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INTRODUCTION

Many years ago, I became ill and went to the local hospital, which misdiagnosed my appendicitis and sent me home. By the time I was admitted, I was very close to death from sepsis and required nearly a week of intravenous antibiotics to reduce the infection to the point where my burst appendix could be removed. A week after I was released, I found myself back in the operating room due to an abscess formed by infectious material that was left behind during the first operation.

A year or so after this event, I found myself very sick once again, suffering from terrible headaches, weight gain despite eating very little due to a lack of appetite, constant ringing in my ears, menstrual disorders, and many other problems. I went from internists to specialists, who all ran their own batteries of invasive and often painful tests. Each came up with a common diagnosis: “Our tests show that nothing is wrong with you; your problems are all in your head. See a psychologist for some stress-management techniques.”

After several years of this, I began to think that they might be right and it all might be in my head. Then a friend of mine told me that she had been diagnosed with and treated for a systemic candida infection. She told me that my symptoms were similar to hers and suggested I look into it. Sure enough, all of my symptoms came down to a common cause, which was easily treatable. Within three months, I was back to normal and feeling great.

When I returned for a follow-up visit with my endocrinologist, who was treating what she considered the hormonal imbalances causing my menstrual difficulties, I was in for a shock. She told me that she had suspected I had a candida infection, but she believed that this had nothing to do with the symptoms she was treating, so hadn't bothered to mention it. When I explained that all of my symptoms had disappeared, she said that she'd have to run all of her tests again so that she could see where the problems now lay. Nothing I said about how each of my problems had disappeared would satisfy her. Needless to say, I left the office extremely disappointed and feeling very hurt by her attitude—never to return.

This series of incidents, as well as several other minor issues over the following years, led me to a deep feeling of mistrust of our modern medical system. Don't get me wrong; if I were seriously injured in a car accident, there would be no place in the world I'd rather be than in a modern hospital. However, it seemed to me that when a health crisis was involved, modern medicine did pretty well, while when it came to chronic disease or subtle problems that tests couldn't easily and accurately diagnose, the system was lacking. I began to see our system as one of disease management, not health care. Instead of looking deeper to understand the fundamental cause of a medical problem to resolve it, modern medicine simply treats the symptoms of the suspected disease with drugs and surgery until all of the symptoms disappear. I also began to see that doctors were disinclined to believe their patients, despite the fact that a patient is more familiar with his or her own body than a doctor looking into it with diagnostic tools could ever be.

I began to look into various aspects of alternative health care techniques and systems: where they originated, how other cultures looked at health and disease, what alternative diagnostic tools were available and how they worked, as well as how successful they were. At the same time, I began to explore my own beliefs about how healing worked and the power of the mind and spirit in achieving physical health. I became a certified Reiki practitioner and found that I seemed to have a natural talent for the work. I also attended quite a few meditation retreats to

explore my spirituality—and often the lack thereof—along with its possible effect on my health.

It wasn't long after I began to get serious about these explorations that I had the good fortune to be able to retire. I had started a software company with a few friends around the time of my appendicitis. The growth of that company over the following few years had been fueled by the tremendous increase in the use of personal computers in all areas of business and by the success of the revolutionary new idea of computer networking. When the company was taken public, I decided to bow out as CEO, and I took some time off to continue exploring this new direction my life was taking.

Ringling Rocks Foundation

Although retirement gave me the opportunity to travel and continue my pursuits, I found that I wanted a better focus and a new outlet for my explorations. After speaking with a few friends about ways to create a context for my studies, I decided to establish Ringling Rocks Foundation (RRF). I created RRF with a mission to explore the world, documenting and conserving healing practices and spiritual traditions. Although the foundation's programs have evolved over the twelve years that it has been operating, its focus has always been on three main areas: collecting first-person information directly from other cultures, finding ways to help those cultures with whom we established relationships support their traditions, and disseminating the information we collected to the modern public.

Not long after we formed RRF, my friends introduced me to Dr. Bradford Keeney, whom they had met at a psychology conference. In addition to being impressed with his work in the field of psychology, they were also aware of, and impressed by, his work with indigenous healers. They recommended that I read his recently published book, *Shaking Out the Spirits*, to get an idea of what he could bring to the RRF table. He and I immediately hit it off, and he agreed to join us in exploring and documenting not only alternative, but also indigenous, ways of knowing and healing.

Since RRF uses the term “indigenous peoples” frequently, a definition may be in order here. The term has no universal, standard, or fixed definition, but it can refer to any ethnic group that continues to inhabit the geographic region with which it has the earliest historical connection; has maintained, at least in part, its distinct linguistic, cultural, social, and organizational characteristics; and in doing so remains differentiated, to some degree, from the dominant culture of surrounding populations.

Other often-used terms for indigenous peoples include aborigines, native peoples, first peoples, Fourth World peoples, and first nations. However, “indigenous peoples” is the preferred term, as it is a neutral replacement for other terms that may have taken on negative or pejorative connotations through their prior association and use. In addition, it is the preferred term in use by the United Nations. As such, it is the one that the staff at RRF uses.

Profiles of Healing

Brad Keeney told me about Alice Fletcher and Francis La Flesche, who studied many Plains Indian tribes during the early years of the field of anthropology at the end of the 1800s and who, in the process of their research, recorded hundreds of songs and ceremonies on wax cylinders. These cylinders made their way into the hands of the Library of Congress and the Smithsonian Institute’s National Museum of the American Indian, and these recordings later served as reference materials for tribes that had lost these songs during their (often forced) integration into American society in the early to mid-1900s. Without the recordings, vital parts of these tribes’ culture would have been lost. Thus Brad proposed the *Profiles of Healing* book series as one of our initial programs, with the aim of providing a similar record for other indigenous cultures around the world.

The *Profiles of Healing* books are first-person narratives from indigenous cultures around the world. Each volume is the voice of a different culture, telling the story through the healers’ words, as well as visually through photographs, and acoustically through a CD attached to the book.

Traditional anthropological practice requires that the culture be explained by an “authority” in modern terms through lenses that often distort the meaning or importance of any given practice. Allowing the healers instead to speak directly about the aspects of their culture that are most important to them permits the reader to experience the culture as the healers do. While the *Profiles of Healing* books were transcribed and edited from interviews Brad conducted with the healers, each maintains the original voice of the healers as they describe their view of the world.

As Brad went into the field—not only in the United States, but also in Japan, Botswana, Paraguay, South Africa, St. Vincent, Namibia, Brazil, Bali, and many other remote locations—to sit with each healer and listen to the worldview each had to offer, he also recorded the sounds of the community and the healer him- or herself on audio tapes, which were then edited into the CDs included in each book. He also brought along an excellent photographer who was able to take pictures that not only expressed the healers’ spirits, but also respected the culture and practices being recorded.

There was a dual idea behind the series. First, the raw material collected for the books could serve as a historical record of the many indigenous cultures that are in danger. Young people in these cultures are becoming more interested in playing video games and earning money to buy TVs than they are in learning their own language, culture, and traditional forms of healing. In most indigenous cultures, traditional healers have very hard lives where the demands of their calling do not allow them to take on a paying job. As these cultures become more modernized, the people tend to lose their traditional ways of supporting themselves and living off the land, leaving healers without a means of support. Modern material culture, which includes conveniences such as electricity for refrigerators and lights and better access to water, tools, and building materials than are commonly available in such remote areas, can therefore seem very attractive, and it becomes harder as time goes by to find members of the younger generation who are willing to give up a modern life for a traditional one.

Second, not everyone in the modern world can (or wants to) go and sit at the feet of these elders for weeks, months, or years in order to

learn from them. In providing the text of the healers' stories, as well as context through beautiful photography and a CD that offers the sound of their voices and cultures, we felt that we could bring people living in the modern world a glimpse into the indigenous world's ideas on health and healing and their cultural and spiritual view of the world in general. As more and more visitors from outside an indigenous culture, who have little awareness of their impact, start to come into regular contact with people living traditionally, they become incredibly disruptive to the traditional ways of life within the community.

To write this series of books, Brad spent seven years in the field, starting with cultures where he already had ties, gathering stories in the healers' own words, and editing them into book form. He often risked his own health and sanity in order to collect the stories, photos, and sounds from each of these cultures. Many of them put him through rigorous tests to confirm that it was appropriate for them to share their knowledge with this outsider. He spent not only his waking hours on the project, but also many of his sleeping hours experiencing dreams that directed him where to go next. It took time, patience, vision, and persistence to gain the acceptance of the shamans and thus bring their wisdom to the world.

Along the way, I was privileged to be able to join Brad on his trips, meeting and participating in ceremony with these elders and healers. By traveling with him, I learned how rigorous the travel he endured could be, and I also experienced firsthand the rewards of making the effort. These people were a fountain of knowledge, willing to share as much of it as we could understand. They were playful at times, making sure that they, and we, didn't take all of this too seriously. At other times, they were serious, making sure that the proper respect was shown for their ceremonies and the knowledge being shared. They were outgoing, unconditionally accepting me as one of their own from the time I arrived and for the entire time that I was with them.

This book was created from the *Profiles of Healing* series as an introduction to several indigenous cultures and their healing practices and, as such, stands alone as a gateway to each of them. Every chapter

contains carefully chosen excerpts and images from a volume of the series that will give you a taste of that culture and its healing practices. If the stories in these chapters touch you, you can find more of the information in the original full-length books, including suggestions for further reading.

Observations on Indigenous Healing

I am not an accredited anthropologist, nor do I profess a complete understanding of any of the cultures represented in this compilation. However, in spending time with many of the individuals described on these pages, I have come away with my own insights and threads that connect these cultures and healers with those of us living in the modern world.

Healing in an indigenous culture is inextricably tied to that culture and its worldview. Often, healers are the leaders of their communities. Their worldview is one in which body, spirit, and mind are not separate ideas or parts, nor are cultural practices separated from healing practices or language. This viewpoint is as important to these cultures as are the separate institutions we have in the modern world: hospitals with doctors and nurses for physical healing, churches and temples with priests for fostering spiritual practice, families with parents for emotional and social training, and educational institutions with teachers for training the mind.

In contrast to our separate institutions for healing and education, indigenous cultures' healing and educational practices revolve around the family and community. Although there are specialist healers, just as there are farmers, herders, fishermen, and others who make a functioning village, the entire community takes part in turning a child into a whole functioning member, with an intact body, spirit, and mind. Often, being a healer is a part-time job, undertaken only in times of need. Just as often, healing is regarded as a community-based event, occurring in a village-wide dance or ritual that heals all members and brings them back into correct relationship with one another.

This is not to say that individuals don't go to healers for one-on-one sessions. In the case of a severe or prolonged illness, they will go directly

to the healer for a cure. Because of the worldview held by these indigenous cultures, the cure may be an herbal one, a psychological or social one, a ritual one, or a transmission of energy. There is no sense that it is wrong, silly, or strange to believe, for example, that making up with someone you've had a falling out with will relieve your physical symptoms. Nor is it considered weird to believe that sitting on a drawing will make your illness leave your body and settle into the drawing, which can then be destroyed, taking your illness with it.

Having personally experienced the relief resulting from indigenous cures that many in the modern world would say are impossible, I have to agree with the wise ones who say that on a very basic level, whatever works, works. In anthropology, the term "going native" refers to scientists who have adopted the ways of the culture they are studying and are no longer considered "objective observers." So you can say that I've gone native and my opinion isn't valid as an objective measure. You can also say that these cures are just placebos, or explain some of them away with the scientific basis for an herbal cure, or postulate that a particular psychological problem can lead to a particular physical illness. But the true bottom line is that it doesn't matter why it works, or even that an outsider would say that healing has actually occurred. If we feel healed of our illness, we are grateful. Or, at least, we should be.

One of the easiest objective measures of whether or not an indigenous healer is a good one is if he or she can tell you what is going on before you speak. In a modern doctor's office, you tell the doctor what your symptoms are, when they started, and what you've previously done to try to cure them. In indigenous practice, the healer tells you these things as a way to establish trust so that healing can take place. From a modern person's point of view, seeing this occur with great specificity was enough to help me get over my need for explanations of how, why, and what had just happened when I walked away healed.

In our modern culture, we are often "touch starved." In indigenous cultures, however, touch is a constant between both friends and family, from hugs to hand holding to massage. Healers "lay on hands" to diagnose, as well as treat, illness and it is not considered improper no

matter where on the body they touch. Touch is often used just to create a connection between the healer and the patient, so that there is a feeling of trust as well as the possibility of obtaining information that would otherwise not be available to the healer.

Most indigenous cultures have an ongoing relationship with God based on love. Prayer is a constant part of life, and it is considered necessary, as it connects each individual to God. Prayers are expressions of gratitude, conversations about proper conduct, and requests for food, water, or healing. Prayer can be ceremonial or it can occur in temples or churches, but more often it is just a simple conversation between an individual and God. It is not considered crazy for a healer to claim to be speaking with or for God. Often, when an indigenous healer speaks for God, his or her voice and even facial features change to indicate which aspect of God he or she is connected to.

Information vital to the survival of the culture is obtained by speaking with God through prayer: making the connection between hunter and hunted, bringing rain to those who ask for it, and teaching healers about the cures necessary to heal the sick. Plants giving visions of how they can be used for healing and animals sacrificing themselves to provide food are normal occurrences in indigenous cultures. These cultures believe that God loves them enough to want to ensure their survival and, as a result, answers these prayers for the benefit of the community.

God is the purest love in most indigenous cultures, and God's love for us is expressed in ways that modern citizens would consider supernatural. God wants all of us to love each other, and gives us many ways to relate with God and with each other. Most indigenous cultures believe that we all share the same god, even if we use different names for the same entity. Most of the individuals within these cultures also believe that when they speak of many gods, each of them is simply an aspect of a much bigger God.

The healer in these cultures has a deeper relationship to God based on his or her ability to enter the state of consciousness where healing information is transmitted, but all people are healers in their own way. It is up to the individual to decide whether or not to develop the capacity

to deepen that relationship to the point where he or she can be of specific aid in healing his or her fellows, and to accept the calling if and when it comes.

Those who are chosen to be healers are called to serve because they have a better aptitude and/or sensitivity for it, although everyone heals (or harms) others all the time. It's just the same as professional singers being better at singing through aptitude and training than others, although everyone can sing. Each of us has ways of healing others—through music, art, writing, or simply by giving another a smile or hug at just the right time. When a shaman speaks of “being chosen,” he or she is referring to the specific calling he or she felt to allow healing to be the major path in life from that time forward. There are also cultures in which the individual is called to be a healer after his or her children are grown and there are fewer practical demands.

A shaman's power is believed to come from God and, if misused, can be taken away by God. This is especially true when the healer works by energy transmission. The shaman's power may manifest energetically through sucking out the illness, laying on hands, or blowing health into the sick part. In many cultures, the healers who are most prized are those who can heal by touch. They are considered to be the strongest healers and the ones most in danger of losing their power if it is used unwisely or they do not keep themselves pure.

The energy flow in a healer can be evident by a simple trembling of the hand to diagnose where an illness lies or an ecstatic dance that takes over the entire body such that the healer's body shakes with that of the patient. There are also healers who simply lay their hands on the patient while the energy flows invisibly and nearly undetected. Some patients may experience the energy transmission as a tingling sensation or a feeling of heat or cold. In most cases, the energy flow is completely involuntary once a connection is established between the healer and the patient, although in some cases it is consciously maintained and directed by the healer.

In order to make a connection with a patient, healers usually enter a state of mind that is different from the ordinary state of consciousness.

There are many means of entering such an altered state, including the use of sound, drugs, fasting, or simply inhaling smoke. While some cultures use drugs such as peyote and ayahuasca as a means of entering the healing trance, they are not used in every case — even in cultures where the practice is considered conventional. Depending on the severity of the illness and the cultural practices of the healer, different levels of trance state may be necessary for each treatment.

Sound is a common way for a healer to enter a trance state, and it may be brought on by singing, making random sounds, chanting prayers, banging hollow bamboo poles on the ground, clapping, or drumming. The healer, helpers or apprentices of the healer, or the community at large may make the sound. In some cultures, it is believed that the more people participate in the healing, the more power the healer will have at his or her disposal and, therefore, the more powerful the healing will be.

In short, any process that allows the healer to connect deeply with his or her patient, to understand what has caused the illness, and to provide an answer to allow healing to occur is completely valid. I invite you to expand your ideas of what a healer looks like, what processes may be used for diagnosis and treatment, and, in general, what health and healing mean to you.

Shamans of the World

The chapters in this book are arranged in ascending order of observable energy, from the healers who mainly use traditional or herbal medicines and barely observable trance states to the wildly ecstatic trance dances of the Bushmen. In this way, I hope that by the time you finish, you will be able to take the energy of all of the healers you've encountered with you into your everyday world. Although this arrangement is imperfect, since healing techniques can run through a wide range of styles in both the individual healers presented and the cultures as a group, it is as good an arrangement as any.

We start with Walking Thunder, a Diné medicine woman from New Mexico who uses herbal remedies as well as ceremonial sandpaintings and chanting to effect her cures. We then move on to João Fernandes de