

EVALUATING FOLK MEDICINE:

Stories of Herbs, Healing, and Healers

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HEALERS OF THE ANDES: KALLAWAYA HERBALISTS AND THEIR MEDICINAL PLANTS. By JOSEPH W. BASTIEN. (Salt Lake City: University of Utah Press, 1987. Pp. 198. \$37.50.)

SPIRITUALIST HEALERS IN MEXICO: SUCCESSES AND FAILURES OF ALTERNATIVE THERAPEUTICS. By KAJA FINKLER. (New York: Bergin and Garvey, 1985. Pp. 256. \$27.95 cloth, \$14.95 paper.)

LA HERBOLARIA EN MEXICO. Edited by EDELMIRA LINARES M. (Mexico City: Dirección General de Extensión Académica, Universidad Nacional de México, 1988. Pp.116.)

VEGETALISMO: SHAMANISM AMONG THE MESTIZO POPULATION OF THE PERUVIAN AMAZON. By LUIS EDUARDO LUNA. Stockholm Studies in Comparative Religion, no. 27. (Stockholm, Sweden: Acta Universitatis Stockholmiensis, 1986. Pp. 202.)

FOLK MEDICINE IN VENEZUELA. By ANGELINA POLLAK-ELTZ. Series Americana no. 9. (Vienna: Acta Ethnológica et Lingüística, 1982. Pp. 231.)

SHAMANISM, COLONIALISM, AND THE WILD MAN: A STUDY IN TERROR AND HEALING. By MICHAEL TAUSSIG. (Chicago: University of Chicago Press, 1987. Pp. 517. \$29.95.)

Few subjects fascinate the imagination as does shamanism—exotic, barbaric, tinged with the suggestion of magic that works. And few subjects are debated as emotionally as the question of whether folk medicines prescribed to treat the litany of ailments from hemorrhoids to stomach aches really work or are simply the superstitious garble of ignorant people. In one way or another, the books selected for review here reflect this fascination and this debate. All these books add to general knowledge of folk healing practices, and those by Joseph Bastien, Kaja Finkler, and Michael Taussig do substantially more in challenging the traditional processing and packaging of information about healers and herbs. Bastien writes as an advocate of the integration of folk and modern medicine in the Andes and documents how this integration is being achieved. Finkler

measures the effectiveness of Spiritualist healers in Mexico, and Taussig forces readers to rethink the bases of their knowledge about, and reactions to, shamanism and folk medicine. Taussig's outstanding study, *Shamanism, Colonialism, and the Wild Man*, provided the theme for this review essay: the use of story and history by those who discuss, document, or evaluate folk medicine.

But before exploring these stories and histories of healing and healers, let us consider the patient in Latin America, a player who receives little attention from the authors. Latin American patients live and die in an ecological context different from that of most North Americans. For example, Finkler's study area in Hidalgo, Mexico, is irrigated with untreated sewage drained from Mexico City. Throughout the Latin American region, living conditions produce chronic parasitosis, anemia, malnutrition, and the weakened immune response and general disability that accompany these conditions. Latin Americans often experience a perpetual sense of discomfort and commonly suffer fatigue, intermittent diarrhea, stomach distension, abdominal pain, and malaise throughout their lives. These patients are treated by modern health-care workers who often fail to apply the techniques and therapeutic agents of modern medicine correctly and who lack reliable supplies of medicine and equipment. Moreover, patients rarely comply fully with the therapeutic regimes that they are directed to follow. What is sometimes perceived as "the simple life south of the border" is often characterized by anxieties produced by socioeconomic stress over access to land, inter-ethnic stress, and threats of violence from agents of civil unrest. Such conditions make the definition of good health used by Latin American patients and healers different from the expectations of the healthy state sought by U.S. patients when they consult physicians. Thus understanding of the stories of healers and healing discussed below is limited by the ability to appreciate fully the physiological and subjective state of well-being sought by the patients in these stories.

Angelina Pollak-Eltz, a European who has lived in Venezuela for many years, combines first-, second-, and third-hand stories gathered over twenty years' time with information drawn from other similar (but uncited) books. Her eclectic, chatty *Folk Medicine in Venezuela* offers newcomers to the subject a useful overview of the range of Latin American folk medicine. While the book focuses on Venezuela, much of the information applies throughout Latin America. This work typifies a popular genre of folk medicine books in offering the same "story of folk medicine" that one might hear from many urban, educated, and middle-aged Latin Americans. Although Pollak-Eltz presents generalities on everything from cults to herb vendors, she makes no pretense of employing a rigorous methodology for gathering or processing information.

The advertisement on the book jacket of *Folk Medicine in Venezuela*

claims that “Physicians and pharmacologists in the West may find it a particularly valuable source of information as the author not only lists the local plant and herb remedies, but also identifies them with their scientific names.” The actual value of the specific ethnopharmacopoeic information presented is negligible, however. Pollak-Eltz lists an exotic potpourri of ingredients from dog excrement and crawfish grease to the water left in a donkey’s bucket, and the reader has a better chance of recognizing these items than the herbs listed, whose Latin names were derived by searching for local herb names in a dictionary. This notoriously poor method of identifying plants is common in books of this genre, and the result is that many of the scientific names presented are incorrect.

Pollak-Eltz’s stories of healers and healing are typical of the stories that informants tell anthropologists who are trying to investigate folk healing. Most anthropologists, however, impose order on such stories before presenting them to the public. In contrast, *Folk Medicine in Venezuela* gives readers a good feel for the “real stories” heard by all the authors of the books reviewed here.

Edelmira Linares’s *La herbolaria en México* provides a good introduction to herbal medicine in a country rich in traditions of medicine derived from the diverse heritage of the many indigenous groups participating in national life. It includes eleven papers by major Mexican researchers as well as outlines from six workshops presented during the Primer Semana de la Herbolaria en Mexico, a week-long event in 1986 that brought together herb vendors, customers, health promoters, physicians, and botanists from four regions. Linares’s introduction notes that the use of herbal medicine in Mexico has been growing during recent years, perhaps due to rising prices and the growing bureaucratic complexities of modern clinics. Having studied the Mercado Sonora, the main market in Mexico City, for five years, Linares maintains that herbal medicine is not merely the medicine of the lower classes because customers of all classes can be seen buying herbs from vendors. Other contributions in the book promote the popular, grass-roots aspects of herbal medicine in Mexico. Arturo Argueta provides an overview of the direction taken by ethnobotanical research in the ten years since the landmark Simposio de Etnobotánica in November 1976, where differing schools debated about the directions that should be taken. Argueta argues for the continued support for regional diversity (as opposed to promotion of a single, centrally validated system of herbal medicine) by encouraging local participation in documenting local herb use. This approach is seconded by Bruno Giovanni Parodi, who offers an overview of the objectives and some of the findings of the health promoters working with the Instituto Mexicano de Medicinas Tradicionales Tlahuilli. Miguel Angel Martínez Alfaro describes efforts to compare medicinal plant use by five ethnic groups in the Sierra Norte de Puebla. The

popular workshops outlined include botany for children and techniques for herb propagation and plant identification.

In sum, Linares's *La herbolaria* contains no stories but recounts how academics approach herbal medicine in Mexico. They claim an approach that does not isolate patients and vendors as objects of study but rather integrates all (researcher, vendor, and patient) in the struggle to improve the common good in a manner in keeping with Mexican national heritage.

Luis Edward Luna's *Vegetalismo: Shamanism among the Mestizo Population of the Peruvian Amazon* resulted from Luna's personal quest to understand *ayahuasqueros*, healers who utilize the indigenous hallucinogen *ayahuasca* (a drink made from *Banisteriopsis* with admixtures of other "plant-teachers"). Seventy-two indigenous groups reportedly utilize *ayahuasca*, but this work is the first major study focusing on mestizo use of the beverage.

Like Pollak-Eltz, Luna writes from the perspective of the modern mestizo, but his analysis is more sophisticated. He recounts what he has learned from *vegetalistas* (those who gain their knowledge from plants) in his native Amazonian region. His is the voice of the upper-class city-dweller with a self-proclaimed "outlandish interest" in lower-class healers who draw on jungle and Indian powers (p. 12). Luna describes *ayahuasca* sessions and summarizes informants' accounts of their experience and knowledge. *Vegetalismo* is essentially an annotated handbook of the tools and methods used by *vegetalistas* and also includes a useful review of existing literature on *ayahuasqueros*. Adding to the book's value are black and white photos of *vegetalistas* at work, paintings of *ayahuasca* visions created by Don Pablo Amaringo (a retired *ayahuasquero*), and an appendix of musical notations of sample *icaros* used to call spirit teachers.

Luna describes how *vegetalistas* learn from plant-teachers and how they heal with the help of spirit-teachers. *Vegetalismo* employs the vocabulary that healers use: myths, formulaic case histories and explanations, spirit-helpers, protective cloaks made from tobacco smoke, animal defenders, magical phlegm, darts, and *icaros* songs. Although the book is illuminated by stories from *vegetalistas* and other researchers who have studied *ayahuasca*, it is not a handbook for teaching the reader how to become a *vegetalista*. Rather, *Vegetalismo* recounts Luna's attempt to make sense of the *ayahuasca* experience and thus may help others think of new ways to share the profound and intensely personal experience of *ayahuasca*. Compared to Finkler's study, however, *Vegetalismo* tells little about the patients of these healers or about the larger social context in which healer and patient interact.

Like Taussig's study, Luna's book is filled with stories told by other people. He recognizes the conflict between his effort to present scientific reality and his informants' stories, which are structured by social reality. Luna observes that *vegetalistas* are often great storytellers (p. 44), but he

also notes that his book is based on stories that may not reflect objective reality but may instead “seem to follow a pattern which is repeated again and again, as if it were true” (p. 55). For example, Luna observes that reconstructing the life of healer Don Emilio does not allow for the events to occur as he has told them. Luna finds that Don Emilio and others tell a life history corrected by model life histories of shamans and that they utilize devices to make generic stories their own (p. 46). Luna faults Robert Carneiro’s criticism of Bruce Lamb’s book about Don Manuel Cordoba Ríos, which was based on Carneiro’s claim that Don Manuel could not have had the experience he claimed.¹ Luna states that Don Manuel has given at least three different versions of his life history and argues that the point of Don Manuel’s story (and of similar stories by other mestizo healers) is not to state scientifically verifiable facts but to claim direct access to Indian power.

Luna himself has difficulty in telling and interpreting his own story as apprentice to a *vegetalista*. He recounts his experience of pretending to suck snakes from the ayahuasca pot when told to do so by his ayahuasquero teacher. Luna describes the episode in urban, educated terms as a “theatrical performance.” He also describes his confused discussion with another apprentice, who concurred that no snakes had been visible. Never having actually learned from a plant himself, Luna states “Nothing can be said . . . until we have some kind of understanding as to what these people are really talking about, when they say that the plants themselves reveal their properties” (p. 66). In frustration, he comments, “Reading the anthropological literature I have moments in which I have envied colleagues working with Indian groups, because there the elements seem to fit—or at least they make them fit so nicely” (p. 74). Luna’s attempts to understand ayahuasqueros anticipate the reader’s subsequent attempts to make sense of the same, and as such, they provide a means for reflecting on the ways in which we Westerners try to make sense of the exotic.

Kaja Finkler’s *Spiritualist Healers in Mexico* has two goals: to evaluate the effectiveness of an alternative therapeutic system and to explore the ways in which historical, social, and economic forces foster a therapeutic system. This review will focus on the first goal, a rare one for which Finkler deserves congratulations on pursuing.

The first section of *Spiritualist Healers* describes the history, social organization, beliefs, and rituals of Spiritualism, an anti-Catholic religion established in the nineteenth century that provides health care in Mexico and the southwestern United States. Rituals center around the delivery of “irradiations” (speech delivered by mediums in trance) from Jehovah, Christ, the Virgin Mary, and Father Elías. Patients are treated by healers in trance who deliver the words of spirits prescribing herbal medicines and pharmaceutical preparations. Healers massage clients to “cleanse” them

while observing them. Patients who do not respond to treatment are told that they must become healers in order to be healed, a process requiring regular temple participation and trancing. Although Spiritualists deny the existence of witchcraft, the general population believes that Spiritualists themselves are witches.

In measuring the success of healers, Finkler does not attempt to establish scientifically that a cause of illness has been removed. She relies instead on measuring consumer satisfaction through the stories that clients tell of their illness episodes. Finkler surveyed the clients of two Spiritualist temples. She found that clients were most likely to be female and less-educated, to have large "illness networks" (persons with whom they interact in making therapy decisions during illness episodes) often as a result of migrant status, to have experienced chronic illness, and to suffer from long-standing interpersonal conflict or personal loss. Finkler identified two classes of patients: nonregulars and regulars. The regulars visited the temple even when they were not suffering any symptoms and tended to suffer from pain, anxiety, or depression—disorders that could not be healed by biomedicine or the standard Spiritualist therapies offered to nonregulars.

Of some twelve hundred patient-healer encounters that Finkler observed, 89 percent involved nonregulars and 11 percent involved regulars. She compared patient-healer interactions between regular and healer with interactions between nonregular and healer and found that they were qualitatively different. To her surprise, only one-quarter of the 108 nonregular clients whose cases she followed were satisfied that Spiritualist treatment had helped them. Those successfully treated tended to have suffered from what she classifies as diarrhea, simple gynecological disorders, somatized syndromes, or mild psychiatric disorders. Less than half of the 31 regulars followed stated that their symptoms had disappeared. Yet all the regulars expressed the belief that Spiritualist therapy had helped them. Regular temple-goers explained low cure rates by such statements as "God says he doesn't improve the lot of regulars because they would abandon him" (p. 191). Finkler argues nevertheless that regulars are treated successfully because they are chronically ill patients who slowly relinquish their sick role (as a sick person in the community) to assume a new well role (as a healer in the temple). She does not address the implications of the fact that, in the eyes of the larger society, the sick person has been transformed into a witch.

Finkler attempts to find out why Spiritualist healers succeed when they do. It would seem that success in treating nonregulars and regulars would have a different basis, but she does not seek the bases of success separately. *Spiritualist Healers* presents detailed information on prescribed herbs (inaccurately glossed as "native flora"); however, Finkler's data is unreliable because she did not collect specimens for scientific identifica-

tion but relied instead on a dictionary. Despite including a table listing possible chemical constituents of the herbs, she discounts without analysis the empirical role that herbal remedies might have played. Finkler focuses instead on the symbolic healing potential of biomedical therapeutics versus Spiritualist remedies. She stirs up the debate over non-biomedical therapeutics and cites several authors' views on the subject. Her discussion of "how healers heal" is nevertheless muddled and unconvincing. Questioning whether the success of therapeutics can be analyzed with quantitative research methods, Finkler concludes that her study has contributed to understanding of illness and health by showing that experiential phenomena of illness can only be assessed by analyzing subjective perceptions, that is, patient stories. Finkler recounts numerous stories of patient-healer interactions and patient case histories to support her conclusions. But her isolation and analysis of these stories follow standard anthropological lines, reminding one of Luna's envy of those whose data fit neatly into accepted theories. Although Finkler apprenticed herself to become a Spiritualist healer, little of her own story is readily apparent in *Spiritualist Healers in Mexico*

Joseph Bastien's *Healers of the Andes* is concerned with legitimizing Andean folk medicine so that a constructive dialogue between modern medicine and folk medicine can lead to better health conditions for Andean rural people. For some years, it has been popular for Anglo anthropologists and Latin elites to speak romantically of the wisdom of folk medicine and urge the continued reliance on herbal medicine in rural areas. Others, however, have questioned the motives behind taking such a stance and have criticized it as legitimizing limited introduction of modern health care into rural areas. Bastien is to be saluted for his moral commitment to improving the lives of the subjects of his anthropological study, even though his commitment to legitimizing folk medicine detracts at times from the objective, academic value of the publication. Opening with a *National Geographic*-style first-person narrative entitled "My Journey to the Land of Medicine," Bastien consciously appeals to Westerners' fascination with exotic healers.

Having captured his reader, Bastien moves from his own story to those of three healers and the cases they have successfully treated. The healers who are the objects of this study, the Kallawaya "Lords of the Medicine Bag," have a venerable history. Bastien sketches what is known of their past to enhance understanding of the Kallawaya as health professionals. He then tackles the exotic theories of health and illness in the Andes—the kinds of theories derided by modern doctors. Bastien demonstrates how a seemingly foreign vocabulary is actually used to discuss the universal processes of disease and healing. He does so by providing detailed descriptions in that vocabulary: hot and cold qualities, humoral theories, divination (by tearing open and reading the viscera of living

guinea pigs), the hydraulic system of semifluids and fluids flowing in the body, and the geographic parts of the body-landscape.

The plants used by Kallawaya herbalists are treated in two separate chapters. Bastien has done a thorough job of assigning correct Latin names to these plants, having placed voucher specimens in a major herbarium. Furthermore, plant descriptions are accompanied by high-quality botanical illustrations. This careful work makes Bastien's data useful for botanists and pharmacologists and also qualifies Bastien as a serious ethnobotanist. He collected information on three hundred medicinal plants but presents data on only a third of these in *Healers of the Andes*. Bastien's concern for legitimization seems to have guided his selection of species for inclusion. He chose not to include plants whose uses were debated by Kallawaya herbalists and not to address herbalists' disagreements over plant uses. But in choosing to include only commonly used plants, especially those known to North American readers, Bastien has not provided a full treatment of the Kallawaya ethnopharmacopoeia. He strove to legitimize Kallawaya uses of plant medicines by referring to published data about the chemistry and medicinal uses of these selected species (drawn from a limited review of the literature). Twenty percent of the plants he chose to include are well-studied Old World medicinal plants—including opium poppy, anise, lavender, borage, feverfew, rue, tamarind, and eucalyptus—that have been accepted as pharmacologically active by practitioners of modern medicine. Bastien apparently chose these plants to demonstrate that Kallawaya are using real medicines. While this criterion may convince some readers to respect Kallawaya herbalists, his selection will leave many readers wishing for a list of species chosen on the basis of other criteria. Bastien's treatment of Kallawaya medicinal plants is not sufficient to persuade the reader that these plants produce cures when taken by real patients under treatment by Kallawayan herbalists. Such proof may become available if modern practitioners accept the dialogue promoted by Bastien, however. When in future modern practitioners observe patients under Kallawayan therapeutic regimes and document successes and failures in the use of each species, they will appraise the real relative value of Kallawayan plant-based remedies, a judgment that cannot be made from data presented in this book.

Bastien claims that his book "illustrates that Kallawaya are scientific in their use of medicinal plants." But *Healers of the Andes* does not demonstrate that Kallawaya are scientists, and this excessive claim weakens his case. One does not have to be a scientist to learn from trial and error, and modern doctors seldom operate as scientists themselves, a little-appreciated fact. While the Kallawaya are not scientists, it is clear that Kallawaya herbalists have succeeded in meeting some needs of ill clients who have continued to seek their aid for centuries. By virtue of this

success, Kallaway herbalists merit a seat at the table for dialogue with new health-care providers intent on meeting the needs of the same clientele.

For applied anthropologists, the most useful part of *Healers of the Andes* is Bastien's documentation of his own efforts to encourage dialogue between modern and Kallaway medicine. His work is based on the premise that Andean metaphor and myth can be used to open communication with Andeans to motivate them to seek inoculations, improve hygiene, and consume more balanced diets. The potential impact of using "Indigenous Knowledge Systems" (IKS) as a vehicle for knowledge transfer has also been explored in agriculture extension and health-care systems in Africa. Bastien's experience supports general conclusions that knowledge of IKS can provide modern development workers with a powerful vocabulary for technology transfer. For example, he describes the methodology developed in Bolivian workshops sponsored by the Ministry of Rural Health in Oruro to enable rural health-care workers to identify important health-care problems amenable to public education campaigns and then use knowledge of Andean health beliefs and mythology to develop appropriate instructional materials. In this way, rural health-care workers become active participants in the dialogue that Bastien is advocating. In one example, he describes the development of a comic book that relates a story based on an indigenous legend but modified to inform Andeans about oral rehydration therapy. Community health workers using these instructional aids affirm their effectiveness in reducing infant deaths from diarrhea, although a scientific study has not been completed.

Bastien draws on years of personal experience in offering basic health care to Andeans as well as on his experience with workshops to make specific suggestions on ways to improve Andean rural health care. For example, modern health-care providers could travel regularly to visit clients in their widely dispersed homes, as traditional Kallawayan healers did. Bastien also suggests that modern practitioners follow the Kallawayan healer tradition of accepting "work obligation" in payment for services from clients who lack monetary resources. In sum, he advocates, "Go with the Andean system and improve it" (p. 79). To legitimize healers and ensure their participation in the dialogue, Bastien suggests that they receive licenses from the state. Adopting these and other changes would integrate all health-care providers into local communities and enable the integrated system to meet the needs of clients more fully.

While Bastien stresses the modern-to-Andean transfer of empirical knowledge about physical illness via dialogue between modern and Andean medicine, he also argues that an Andean-to-modern transfer will teach modern medicine a more humanistic approach to the sick. This side of his argument is broached in Andean terms that are less intelligible to

his modern readers: "The second lesson is that modern medical science needs to examine larger contextual settings in order to understand the health process. . . . I have often shown how Kallawayas associate their bodies analogously with the land, irrigation systems, and social organizations. The value of this world view is that they learn about their bodies from reflecting on nature. . . . To heal their bodies, they use ritual to symbolically communicate with environmental, social, and spiritual systems" (p. 93). Bastien asserts that "somewhere between the holistic considerations of Kallawayas and the specialized approach of modern practitioners lies the answer to human health needs" (p. 93). But the ways in which modern medicine has been influenced by the dialogue, except for the approach to transferring modern knowledge, remain undocumented. The dialogue he describes does work as a means for achieving conservation-cum-modernization of medicine as practiced in the Andes.

More generally, Taussig's and Luna's comments on stories and versions of history collected from informants leave the reader with some questions about Bastien's use of healers' stories of their lives and the cases they have treated. Do these stories reflect scientific reality?

Taussig's complex *Shamanism, Colonialism, and the Wild Man* deals with politics on different levels: the politics of power among groups in the Amazonian region during the rubber boom, the politics of power used by shamans, and the politics of power played out in the minds of individuals. He shows how stories can sustain potent political forces. Using stories of his own and others as a tool, Taussig weaves a clever and very human analysis. His account gives the reader the sense of being in the field, struggling to make sense of the statements and actions of foreign "others" living in painful and desperate poverty. The text reflects the "montage principle," as Taussig and his characters drawn from history or field notes "stand outside themselves and show themselves to be actors" (cited from Mitchell, p. 445). This effect to some extent undermines the sense of order that books generally tend to create. Perhaps a quarter of Taussig's five hundred pages contain verbatim accounts of the stories and histories of others. Yet Taussig is constantly present in photos, and he never lets the reader forget that he as author is manipulating the text. His citation from Stanley Mitchell's essay on Brecht² could be applied to *Shamanism, Colonialism, and the Wild Man* as well: "The representation is never complete in itself, but is openly and continually compared with the life represented." In the process of creating his book, Taussig demonstrates what dialogue with rural Colombians can reveal about social reality and the philosophical and historical basis of Western attitudes toward shamanism. These attitudes in turn shape current motives to conserve fascinating folk medicine.

Those interested in Putumayo history will value the book for its scholarly analysis of accounts of Putumayo horrors in the first part of the

book, which is entitled "Terror." Taussig dissects contradictory newspaper accounts, published letters and reports, and inquiry proceedings by the English House of Commons. Indians were represented both as wild and savage residents of ungodly jungles and as innocent and child-like denizens of paradise. Whites were said to carry out unspeakable crimes or were portrayed as just carrying on business. Taussig concludes that the contradictory stories, and the stories that built on them, created a means by which whites were able to inspire terror in the hearts of Indians and each other as well. He argues that the "culture of terror" derived its power from this "epistemic murk."

Taussig then argues that the power of Putumayo shamanism likewise derives from an epistemic murk. In the second part entitled "Healing," Taussig begins by focusing on the colonial history of local saints and how their histories give these saints the power of "Brutal Indians." Contradictory histories in living speech validate the miraculous nature of the saints. For example, Taussig investigates the Virgin of Caloto, also known as Niña María, a sixty-seven-centimeter tall wooden doll that stands on the church altar in Caloto, Colombia. According to the official church history available in a printed brochure, the effigy was brought to Caloto by the Spanish in the mid-1500s. Three times wild Indians attacked the town, murdered whites, and stole the Virgin, whom they revered. Three times the Christians waged bloody combat and succeeded in rescuing her from the savage cannibals. Since then she has performed many miracles, including aiding the town during numerous civil wars. Official and popular history contradict each other, however. Taussig interviewed thirty-two persons of various ethnic backgrounds living in Caloto. Six knew nothing of the Virgin's origin, and only five gave the official history. Fourteen stated that she was an Indian Virgin stolen by whites from the Indians. A few others dated her origin to the nineteenth- and twentieth-century civil wars. One woman described how residents of other towns are now trying to steal her away. Taussig analyzes the twenty-seven stories for their political themes and then compares the image-making stories of Caloto residents with the image-making stories of patients. Shamans provoke images but do not speak of them. Like the wooden Virgin, the shaman is effectively mute. Patients talk about the images the shaman saw, although they themselves did not see any. Taussig argues that socially effective image-making relies on this unstable interaction, which he relates to the historiography of Walter Benjamin.

Another theme that runs through Taussig's inquiry is the way in which wildness is imputed to some "Other" and then appropriated by means of a magical substance in one's command or taken as one's own through historical appropriation. For example, highland curers like Sibundoy and Kallawayá as well as mestizo curers derive their powers from the chaotic and dark lowland jungle. Taussig takes off from this point to

discuss how the elevated derive powers from the underclass. This argument is then linked to the larger theme that the curer manipulates disorder to create his effect. Putumayo shamans use ayahuasca (also known as *yaje*), the hallucinogen of Luna's mestizo shamans, which creates a personal experience of extremely powerful disorder in those who imbibe it. In the final section of *Shamanism, Colonialism, and the Wild Man*, Taussig focuses on the subjective experience of patients who consume the hallucinogen during a curing session and the way in which curers manipulate this disorder. He accurately describes in a masterful presentation the interrupted chaos created by ayahuasca. Instead of casting the curer as the hero who creates order and casts out evil disorder, as is typically done by anthropological analysts, Taussig presents a curer who draws his power from creating and manipulating disorderly montages of experiences. The curer takes the patients, as they experience ayahuasca-induced anarchy within themselves, on a chaotic journey through a space between death and laughter, a journey whose success depends on interruption by the mundane chatter of nonparticipants, the intense interruption by personal hallucinations, and sporadic attention to undirected conversations between participants, including the shaman. Within this intense, socially active theater, the shaman moves as the quintessential human, a mirror who enables the patient to work through his own demons and hopes.

Working the cutting edge of shamanic studies, Taussig has produced an unusual scholarly study in which the author actively questions and undermines the authority of his own text. The stories of patients, the stories of healers, and the stories and theories of the anthropologist are purposefully probed and broken, scattered and planted throughout the text. *Shamanism, Colonialism, and the Wild Man* thus makes for a fascinating reading experience. Taussig forces the reader to rethink just how the magic of shamanism works. He also persuasively challenges those who document and analyze folk medicine to pay more attention to how they link cause and effect and to how stories function in the healing process of folk medicine.

NOTES

1. See F. Bruce Lamb, *Wizard of the Upper Amazon* (Boston, Mass: Houghton Mifflin, 1974); and Robert L. Carneiro, "Chimera of the Upper Amazon," in *The Don Juan Papers: Further Casteneda Controversies*, edited by Richard DeMille (Santa Barbara, Calif.: Ross-Erikson, 1980), 94-98.
2. See Stanley Mitchell, "Introduction" to Walter Benjamin, *Understanding Brecht*, translated by Anna Bostock (London: New Left Books, 1973), vii-xix.