” (Kiev, 1968, p.26).

In summary, curanderismo is derived from “Greek humoral medicine, early Judeo-Christian healing traditions, European medieval witchcraft, and Moorish influences, [and] Native American traditions” (Sanchez, 2018, p.149). However, in a modern context it is most prominently influenced by Roman-Catholicism. The strong emphasis on botany and the healing properties of plants in modern curanderismo can be attributed to their use in both fifteenth-century European medicine and native healing practices (Kiev, 1968). Further Spanish colonization brought more than just a system of medicine, it was rooted in the expansion of the Roman Catholic church. While the medicinal practices of the new and old world mixed, Catholicism simultaneously blended with the native people's belief system. For this reason, health and spirituality are intimately tied in the folk healing culture and this unity leads curanderas to be extremely religious and spiritual and to its reflection in their consultations.



**Figure 1.** Influences on modern curanderismo. Figure created by authors Gamboa & Holen.

## Modern Curanderismo in The United States

Curanderismo is alive and growing amongst Latinx populations in the United States. Components of the folk healing practice are intertwined into the culture of Latinos and are ingrained in Latino immigrants' daily lives. Because the practice allows immigrants to “maintain elements of their culture, and their beliefs and identities”, curanderismo continues

to be passed down and cherished as it provides “psychological and social support” to immigrants who have been isolated from their cultural places of origin (Sanchez, 2018, p.149).

Curanderismo persists because it provides a form of health care to a medically underserved demographic. Latinos are subject to significant healthcare disparities in the United States. Regardless of immigration status, Latinos are the least likely demographic to have health insurance in the United States and are “locked out” of the U.S. healthcare system due to factors including language barriers, lack of Latino healthcare providers, documentation status, and socioeconomic factors. Blocked from the U.S. healthcare system, many Latino immigrants return to their cultural place of healing for treatments which explains why “traditional medicine is used by 75% of Mexican-Americans in some parts of the United States” (Sanchez, 2018, p. 149). Curanderas meet the medical needs of Latinos who have little access to the public health care

system in the U.S. especially given that in their communities a botanica or healer may be more accessible than a doctor's office or a pharmacy.

In addition to meeting the needs of the medically underserved, curanderismo provides a cultural cushion for immigrants and is utilized by those who do have access to Western medicine as well; it is not only utilized by Latinos who are locked out of the healthcare system.

### Demographics of Curanderismo Utilization

Approximately 60 million people in the United States utilize alternative medicine on a yearly basis (Padilla, 2001). There are significant factors that predict the use of a curandera. Latinos in the U.S. who are not bilingual (i.e do not speak English), are lower income and have less education are more likely to utilize a curandera (Padilla, 2001). The use of traditional healers among these groups is common because “they are accessible, affordable, and provide culturally and linguistically compatible care, indicating that they offer an alternative that addresses systemic structural barriers to biomedical health care” (Cruz, 2022, p. 412).



Figure 2. Predictors of traditional healer usage. Figure created by authors Gamboa & Holen.

Patients may choose a curandera due to spatial accessibility. Curanderas live among communities and patients can visit their local healer by foot at times that accommodate working schedules without having to miss hourly work or have access to transportation. Patients seek out traditional healers or curanderas because they speak their native language, are more affordable, are accessible regardless of status, and because they have cultural ties to such healers.

Further, it is worth noting that curanderismo has a Pan-Latino influence. Frequenting curanderas, botanics, or espiritistas is not limited to one ethnic group. Curanderismo serves a great diversity of people. For example, Victoria Taufique, an espiritista and Mexican immigrant, runs a Botanica in the Puerto Rican-centric neighborhood, Paseo Boricua, yet serves Latinos from a variety of backgrounds and further many other cultural traditions outside of the Latino Community. Curanderismo is a space of user inclusivity that promotes the diversity of cultural and ethnic demographics (Murphy, 2010).

### Generational Retention

One of the biggest modern aspects of curanderismo and its role both throughout Latin America and now its prevalence throughout the United States is the retention among the younger

## Curanderismo and the Borderland



“Curandero de Hueso” - Artist Unknown

The process of immigration could be considered a significant stressor on the retention of curanderismo as well as other cultural factors. Curanderismo on the border, however, is one of the ways that it seems to persist as an available resource for recent immigrants in the southwestern part of the country. Reyna Muñoz, a faculty fellow at the University of Texas at El Paso, writes about this concept and her upbringing as a Mexican American; she describes how it influenced her interest in curanderismo as a physical practice later in life rather than just word of mouth. Being a citizen living on the border allowed her to experience firsthand the cross-over of art, literature, and pertinent language that keeps the practice alive in her community and others like it. *“The memories are there and we have to preserve them, keeping our tradition and sacred practices alive. This is part of our border narrative.”* - Reyna Muñoz, *Preserving Curanderismo in the Borderland*, The Humanities Collaborative

population. The process of assimilation among the youth of immigrant backgrounds could potentially be a factor that counteracts the retention of the curanderismo practice. There is however the presence of some cultural values that can counteract these assimilation pressures. Authoritarian values among the Mexican-American population are one of these cultural values (Kiev, 1968). A strong adherence to this in Mexican-American as well as other cultures with similar values could have a significant impact on the collaboration between curanderismo and Western medicine, especially as younger generations of Latinos become more present in the world of healthcare.

In many Latinos’ experiences, retention does not look like the overt practice of cultural rituals. Curanderismo is much less a term that is openly used but rather a variety of common superstitions or small rituals that are passed down from generation to generation through observation. It is natural to Latino culture because most people of the culture will partake in these small rituals as an everyday act that is done when necessary. For example, in Mexican American culture, one might rub garlic on mosquito bites because it’s a cultural hack or even simply wear amulets like *ojo de venado* (deer’s eye) for the sake of aural protection (Muñoz, 2021). These actions are all considered under the umbrella of curanderismo and may go by different names depending on the culture or even perhaps no name at all and are simple daily functions. These tendencies are passed down from generation to generation as cultural traits inherent to the communities that use them; this notion is the hope for curanderismo’s generational retention even if it is not referred to by the technical name.

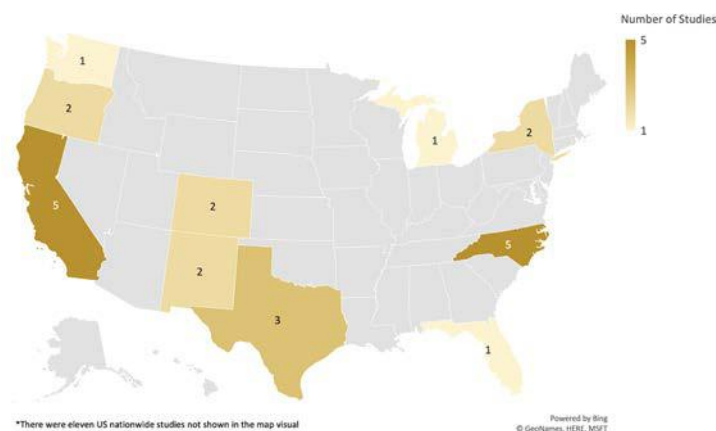
### Religion as an Influencing Factor on Utilization of Traditional Healing and/or Western Medicine

The religious beliefs that are inherent to spiritual practices like curanderismo vary among cultures and places. Among Latinos, especially among Mexicans or those of Mexican

descent, the Roman Catholic influence is strong. Because the practice has a background in Europe where witchcraft was considered common for spiritual healing (Kiev, 1968), there are some Latinos who believe that the practice of curanderismo is immoral and goes against the

principles of the Catholic faith. Further, the practice of *espiritismo*, which is typically found in Puerto Rican culture, is not recognized by Catholic doctrine and falls under the practice of *brujeria* or serious witchcraft which is not supported by the faith (Salazar, 2013). However, this does not mean that the practice is void of religious influence or religious involvement. In fact, most of the Mexican population who partake in this ritualistic healing - whether they be a patient or healer - look to icons of the Catholic faith and use faith-based paraphernalia to support the healing process and aid the healer in doing their job. One popular icon to look towards among the Mexican population is the *Virgen de Guadalupe*. She stands as a symbol of healing for the people of Mexico and the union of the indigenous peoples and those of Spanish backgrounds. It is yet another symbol of *mestizaje* among the people of Mexico which is quite representative of the practice of *curanderismo* there.

Because *curanderismo* is a practice that can vary on its influence by religion, the inclination for some individuals to seek out the practice can also vary depending on their religious views, especially if they consider the practice to be more in line with *brujeria* as many devout Catholics believe (Salazar, 2013). In some cases among Mexican-Americans, a stronger devotion to their faith will lessen the likelihood of them seeking out or consulting a *curandera* (Faver, 2009). Therefore, they rely on western biomedicine more. This could potentially suggest that Mexican-Americans, and even other Latinos, who consider themselves more adherent to the beliefs of their faith, especially the Catholic faith, would seek out Western medicine rather than a *curandera* whereas other Mexican-Americans might seek out simultaneous treatment. This does not, however, discuss the notion of a strongly religion-influenced *curandera* - or a *curandera* who may heavily incorporate Christian/catholic values in their treatment - which are to be found in many places.



**Figure 3.** Note: "Location of studies for the THs as health care providers for the Latine community in the United States systematic review." From "Traditional Healers as Health Care Providers for the Latine Community in the United States, a Systematic Review," by Cruz ML et al., 2022, *Health Equity*, 6.1, p.420. Copyright 2021 by Mary Ann Liebert Inc. Publishers

### Curanderismo in the U.S as a Complement to Biomedicine

For the majority of Latinos, *curanderismo* serves as a complementary measure of health. A lot of Latinos who utilize alternative healing in the United States only do so for less serious health issues and still rely primarily on modern biomedicine for serious health issues, especially if they find it more accessible than other Latinos might. These patients often see *curanderas* for more common health issues like "gastrointestinal problems, childhood diarrhea, diabetes, musculoskeletal pain and injuries, insomnia, fever,



weight loss, substance use, and emotional distress” (Cruz, 2022, p.423). On the topic of emotional distress, the psychiatric usage of traditional healers is incredibly important when speaking in terms of supplementary care, as curanderismo deals with spiritual healing. In many cases among Latinos, typical psychological maladies will be directed to curanderas for treatment. This can be the result of a cultural belief of a spiritual influence on emotional well-being which only a curandera could treat although it can also be a result of lack of accessibility to mental care resources which among most U.S. adults is already hard to come by for reasons of affordability and the like (Coombs et al., 2021). As discussed earlier, inaccessibility would especially include Latinos due to affordability, documentation status pressures, cultural influences, etc. Therefore, for Latinos, visits to a curandera for reasons of emotional distress or psychological ailments consist of cases when a curandera might read the patient's palm, cleanse them with sage or other items, and suggest factors in the patient's life that could be spiritually influencing their mental health (Kiev, 1968). As local Chicago healer Victoria Taufique expressed,

*// A lot of the time a [patient’s mental] issue will be the result of issues that they have in their life..., so they will come to me to help them figure it out. That’s when I will read the lines on their hands and tell them what the current state of their life is [in a universal sense]. That always helps them reorient themselves... //*

This is one pertinent example of how a curandera or traditional healer may interpret a patient’s state of well-being and how important, in their opinion, spiritual well-being is for their mental state. Most Latinos cannot receive appropriate physical medical care and western psychological care can be considered either too expensive or be stigmatized (Ramirez, 2017). Therefore, a curandera’s opinion regarding their mental health may be how they supplement their overall health to alleviate overwhelming feelings of stress, anxiety, etc. that could be interfering with their day-to-day life.

On that note, it is important to reiterate, however, that for some groups of Latinos, especially those who are “locked out” of the public health care system due to their documentation status, socioeconomic status, lack of proficiency in English, or other factors, curanderismo functions as the primary place for health treatment. For this demographic curanderismo is filling the gaps of the U.S. healthcare system. A systematic review of literature about the use of curanderas found that many Latinos utilize this alternative medicine because they were “unable to access biomedical” systems and were “left with no other option” (Cruz, 2022, p.423).

### **Legitimacy and Efficacy of Curandera Treatments**

Curanderismo has similar efficacy in treating mental health disorders as biomedical psychotherapy and was found to have a 75% success rate compared to a 70% success rate for

Western mental health interventions (Sanchez, 2018). Curandera diagnoses include *nervioso* and *susto* which correspond to anxiety and are treated with methods similar to counseling that incorporate religious aspects. These ailments are treated according to the curandera's judgment and according to the typical rules of the community and culture. Important to consider is the idea of the patient-healer relationship which is very influential in both treatment and recovery. Among Latinos, specifically those of Mexican descent who have retained values that call for curandera treatment, are brought up to respect the healer and to view them as professionals in their trade (Kiev, 1968). There is a lot of trust and reverence for a curandera's work. Consequently, patients perceive the success of treatments, but as in western medicine these patients are not exempt from the placebo effect in which it is their own belief that proves effective rather than the treatment itself (that of which has no effect). This could be the result of the integral cultural beliefs that value the practice of curanderismo among community members who are, and have been for generations, raised to trust in the processes of their traditional healers.

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## Curanderismo and the U.S. Public Health Care System

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Curanderismo is not accepted as a valid medical practice by either the United States or the Mexican government. This is mostly due to the widespread acceptance of biomedicine and the past persecution of folk healers by movements like the Catholic Inquisition which stigmatized these practices and led to them being left out of research (Sanchez, 2018). This is changing however as curanderismo diagnoses are beginning to be included in medical literature. In fact, three folk illnesses associated with curanderismo are found in the fourth edition of the American Psychiatric Association Diagnostic and Statistical Manual of Mental Disorders (Sanchez, 2018).

### **Curanderismo Conflict with Western Medicine and Threats to Public Health**

The most explicit danger curanderismo poses to public health is that many herbal preparations contain active ingredients or toxins that can be dangerous when they are not controlled by medical professionals (Padilla, 2001). A stark example of the deleterious effects of traditional medicine is that of lead encephalopathy caused by curanderas' use of Azarcon and Greta for the treatment of empacho or intestinal blockage (Karri, 2008). These medicines are often used by herbal healers in Latin America and in Latino Communities in the U.S.; however, they are known to cause lead poisoning. Arazacron and Greta can contain up to 95% lead. Patients who visit curanderas for constipation and other intestinal issues, especially infants and children, often present with lead poisoning which can have long-term and permanent consequences or can lead to death (Karri, 2008).

While this is an explicit danger of the curanderismo practice, it is important to put into perspective mistakes in any medical system. Biomedicine too contains errors like malpractice, overprescription of medication, and faulty diagnostics; all systems contain mistakes.

While only some folk healing medicines have deleterious effects on their own, many can be dangerous when combined with other treatments or medicines (Padilla, 2001). This poses a serious threat given that the majority of Latinos who utilize folk healing do so as a complement to biomedicine. This threat is heightened by the fact that patients are not transparent about their use of alternative medicine. The majority (69%) of patients who visit curanderas refrain from sharing this information with their biomedical providers. This failure to report the use of alternative medicine is due to language barriers and a fear that biomedical doctors will be angry and unapproving about this practice. This is problematic because “the usage of some folk remedies in conjunction with Western medicine can produce negative side effects” (Sanchez, 2018, p.158). Without knowledge of a patient's medical history and current medicinal uses, providers can cause harm.



**Figure 4.** Problematic Progression Figure created by authors Gamboa & Holen.

Another more implicit threat to health is that patients who utilize curanderas before seeking professional medical help may risk later diagnosis and thus worse outcomes for some health complications. Patients who only visit biomedical doctors for serious illnesses are at risk of not catching diseases as early as they can. Later diagnosis often leads to poorer outcomes, especially for diseases like cancer.

Another important factor to note is the contrast between traditional healing's subjectivity and western care's objectivity. By this we refer to the propensity that curanderas and traditional healers have to rely on their own interpretations, mainly spiritual, of an illness whereas western practitioners rely mainly on verifiable observations or diagnoses. An adherence to a spiritual interpretation of psychological or physical manifestations could also delay needed care of some diseases or illnesses from a biomedical approach.

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## Analysis and Discussion

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### **Ongoing Evolution of Curanderismo**

Curanderismo has always been receptive to new methods and ways of healing. It has incorporated spiritual and medicinal components from various cultures since its inception. Mexican “mestizaje”, intermarriage and cultural blending of European and native peoples, set the stage for a malleable practice. This malleability has been the crux of curanderismo’s blending with biomedicine and modern “curanderismo also incorporates scientific biomedical practices” (Sanchez, 2018, p.149).

Immigration into the United States continues, and the United States will continue to see changes to many of its present structures. It is important to consider many aspects of curanderismo when foreseeing its future in the United States and among its Latino populations. There is an imbalance between the proportion of Latinos needing adequate treatment and having the available resources to be treated, yet the proclivity to depend on curanderismo practices continues to be retained among Latinos. As generations of Latinos begin to join the healthcare force it becomes a more diverse system. It becomes a system that can learn from these diverse perspectives and diverse cultural practices. It also becomes a system that while withholding its opinions of curanderismo, must face the presence of it as either a main source of care or complementary care for Latinos. Considering the proposed dangers of the practice would be pertinent while also understanding the cultural significance and salience of it.

As biomedicine itself begins to evolve into a more holistic practice, the incorporation of traditional approaches or curanderismo practices could be on the horizon. Perhaps the deference to curanderismo in western medicine could allow for a wider consideration and usage of botanicas, healers, and curanderas even in biomedical approaches, especially considering the accessibility factor.

### **Curanderismo is Culturally Significant and Will Continue to be Practiced**

Curanderismo is intimately connected with Mexican and Latin American cultures. This connection is bolstered among immigrant communities as it serves as a connection to home for many. Immigrant communities will continue to cherish this aspect of their culture in the future regardless of access to biomedical services (Sanchez, 2018). Furthermore, many immigrants experience great disparities in accessing healthcare and seek out traditional healers as their last resort. (Cruz, 2022). Curanderismo will therefore persist as a cultural link for immigrants and as a necessary point for healthcare in underserved communities.

As younger Latinos seek out cultural connection and inherit the values inherent to curanderismo, it will be a practice that persists. This also points to the importance of learning from the experiences of those who continue to follow the call of traditional healing and those who seek it out either deliberately or simply as a product of their upbringing. Thinking back to the influence of authoritative values in Latino communities, this also influences the persistence of curanderismo among Latino youth even in the United States (Kiev, 1968).



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## Conclusions Recommendations, & Interventions

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### **US Healthcare Providers Must Understand the Cultural Practice to Provide Better Quality Care**

By uncovering the cultural and even stronger religious ties immigrants may have to curanderismo, healthcare professionals and researchers might better understand the credibility curanderas hold in the eyes of patients and how cultural importance influences health decisions. A greater understanding will lead to a greater quality of care.

### **US Healthcare Providers Must Tactfully Approach Topics of Traditional Healing**

Latinos who use curanderas in addition to visiting biomedical clinics or hospitals, are not forthcoming about their use out of fear. Not learning this information from a patient can lead to severe consequences and it is crucial that providers elicit an honest account of past care and medical treatment from patients. For this reason, it is important for healthcare providers to start

conversations with patients about curanderismo tactfully. Cruz et. all found that patients are willing to discuss their past experiences with curanderas or other traditional healers if the provider showcases an “accepting and nonjudgmental attitude” and does not “make patients feel rebuked or fearful” about this decision (22). With this in mind, the key to providing appropriate care to Latinos living in the United States would be an emphasis on cultural competency among medical practitioners in the U.S. Best practice could look like an open-minded approach to care that is inclusive of curanderismo practices as a patient’s supplemental care rather than approaching the topic without prior knowledge or with distrust. This would motivate the communication of patients and help prevent any real risks from its utilization that may be present.

### **A Mutual Exchange Will Benefit All: Healthcare Providers Have Something to Learn From Curanderas**

The involved role of a curandera in the life of a Latino patient is something biomedicine should at the least acknowledge and perhaps even take pointers from. There are movements in the medical community to both eliminate the social and hierarchical barriers between a patient and a provider and to treat patients more holistically with lifelong preventative care instead of only reactive medicinal care. Biomedical doctors are shedding the white coats that serve as a symbol of power and often isolate them from patients, especially traditionally underserved patient demographics, in hopes of reclaiming the personal and relational role of a healer that is ever present in the curanderismo practice. Further, the American healthcare system is beginning to shift focus to preventative care and a more holistic approach to health. Throughout this transition, doctors have much to learn from how curanderas take the time to immerse themselves in each patient's illness experiences and how they promote health in communities. The white-coated physician is often isolated from the human aspect of treatment and may benefit from looking at how folk healers and curanderas are intimately involved with their communities and the patients whom they treat.

### **The Need-Based Use of Curanderismo in the U.S. Points to Disparities that Must be Addressed**

It is clear that Latinos in the U.S. are medically underserved due to the factors as mentioned above relating to immigration, citizenship, and poverty. Curanderismo has met the need of a failed healthcare system in immigrant communities; however, no one should be denied the choice of healthcare and be forced to traditional medicine. The overarching solution lies in altering the entire U.S. healthcare system to be more equitable. This means ensuring access to physical and mental healthcare across the board for Latinos regardless of documentation status or socioeconomic status. This solution also means the implementation of programs that link cultural resources like curanderas and traditional healers to biomedical practitioners into the U.S. healthcare system. This suggests a holistic approach to care that would respect and acknowledge

the Latino cultures present in the country and would likewise diversify the U.S. healthcare system to encourage Latinos who frequent both kinds of care to become involved in healthcare. These changes would ultimately result in more frequent visits by Latinos to both doctors and healers and the improvement of health overall.

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## Bibliography

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Bloom, Mina. (2022). "Victoria Taufique shows off the candles at the newly upgraded and reopened Botanica Victoria in Humboldt Park on June 27, 2022. Photo by Colin Boyle". BookClubChicago.<https://blockclubchicago.org/2022/06/29/humboldt-park-sanctuary-botanica-victoria-reopens-after-2-year-pandemic-closure-with-a-new-look/>

Coombs, N. C., Meriwether, W. E., Caringi, J., & Newcomer, S. R. (2021). Barriers to healthcare access among U.S. adults with mental health challenges: A population-based study. *SSM - population health*, 15, 100847. <https://doi.org/10.1016/j.ssmph.2021.100847>

Cruz, M. L., Christie, S., Allen, E., Meza, E., Nápoles, A. M., & Mehta, K. M. (2022). Traditional Healers as Health Care Providers for the Latine Community in the United States, a Systematic Review. *Health equity*, 6(1), 412–426. <https://doi.org/10.1089/heq.2021.0099>

Faver, C. A., & Cavazos Jr, A. M. (2009). Church, culture, and curanderismo: Mexican American social work students at the border. In *Social Work Forum* (Vol. 42, No. 43, pp. 41-54).

Karri SK, Saper RB, Kales SN. Lead encephalopathy due to traditional medicines. *Curr Drug Saf*. 2008 Jan;3(1):54-9. doi: 10.2174/157488608783333907. PMID: 18690981; PMCID: PMC2538609.

Kiev, Ari. (1968). *Curanderismo: Mexican-American Folk Psychiatry*.

Munoz, Reyna. (2021). Preserving curanderismo in the Borderland - blog. *The Humanities Collaborative*. UTEP, C. at. (n.d.). <https://humanitiescollaborative.utep.edu/project-blog/curanderismo-borderland>

Murphy, Joseph M. (2010). Objects that speak creole: juxtapositions of shrine devotions at *botánicas* in washington, dc, *Material Religion*, 6:1, 86-108, DOI: [10.2752/174322010X12663379393413](https://doi.org/10.2752/174322010X12663379393413)

- Padilla R, Gomez V, Biggerstaff SL, Mehler PS. (2010). Use of curanderismo in a public health care system. *Arch Intern Med.* 2001 May 28;161(10):1336-40. doi:10.1001/archinte.161.10.1336. PMID: 11371263.
- Ramirez, K. L. (2017). *Curanderismo and Mental Health: Mexican and Mexican-American Beliefs, Attitudes, and Acculturation* (Doctoral dissertation).
- Sanchez, Angela A. (2018) An Examination of the Folk Healing Practice of *Curanderismo* in the Hispanic Community, *Journal of Community Health Nursing*, 35:3, 148-161, DOI: [10.1080/07370016.2018.1475801](https://doi.org/10.1080/07370016.2018.1475801)
- Salazar CL, Levin J (2013). Religious features of curanderismo training and practice. *Explore (NY)*. May-Jun;9(3):150-8. doi: 10.1016/j.explore.2013.02.003. PMID: 23643370  
<https://pubmed.ncbi.nlm.nih.gov/23643370/>
- Wiley, Andrea & Allen, John. (2021). *Medical Anthropology: A Biocultural Approach (MABA)*, 4th Ed. New York: Oxford University Press.
- Zerrate, M.C., VanBronkhorst, S.B., Klotz, J. *et al.* Espiritismo and Santeria: a gateway to child mental health services among Puerto Rican families?. *Child Adolescent Psychiatry Mental Health* 16, 3 (2022). <https://doi.org/10.1186/s13034-022-00439-0>



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Institute for Latino Studies



Institute for Latino  
Studies

315 Bond Hall

Notre Dame, IN 46556

572 - 6311 - 4440

[latinostudies.nd.edu](http://latinostudies.nd.edu)



Brief Produced by:

Iliana Gamboa and Luke  
Holen

Professors Karen Richman  
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