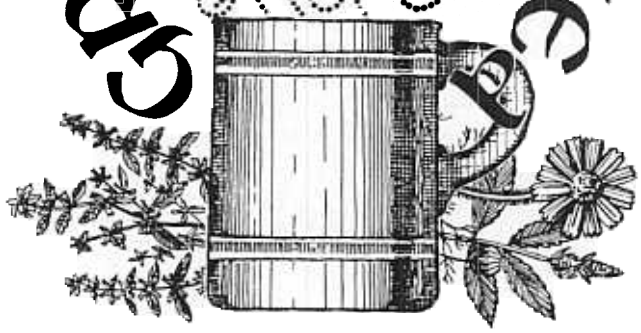
MEXICAN HERBAL REMEDIES

STUDY GUIDE

The University of Texas
Institute of Texan Cultures
at San Antonio

Grandmother's Tea



MEXICAN HERBAL REMEDIES

STUDY GUIDE

JOE GRAHAM

For use with The Institute of Texan Cultures' slide set or filmstrip and audio tape

The University of Texas
Institute of Texan Cultures
at San Antonio

Joe Graham was the Folklorist-in-residence at
The Institute of Texan Cultures, 1977-79.

Institute of Texan Cultures
at San Antonio
801 South Bowie at Durango
P.O. Box 1226
San Antonio, Texas 78294
512/226-7651

Jack R. Maguire, Executive Director
Pat Maguire, Director of Publications
and Coordinator of Programs

This publication was made possible, in part, by
a grant from the Houston Endowment, Inc.
Printed in the United States of America

contents

introduction

This production is designed to acquaint the student with the use of herbal remedies in the Mexican American culture. It also provides the occasion and the stimulus for a discussion of medical practices in general and for an interesting and potentially rewarding excursion into folk beliefs. While the information in the presentation is not controversial, the discussion and questions which may follow can touch on potentially sensitive subjects. The material in the "Supplemental Reading List" section of this guide offers interesting and useful information for those who would like to pursue the subject further.

HERBAL REMEDIES IN HISTORICAL PERSPECTIVE

The pharmacopoeia or contents of the "medicine chest" did not change significantly between the time of the Greeks and the advent of modern medicine. While there were some significant break-throughs in medicine in the 19th century which permitted the control of some of the more serious illnesses such as smallpox, it wasn't until the 20th century that many illnesses were curable or even controllable. Vaccinations against smallpox became popular in England in the 1820's, the germ theory of disease was verified in the 1850's and 1860's, antiseptics were introduced in the 1860's, the tubercle bacillus and cholera bacillus were discovered in the 1880's, and the relationship between mosquitoes and malaria was discovered in the late 1890's. But it wasn't until well into the 20th century that significant changes occurred in general medical care. World War I saw the development of controls for typhoid, tetanus and diptheria. The 1930's saw the coming of sulfa drugs (first miracle drugs), and World War II ushered in the era of antibiotics such as penicillin.

Prior to the development of these new medicines, people in the United States and European countries were dependent upon substances found in plants, animals or minerals to treat their illnesses. Europeans who came to the New World were greatly impressed with the knowledge of herbs found among the Indians of the United States and Mexico. As late as 1829 Sam Houston preferred the treatment of the Indian medicine man to the ministrations of a nearby army hospital when he became gravely ill from what was probably malaria or typhoid fever. Many of the herbs used by the Indians of both the United States and Mexico found their way into the European treatments. Occasionally these Indian groups and their present-day descendents still rely on herbs as medicines. Many Mexican American children have been treated with herbal remedies.

While most of the drugs and patent medicines now dispensed by pharmacies in the United States and in Europe are the product of chemical processes, some are made from plants and animal products. Many modern drugs were developed by isolating the active agents in herbal remedies and then producing them synthetically.

William Withering, a medical doctor in Shropshire, England, discovered digitalis, an important drug in the treatment of dropsy and heart disease, by observing that the country folk treated themselves with a tea made from the leaves of the foxglove plant. He experimented with it and found that it worked. Thereafter, it became included in the British pharmacopoeia.

A number of modern pharmaceuticals have come from herbs used as remedies by different Indian groups of the Americas. For example, Ipecac is now used to produce emetine, a substance used in emetics, expectorants and amoebicides. Curare and quinine, both substances from tree barks found in South America, were used by Indians for centuries before western medical science discovered them. Curare is used as a relaxant in shock treatments and in certain mental illnesses, and as an anesthetic for surgery. Quinine, of course, has long been important in the treatment of malaria.

Not all herbal remedies, of course, are effective because of their pharmacological value. Many are placebos, or pharmacologically inert substances, which produce their effects as a result of the belief the patient has in the person administering the substance. Too, some herbs are dangerous in the hands of those who do not know how to use them. Teachers should warn students *not to experiment!*

FOLK BELIEF OR SUPERSTITION?

"Folk belief" and "superstition" mean essentially the same thing, but the term "superstition" carries with it a negative, judgmental connotation not present in "folk belief."

Teachers need to be aware that this filmstrip will probably stimulate the discussion of a number of beliefs which differ from his/her own or from those of the majority of the class. This is particularly true if those students are from various cultural or ethnic backgrounds. To label those beliefs as "superstitions" is to judge not only the belief but also the believer, and by extension, even his culture.

THE FUNCTION OF FOLK BELIEF IN SOCIETY

Folk belief serves an important function in any culture. It often provides the answer to "why" or "why me" questions in otherwise seemingly inexplicable happenings. When we know the why, we at least *feel* that we know how to control our fate.

When their knowledge and skill are not adequate to insure success or to prevent catastrophe, people call upon powers beyond their own. They may say a prayer, repeat a magic incantation, perform a ritual, cross their fingers, hold their breath, wear "lucky" clothes or carry a rabbit's foot. The greater the risk, the more apt they are to rely upon these acts to insure success. Since illness often involves the greatest risk (a threat to life itself), one can expect seemingly irrational behavior on almost everyone's part from time to time.

WHAT IS FOLK MEDICINE?

Folk medicine consists of the cures, remedies and beliefs passed from person to person and usually from generation to generation outside such formal institutions as medical schools, professional associations and libraries. Folk medical beliefs and practices persist because people continue to use them often in spite of the opposition of organized medicine and scientific medical theories.

Folk medicine is based on *belief* and *experience*, rather than scientific verification and evaluation. Those who believe in and use folk medicine do not require an explanation of why or how it

works. They are satisfied that it works.

The scientific approach to the use of aloe vera, for example, differs considerably from the folk medical approach. The scientist, when he hears that aloe vera may have curative properties, experiments with it to make sure that it is the aloe vera itself which has medicinal value and not some other factor. He then attempts to isolate the active agent, so that it might be mass produced, perhaps even synthetically.

The folk approach is different. Consider this personal example. A friend tells me that aloe vera is very good for burns and cuts. I consider my friend trustworthy, so I try it. It seems to work, so I use it for burns and cuts when a member of my family needs it. I do not ask *why* it works. It works, so I use it. I tell my friends about it, and they use it. My children grow up using it, and when the time comes, their children will probably use it.

Laymen in our own scientifically oriented society accept scientific medical theory and practice in much the same way the folk accept folk medical beliefs and practices. As we grow up we adopt the belief systems of our culture, including medical beliefs. We are taught of the existence of bacteria and viruses, though we never see them. We accept them because the authority figures in our culture, scientists, tell us that they exist. And we find experiential verification of the belief system when medical doctors treat our illnesses using techniques based upon the germ theory of medicine. Most of us rely upon "miracle drugs" without knowing why or how they work. But we try them and find they work, so we use them, and recommend their use to others. How many of us, for example, understand how aspirin works to relieve pain and to lower body temperature? When a doctor successfully treats us for strep throat, it validates our belief not only in the doctor but also in penicillin, in the existence of bacteria (which we probably have never seen but accept on faith), and generally in the scientific approach to solving problems.

A FOLK MEDICINE SYSTEM

When we think of folk medicine in the Anglo culture, we think of a random collection of beliefs and practices, often unrelated to the dominant medical system in our society. We think of removing warts, of curing hiccups. In most cultures, however, folk medicine is usually a whole system of fairly well organized, fairly consistent and internally logical ideas which constitute a theory of medicine—ideas about what causes illnesses, how to cure them, and about man's relationship with his human, natural and supernatural environments. The folk medical belief system is usually consistent with other aspects of the culture, particularly religious belief. The folk medical belief system helps members of different societies to meet their own medical needs, as they define them.

Folk medical systems have different types of practitioners to treat different types of illness, just as in our own medical system. Every medical system has a hierarchy of healers. In our society certain types of illnesses are treated at home—headaches, mild colds and stomachaches. Serious illnesses, however, require the services of a specialist—the medical doctor.

Both Anglos and Mexican Americans rely on patent medicines found in supermarkets, drug stores and elsewhere. Many Mexican Americans rely extensively on herbal remedies. These herbs and patent medicines are used to treat minor ailments which, though causing discomfort, are not life threatening. In the Mexican American culture, folk medicine for minor ailments is usually prescribed and administered by older

women. This level of folk medicine is the subject of this production.

There are also specialized treatments by practitioners. In Anglo culture these practitioners are nurses, paramedics or midwives. In the Mexican American folk culture, these practitioners are *parteras* (midwives), *sobadores* (masseuses), or some older women who have a greater understanding and experience with folk cures than most other adults in the society. In folk medical systems these are usually part-time or semi-professional practitioners, often unpaid. The illnesses they treat are *potentially* life threatening if not treated. There are four or five folk illnesses in the Mexican American culture which have no clear counterpart in Anglo culture and are treated with folk remedies. Both the illnesses and cures are looked upon as "superstition" by most Anglos (particularly doctors) and even many of the less traditional Mexican Americans. Any discussion of herbal medicines is likely to bring up a disscussion of one or more of these illnesses, if there are Mexican American children in the class. In such a situation, some knowledge of these illnesses and their remedies might prove very useful.

Serious, life-threatening illnesses require the knowledge and skills of the full-time, best-trained, most skilled practitioners. These healers are the highest authorities in questions of sickness and healing. In secular Anglo society they are the medical doctors, including psychiatrists. In American Indian societies they are the medicine men or shamans, sometimes called "witch doctors," a sad misnomer with strong negative overtones. In Afro-American culture they are the conjurers and root workers. In Mexican American culture they are the *curanderos* (male) and *curanderas* (female). Among Appalachian whites they are the Granny Women. These trained practitioners have special knowledge shared by relatively few in the society. And, of course, they have access to the knowledge shared by the semi-skilled practitioners and the other adults in the society. In societies where some illnesses are thought to be of supernatural origin (and this includes a majority of societies in the world), these practitioners are thought to have supernatural powers with which they combat illnesses. This is true in many of the folk cultures in Texas.

Teachers are faced with a difficult situation when asked by children about certain elements of folk belief, such as witchcraft. It is wise to be tolerant of these beliefs. Certainly it is not wise to have the student feel "put down" or laughed at because he believes differently from the majority.

Again, folk medicine in most groups is a system of beliefs, theories and practices, not just a disconnected and random collection of "quaint" beliefs shared by the "superstitious." Many Mexican Americans are reluctant to talk to Anglos about their folk medical beliefs because of the fear of being labeled "ignorant" or "superstitious."

They are more willing to discuss home remedies *(remedios caseros)*, including herbal remedies because most people in the majority culture have home remedies and accept the curative value of some herbs.

SOME COMMON MEDICINAL HERBS USED BY MEXICAN AMERICANS

Included here is an abbreviated list of common herbs used by Mexican Americans. Some of these plants are native to Texas, while others have been brought from Mexico and elsewhere. In some parts of Texas, almost every family grows some of them in the house or garden. In other areas, particularly the larger cities, herbs, usually dried

and packaged, are available for as little as 50¢ per ounce in small shops called *yerberías* or *boticas*. While some of these small shops may be listed in the Yellow Pages, most are not. Larger suppliers may offer as many as 250 herbal remedies. These often offer a number of oils of all kinds and other such remedies including some of the more popular patent medicines.

Medicinal herbs:

ajo (Allium sativum)—Garlic. Used as a food and also to treat earache and to soothe ant and other insect bites. A pod is cut and the freshly cut side is placed on the bite or scratch.

cilantro (Coriandrum sativum)—Coriander. Used as a tea made from boiling the leaves of the plant. Used primarily as a laxative. It is also used to flavor foods.

estafiate or *istafiate (Artemisia tridentata* or *Artemisia mexicana)*—Sagebrush or sage. Taken as a tea made from the leaves and stems of the plant. Used as a remedy for a number of ailments including diarrhea, nausea, gas, fever, headache, ulcers.

gobernadora or *guame (Croton corymbulosus)*—Greasewood or tarbush. Taken as a tea made by boiling leaves and stems of the plant. A strong purgative; also thought to be effective in treating cancer, kidney problems, arthritis and many other ailments.

manzanilla (Anthemis nobilis)—Camomile or chamomile. Taken as a tea made from the leaves of the plant. Used as a remedy for ailments including asthma, colic, bronchitis, upset stomach.

poléo (Hedeoma drummondii)—Pennyroyal. Taken as a tea made from leaves and stems of the plant. Used as a remedy for a number of ailments including stomach gas and cramps, colic, congestion and to settle nerves.

romero (Rosmarinus officinalis)—Rosemary. Taken as a tea made from the leaves and stems of the plant. Used as a remedy for a number of ailments including stomach cramps, headaches, nerves and to stimulate an appetite.

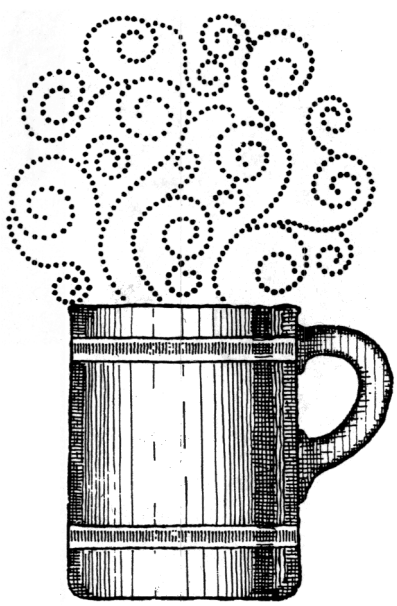
té de naranjo (tay day nah rahn ho)—orange leaf tea, made by boiling leaves from the orange tree in water and sweetening it with sugar or honey. It is used for a number of maladies.

yerbabuena or *hierbabuena (Mentha spicata)*—literally, "good herb." Spearmint. Taken as a tea made from the leaves of the plant. Used as a remedy for many different ailments including upset stomach, colds, colic, cramps, headaches, nausea.

zábila (Aloe vera)—Aloe vera. The leaves are split and the jelly contained therein is rubbed onto burns or cuts. The leaves may be heated and placed on aching teeth. It is also made into a tea for internal disorders. Also has a number of other uses.

study questions

1. What is medicine?
2. Why did people a hundred years ago rely on herbs as medicines?
3. Why do some people still use herbs as medicines?
4. Do you know anyone who uses herbs as medicines? Where or how did they learn about folk medicine?
5. What is used in your home to relieve a headache? stomachache? earache? toothache?
6. Where do modern medicines come from? Who makes them?
7. When should we use medicines?
8. Why is it important to be careful with all medicines?
9. What are some good rules for the wise use of medicines?
10. Who decides when we are sick enough to go to the doctor or stay home from school?
11. How do people become doctors? nurses? dentists? psychiatrists?
12. What do doctors do?
13. What do nurses do?
14. What can doctors do that nurses aren't permitted to do?
15. What duties do nurses perform that parents usually do not?
16. What do pharmacists do?
17. What are some cures for hiccups?
18. Does anyone know a cure for warts?
19. What is superstition? folk belief?



learning activities

1. Have students list folk cures with which they are familiar and share them with the class. The teacher may encourage an interesting discussion by asking class members for cures for warts, hiccups, nosebleeds or headaches.

2. Have students ask their parents, grandparents and other adults in their neighborhoods about home remedies. These should be written and brought to class to share and discuss.

3. Lead the students in recognizing cultural differences in their folk medical beliefs through sharing information. This should be done in a positive, supportive way for all students.

4. Bring to class and grow some of the more common herbs used for remedies: aloe vera, mint, camomile, pennyroyal or others easily obtainable.

5. Assist students in making a scrapbook of pressed medicinal herbs.

6. Assign groups of students bulletin board displays of medicinal herbs or modern medicines.

7. Take the class on a field trip to a local pharmacy and have the pharmacist explain about patent medicines and prescription medicines, where they are made and how they differ from one another. The teacher may choose to invite the pharmacist to visit the class to talk about his products.

8. Have students make a written collection of different folk beliefs about good and bad luck: black cats, walking under ladders, breaking mirrors, rabbits' feet and others. Ask the students to give oral reports.

9. Suggest that students may visit a health food store and review the herbs that are sold there. Compare today's health food store with a *yerbería.*

10. See if there is a botanist from a nearby college or botanical garden that might visit the classroom. Some botanists—in addition to knowing scientific facts about plants—know good anecdotes about uses the plants have had in the past and the present.

useful terms to know

curandero (coo ran day′ro) (male) or *curandera* (coo ran day′ra) (female)—the most knowledgeable and skilled practitioner in the Mexican American folk medical system. Is believed to have a special gift of healing as well as a great knowledge of herbal remedies.

folk belief—beliefs which exist in a community and are passed from person to person and even generation to generation without any institutional guidance or control to teach or maintain them; i.e., not taught in schools, churches or other such institutions.

mal de ojo (mahl day o′ho)—this term is often translated as the "evil eye," an incorrect translation. "Sickness from the eye" is a better translation, since it is an illness syndrome caused inadvertantly (never malevolently) by people with a "strong" gaze i.e., a piercing look, usually attributed to strong electricity or magnetism in the eyes of certain individuals. Children and women are particularly susceptible, though men, animals and even inanimate objects may be affected. It is believed that this folk illness can be cured only with folk remedies.

mal puesto (mahl poo es′ to), or *brujería* (broo hay ree′ah)—witchcraft or hexing.

placebo—a pharmacologically inert substance given as "medicine" by an authority figure (such as a doctor or *curandero)* to a sick person. It achieves the desired effects through the patient's belief or faith in the authority figure and his remedies.

remedios caseros (ray may′dē os cah say′ros)—household remedies

sóbador (sō′ bah dōr)—a folk healer who specializes in massaging tired, sore and sprained muscles. He sometimes sets fractured bones.

susto (soos′tō)—an illness syndrome caused by severe fright. It is believed that this folk illness can be cured only with folk remedies. It is thought to be fatal if not treated in time.

yerbera (ē ĕrr bĕr′ah)—a person in the Mexican American culture who knows much about medicinal herbs.

yerbería (ē ĕrr bĕr ē′ah)—a shop that specializes in medicinal herbs. Another term for this type of store is *botica.*

supplemental reading list

Works available in most libraries:

Clark, Margaret. *Health in the Mexican-American Culture: A Community Study.* 2nd ed. Berkeley: University of California Press. 1970.
This study among Mexican Americans in California puts their folk medical beliefs and practices into cultural and social perspective. It provides a description of community life, educational levels, occupations, religious affiliations and family life. The last two chapters are devoted to sickness and health.

Kiev, Ari. *Curanderismo: Mexican-American Folk Psychiatry.* New York: The Free Press, 1968.
This book relates the folk practices in San Antonio to practices of Mexican Indians, Spanish and other European peoples. Lengthy discussion of the folk concepts of illness causation and cure.

Latorre, Dolores L. *Cooking and Curing with Mexican Herbs.* Austin: Encino Press, 1977.
A popular study of how Mexicans in the state of Coahuila use various herbs. Contains an index and list of herbs with their English, Spanish and scientific names. A good source of Spanish terms for illnesses and herbal remedies.

Madsen, William. *The Mexican Americans of South Texas.* New York: Holt, Rinehart, and Winston, 1964.
This study puts the folk medical beliefs and practices into the social and cultural context of South Texas. It offers a brief history of the region and of the cultural conflict which still exists.

Rubel, Arthur J. *Across the Tracks.* Austin: The University of Texas Press, 1971.
A comprehensive study of folk medicine in its social and cultural context in South Texas. Contains a brief but adequate history of the area, a description of social relations and economic conditions, and a thorough description of the concepts of sickness and healing, as well as the healers.

"Midwives and Granny Women." In Eliot Wigginton, ed., *Foxfire 2.* Garden City: Anchor Press, 1973. pp. 274-303.
A description of midwifery and folk healing in Rabun Gap, Georgia.

Works available primarily in university and large libraries:

1. **Curtain, L. S. M.** *Healing Herbs of the Rio Grande.* Santa Fe: Laboratory of Anthropology. 1947.
This is the most complete study of herbal remedies of the southwest region to date.

2. **Dodson, Ruth M.** "Don Pedrito Jaramillo: The *Curandero* of Los Olmos." In Wilson M. Hudson, ed., *The Healer of Los Olmos and Other Mexican Lore,* Texas Folklore Society Publication 24. Dallas: Southern Methodist University Press. 1951. pp. 9-70.
This is a good but brief biography of Texas's most famous Mexican American folk healer *(curandero).*

3. **Hand, Wayland D.** *American Folk Medicine.* Los Angeles: University of California Press. 1976.
This book is a collection of essays on folk medicine in Mexico and the United States—Indian, Mexican, Mexican American, Amish, etc.

4. **Kelly, Isabel Truesdell.** *Folk Practices in Northern Mexico.* Austin: University of Texas Press. 1965.
This volume examines the health-related beliefs and practices in Northern Mexico, practices which have much in common with those in Texas.

5. **Saunders, Lyle.** *Cultural Difference and Medical Care.* New York: Russell Sage Foundation. 1954.
A study of folk medical practices among the Hispanics of New Mexico. A thorough discussion of the folk concepts of illness causation and cure.

6. **Torrey, E. Fuller.** *The Mind Game: Witchdoctors and Psychiatrists.* New York: Bantam Books, Inc., 1973.
This eminent psychiatrist compares the folk healing techniques including those used by Mexican Americans, with psychiatric practices.

7. **Vogel, Virgil J.** *American Indian Medicine.* Norman, Oklahoma: University of Oklahoma Press. 1970.
A survey of the folk medical practices of many North American Indian tribes. Thorough and readable.

how to show the audio visual presentation, grandmother's tea

VISUAL

Slide Set—The slides are numbered in sequential order for your convenience. To project properly, the number should appear in the upper, right-hand corner of the mount on the side away from the screen. Since each slide will be projected for a very short time, the use of an automatic projector is advised.

The filmstrip may be projected through any standard 35mm filmstrip projector in the conventional way. The strip includes a "focus" frame before the material begins.

AUDIO

A short audible tone, a "beep," is used as a cue to change the picture. The first such tone occurs just before the opening music, and you should project the first picture at this point. The picture changes are also numbered and marked with a slash (/) in the accompanying audio script.

Open Reel—Full track monaural recorded at 7-1/2 i.p.s. It may be played on any open-reel tape player.

Cassette—Half-track monaural recorded at 1-7/8 i.p.s. If no sound is heard after sufficient tape has played to get past the leader, fast forward to about 1/4 from the end of the tape, turn the cassette over, and play on the other side. This is necessary because only one side of the tape is recorded.

audio script

This is the audio script of the production. The numbers refer to an identification and credit list following.

FRAME NUMBER	AUDIO SCRIPT	VISUAL
1.	/Credit/	1 
2.	Las Yerbas De Mi Abuela/	2 
3.	I'm Linda Martinez. One of my favorite places to visit/	3 
4.	is my grandmother's house. She lives in the same town that I do,/	4 
5.	and I see her often. Grandmother tells me many interesting stories/	5 
6.	and she teaches me very useful things. She teaches me about special plants—/	6 
7.	plants she uses to take care of me whenever I feel a little sick, or when I'm hurt. She calls these plants medicinal herbs./	7 
8.	Some people call grandmother a *yerbera* because she knows a lot about these medicinal plants./	8 
9.	She makes special teas from different herbs,/	9 
10.	and she uses the herbs in other ways to help people feel better./	10 

11. The knowledge about these medicinal herbs has been in our family for a long time. Grandmother learned them from her mother and her grandmother,/

12. and they learned them from their parents./

13. Grandmother says that some of her herbal knowledge originally came from our Spanish ancestors. A long time ago the people in Spain and all of the countries in Europe grew their own herbs in gardens./

14. When the Spaniards came to the New World, they brought their medicinal herbs with them, and they found new medicinal herbs in America./

15. The Spaniards brought plants like *manzanilla*, which is called camomile in English./

16. Grandmother makes camomile tea, which is very good for a stomachache./

17. She gave it to me when I was a baby if I cried and could not sleep./

18. Now she gives it to me when I eat too much or eat the wrong things and my stomach hurts./

19. The Spaniards also brought rosemary, lemons, onions, garlic and oranges to America./

20. All of these can be used in home remedies. They are also used in cooking many of the foods my grandmother prepares./

21. Grandmother drinks rosemary tea when she is nervous and upset. She says it calms her down./

22. When I have trouble sleeping, grandmother makes me *té de naranjo*. That is orange leaf tea./

11

12

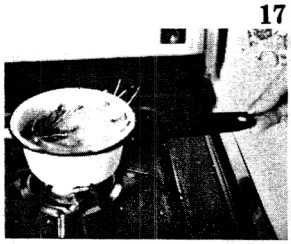
13

14

15

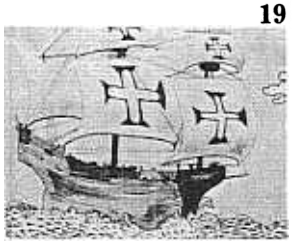
16

17



18

19



20

21

22

23. It is made by boiling orange leaves and adding sugar to make it taste sweet. Sometimes I drink it hot and sometimes I drink it ice cold./

24. Grandmother told me that long ago the juice of lemons was used to clean cuts and scrapes./

25. And sometimes when I get an earache,/

26. grandmother roasts a piece of garlic on a griddle./

27. Then she wraps the hot garlic in cotton and puts it in my ear, and my ear stops hurting./

28. The Spaniards made tea from roses to stop coughs. They also used mint,/

29. called *yerba buena* in Spanish, for indigestion. Some people also put *yerba buena* in iced tea because it gives it such a good flavor./

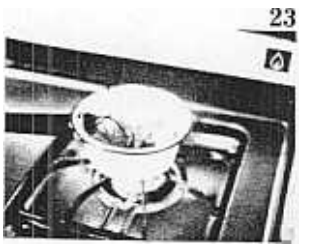
30. The Spaniards knew how to use the *zábila* plant to help treat cuts and burns. This plant is called aloe vera in English./

31. To help a burn, first cut off a leaf, then peel off the outside skin and smear the jelly on the cut or burn./

32. Grandmother always treats the sunburns I get with *zábila* leaves./

33. Today, when people can't get fresh aloe vera, they buy it in liquid form in the grocery store./

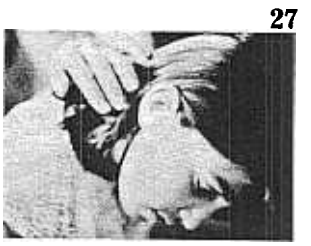
34. Grandmother says that we also have Indian ancestors. She says that some of the plants she uses now were first discovered by them./

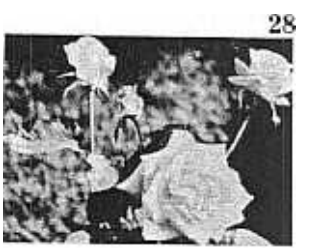

23


24


25


26


27


28

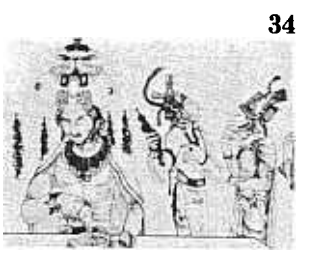

29


30


31


32


33


34

35. The Indians knew about hundreds of medicinal plants./

36. The Indians made a tea from the purple sage plant to stop coughs,/

37. and they taught my ancestors how to find wild plants like *costamate* for stomach problems./

38. They used another tiny wild plant called *limoncillo* for stomachaches. It has a fresh smell like lemon when it is crushed./

39. And the Indians used *nopal*, the prickly pear cactus, to help people who were out in the sun too long. They cut the flat leaves in half and placed the cool inside of the leaf on the person's forehead to make them feel better./

40. Neither the Indians nor the Spaniards had many doctors and they had even fewer medicines. They had no drug stores as we know them today. But they were very wise./

41. They used and they shared the medicinal herbs they each had. People grew the most commonly used medicinal plants in their own gardens and yards. Others they picked wild, or bought them in the market place./

42. Grandmother still grows many of the same herbs her ancestors used in her own backyard./

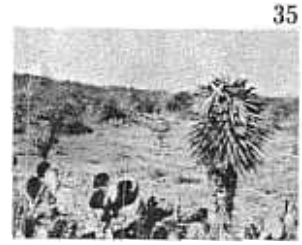
43. Many of the herbs she uses she picks fresh whenever she needs them./

44. The ones she cannot grow at home she must buy. Many Texas towns have special stores,/

45. called *yerberias*, that sell medicinal herbs./

46. Grandmother says that many of the medicines that doctors now prescribe were first discovered in plants./

35



36

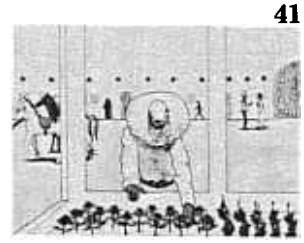
37

38

39

40

41



42

43

44

45

46

47. Some of these medicines are now made in laboratories and are sold in drug stores./

48. But no matter where medicines are found, you must be very careful with them./

49. Grandmother says you should never make these remedies until you know exactly which plants to use./

50. Don't try picking weeds and eating them, they might hurt you. Some plants can make you very sick when you eat them./

51. Grandmother is very careful. She never lets me pick the plants unless she helps me./

52. I have learned a lot from grandmother./

53. I hope that someday I will learn all of the things that she knows and be able to teach them to my grandchildren, too./

54. Credit/

55. Credit/

56. Credit/

57. Credit/

58. Credit/

47

48

49

50

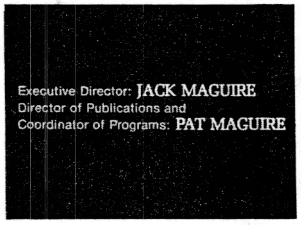
51

52

53

54

55



56

57

58

credits

Graphics: Adolfo Gustavo Martinez
Script, Photography and Production: Robert T. Trotter II, Ph.D., Pan American University, McAllen, Texas
Educational Consultant: Pauline Alvirez
Subjects: Fidela M. Calvillo, Catarina (Cathy) Calvillo, Yolanda Medina
Narration: Michelle Romero
Special Thanks To: The Hidalgo County Historical Society, Mrs. Fran Alger and staff; Pan American University Learning Resource Center and Pan American University Department of Behavioral Sciences

Additional audiovisuals, study guides, publications, traveling exhibits, historical photographs, and other research and teaching aids may be ordered from: The University of Texas Institute of Texan Cultures at San Antonio, 801 South Bowie Street at Durango Boulevard, P.O. Box 1226, San Antonio, Texas 78294.
A copy of The Institutes' *Catalog of Supplies and Services* is free upon request.