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## Book reviews

**La Voz del Kultrun en la Modernidad: Tradicion y Cambio en la Terapeutica de Siete Machi Mapuche. (the voice of the drum in modernity: tradition and change in the therapy of seven mapuche machi)**

Ana Mariella Bacigalupo; Ediciones Universidad Catolica de Chile, Santiago, 2001, 271 pp., price \$18

Bacigalupo's book describes and analyzes the *machi*, an ethnomedical tradition of the indigenous Mapuche of Southern Chile. This long-term participant observation study with *machi* incorporates a social and historical analysis that reveals their central roles in the adaptations of the Mapuche to Chilean society. The book first addresses major commonalities in contemporary *machi* practice and their relationships to earlier accounts of their profession; and secondly, provides an in-depth consideration of seven *machi*, examining their lives to illustrate their divergences from the past and the creation of modern hybrid practices that address contemporary needs for healing. Examination of the diverse ways these seven *machi* developed, practice and conceptualize the world provides a basis for analysis of the relationship of the knowledge and practices of these traditions to the process through which identity and psychological healing is produced and reproduced.

The role of the *machi* initially appears paradoxical because of their various relationships to tradition and modernity. Stereotypes held by the Chilean majority see the *machi* as a representative of tradition and backwardness, derived from an indigenous pre-modern past and constituting an antiquated form of cultural preservation that exemplifies a rejection of the modern world. Bacigalupo's research illustrates very different roles for the *machi*, roles concerned with the management of the consequence of modernity. The work of the *machi* is not predominantly in the rural enclaves of traditional culture, but rather in the urban centers where *machi* address illness associated with the processes and consequences of modernity. Bacigalupo discounts the Chilean stereotypes of the *machi* as traditional anti-modernist forces, showing instead how they have selectively recombined symbols from the Catholic, medical and Chilean national culture in a creative and synthetic process that has maintained the vitality of their dynamic healing discourses. These adaptations have their focus in the interface of Chilean and Mapuche societies and the "illnesses of modernity" that have resulted.

*Machi* practices have consequently both appropriated and transformed the Western and national symbols to elicit their power in healing. *Machi* both reinforce the ancient traditions of the Mapuche, and create a space of psychological security in the domains created by modern Chile. The power of the *machi* in the context created by the interface with Chilean society derives from many factors. Significant among these is the capacity to address physical, emotional, mental and spiritual dynamics and establish an equilibrium among these different forces. The spiritual aspects provide significant resources for the Chileans that avail themselves to the *machi* services, which provide a dimension missing in the Western biomedical frameworks.

*Machi* roots in the ancient Mapuche traditions provide beliefs that allow them to equally address both ancient notions related to exorcism of malignant spirits and witchcraft, and modern concepts of stress, depression, insomnia and anxiety. Their ability to cross into both worlds make the *machi* healing ritual effective at physical, social and mental levels. The healing rituals of the *machi* use symbols to instigate action in others, manipulating their psychology, consciousness and identity. The ties to tradition contribute to giving the Mapuche a sense of their importance, with the ritual processes providing a cognitive reorganization that renegotiates and recharges the Mapuche ethos in its confrontation with forces of modernization. Their concepts of illness include causal factors in the realm of social relations and emotional reactions, where normative transgressions, envy and ill-will cause illness by disrupting the social and individual bodies.

*Machi* roles as spiritual healers with culturally relevant therapies are extended in their activities as physical healers employing herbal remedies and massage. But even these physical treatments also used by other competing healing traditions have a special role within the *machi* conceptual framework, which recognizes the interpenetration of mind and body and the interactive effects of spiritual, physical, emotional and cognitive factors. Plant medicines are employed for both spiritual and physical illness, and are often used in a diagnostic role, where the patient's reactions to their effects provides a prognostication for successful treatment of the malady. The *machi* healing traditions provide a holistic framework on healing, a biopsychosocial and spiritual approach exemplified in rituals that combine physical therapeutic practices (e.g., medicinal

plants) and with spiritual and ritual approaches (e.g., exorcism and sympathetic magic).

Bacigalupo characterizes the *machi* utilization of tradition as providing a basis for maintaining community cohesion. This helps reinforce the Mapuche faith in both the *machi* and their traditions, a crucial element in providing healing. Another significant aspect of the appeal of the *machi* is their ability to translate the problems of modernization experienced by the Mapuche into terms intelligible within their cultural and social context. The power of their healing ritual relies upon a dramatic ritual presence that convinces the patients that their conditions can be interpreted within their traditional practices and beliefs. Bacigalupo emphasizes that the *machi's* ritual efficacy derives from their ability to satisfy the expectations of the community with explanations that are intelligible and satisfactory to the community.

A central aspect of *machi* healing derives from their ability to resist the domination by Chilean culture and re-define Mapuche identity. Bacigalupo characterizes the *machi* ritual as a dynamic construal of Mapuche identity that reinforces a contraposition with the Chilean influences. Although the *machi* reflect the traditional pole in the contrast with the Chilean influences of modernization, in reality the *machi* ritual healing practices are syncretic and hybrid. While reinforcing concepts of tradition, the *machi* forge a space for Mapuche identity in the context of Chilean society. The *machi* have incorporated medical, Catholic and Chilean elements within the context provided by the Mapuche cultural ethos. In this context, *machi* practices have been empowered by acculturation and extended to address problems of modernity, poverty, alienation and anxiety.

Their syncretic synthesis of ancient traditions and practices with a blend from the historic Catholic traditions and modern medical practices has resulted in contemporary *machi* practices that are quite distinct from those that were present earlier in the 20th century. *Machi* adaptations to modern pressures have transformed the beliefs and therapeutic practices, producing a greater role differentiation and specialization in the *machis*. This specialization in specific kinds of illness has reduced competition and increased the opportunities for *machi*. They have also come to play central roles in the ritual activities previously controlled by the priests. This expansion of the *machi* role reflects and reinforces their roles as repositories of the ancient traditions. Today the *machi* provide a variety of services—physical and spiritual healing, love magic, and collective rites of thanksgiving (*nguillatun*).

The *machi* are the group within their Mapuche culture that has the highest degree of commitment to the traditional culture. Yet they are also at the forefront of successful negotiations with dominant Chilean culture,

reinforcing the Mapuche people's confidence in their capacity to achieve their goals and resist domination. *Machi's* holistic and personal approach provides relief for a variety spiritual, psychological, and emotional conditions. *Machi* provide alternative conceptual system and treatment modalities for the stressors of modernity, conceptualizing their consequences in terms of spiritual illness, sorcery, and supernatural encounters, as well as other social and cosmological dynamics (e.g., illness as a consequence of the victim's violation of social or religious norms or disruption in the balance of relationship with nature). Bacigalupo points out that the characteristics of the spiritual illness treated by the *machi* are similar to psychosomatic illness, emphasizing the importance of the management of anxiety in addressing their underlying causes.

Although the other Chilean healing systems—Western biomedicine, Catholic healing traditions, and herbalism—have come to challenge *machi* dominance among the Mapuche, the *machi* have been able to strengthen themselves in this confrontation with modernity. These syncretic achievements of the *machi* reflect their predominance as healing practitioners in the cities and towns where Mapuche have most intense contact with dominant Chilean society. The *machi* ritual healing practices now also address contemporary Mapuche problems related to work, cultural survival and cultural identity, and racism in social relations with Chileans. These modern problems might suggest a decline in the importance of spiritual illness, but instead, the dynamics of intercultural negotiation and resistance have increased the incidence of conditions interpreted as spiritual illness. The illness of modernity and their psychosomatic components make spiritual frameworks particularly salient, reinforcing an identity dynamic that resists the definitions of Chilean society.

Bacigalupo carefully avoids the simplistic characterization of *machi* as shamans, while also questioning the classification of *machi* as mediums, based upon cross-cultural studies of magico-religious healers. The characterization of *machi* as shaman/healers or shamanistic healers reflects the incorporation by contemporary *machi* of characteristics associated with both shamans and mediums (Bacigalupo, 1996). For instance, *machi* are occasionally possessed by spirits, a characteristic of mediums, but also engage in the "magical flight" or soul flight that define shamans. *Machi* combine the shamanistic elements of the past (e.g., pole or tree-climbing rites that represent the axis mundi and soul journey) with the mediumistic and possession phenomena characteristic of complex societies with political integration and stratification. Bacigalupo's review provides evidence of the socioeconomic transformation of the *machi* in response to forces of modernization, providing evidence that confirms theories of the sociocultural transformation of shamanic potentials (Winkelman, 1992) and the

underlying psychobiological basis of shamanistic healing practices (Winkelman, 2000).

Bacigalupo's important book is limited in its accessibility because of the use of the Spanish language. For those lacking the rudimentary Spanish vocabulary necessary to gain access to her insights, a number of her English language publications (Bacigalupo, 1995, 1996, 2000, 2001) provide more accessible material.

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## Medical careers and feminist agendas: American, Scandinavian, and Russian women physicians

Elianne Riska, Aldine de Gruyter Press, New York, 2001, 172 pp., \$19.95 (paper)

In this work, Elianne Riska undertakes a sweeping historical and sociological review of the complex relationship between medicine and gender, past and present, in three countries. In nine disparate chapters the book covers a vast territory—geographic, historical and theoretical. It addresses issues as diverse as the social and economic factors that drove the professionalization of medicine in the 19th century, and the impact of the feminist radicalization of the women's health movement on the roles of the women physicians in the United States in the 1960s and 1970s and today.

The first chapter, which outlines the sociology of the professions and its patent failure to successfully address women in medicine, is perhaps the most confidently handled and provides a thoughtful and critical review of the sociological field. It would make an excellent undergraduate resource on gender and sociology of the professions. However, one of the most satisfying section of the book deals with the history of Soviet Russian medicine and how it came to be reconfigured as a largely female, relatively low status profession. This history provides a powerful corrective to the progressivist evolutionary assumptions that pervade much contemporary thinking about the rise of medical science and medical power based on the British and American experience. Critically, Riska argues, the decline in status of medicine was less a consequence of the ban on professional medical associations and the shift of medical education to medical institutes, than the impact

of the new economic program (NEP) which valorized industrial workers above all other sectors of the workforce. These structural and economic factors external to medicine emphasize the importance of historical analysis to correct the error of internalism that typically besets professional narratives.

So too, the comparative figures provided for each country (past and present) reflect the history of higher education, opportunities for clinical consolidation and specialist training, and the impact of state and welfare models of health versus the market-driven approach of the United States, as the key drivers and directors of change. Recurring themes emerge in the differing contexts as preoccupations for Riska; the first is the way in which gender is to be understood in the profession of medicine. Here, Riska takes three models—gender neutral, essentialist and embedded approaches. These models provide a recurring and satisfying matrix through which Riska reviews the wide range of studies researching, reviewing and critiquing women in medicine. A second, and somewhat more perplexing theme is articulated most fully as a question towards the end of the book. She asks “whether women physicians represent a potential humanistic and holistic approach to medicine and a group that will head the rest of the profession towards a substantial change in the way medicine is practiced...?”

Indeed, Riska does appear at times to take on face value, or at least remains equivocal to, claims that women physicians are more caring, holistic and woman-focused. But surely such essentializing claims are highly problematic. Indeed, in the field of nursing such declarations are commonplace and serve to obscure nurses' professional ambitions in relation to medicine, forming part of an armory of ethical claims through