# Hmong Shamanism

## Animist Spiritual Healing in Minnesota

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#### ABSTRACT

Hmong cultural attitudes, values, and behaviors influence when, where, why, and with whom a Hmong person will use Western medicine. Understanding the practices and importance of Hmong healing traditions will help majority-culture physicians provide respectful and effective health care to Hmong patients.

The foremost Hmong traditional healer is the shaman (tu txiv neeb, pronounced "too tse neng"). There is no equivalent health professional in Western biomedicine, and the scope of the shaman as a healer extends beyond the capacities and expertise of physicians. Despite 25 years of Hmong acculturation in the United States and conversion to Christianity, Hmong shamanism maintains its traditional role in health and healing. Many Hmong who see physicians also rely on shamans for restoring health and balance to their body and soul. Thus, the Hmong shaman can be considered a powerful complement to Western health care professionals.

This article presents the results of semistructured interviews with 11 Hmong shamans (5 males, 6 females, ranging in age from 35 to 85) and 32 nonrandomly selected Hmong patients (14 males, 18 females ranging in age from 21 to 85). The shamans described their spiritual perspectives, training and skills, and professional activities. Patients described their beliefs about spiritual healing and health care. These interviews suggest that Shamanism is considered effective care by many Hmong, irrespective of age, gender, or degree of acculturation. The article also includes summary charts of Hmong healing practices and concludes with a set of questions designed to help practicing physicians access the assumptions and beliefs of their Hmong patients so that they can provide efficient, effective, and satisfactory care.

The Hmong language has no words for common chronic diseases such as diabetes, hypertension, and cancer. These "new world" diseases did not exist or were not recognized in Laos. Many in the Hmong community report being perplexed about the causes of these ailments and seek to find appropriate cures wherever possible. Traditionally, disease is understood as disruption in balanced, dynamic interaction of souls, spirits, and persons. For this reason, many Hmong people may seek help from traditional Hmong healers or shamans to restore this balance. The shaman is the traditional healer who leaves the material world and navigates the spirit world to determine and treat the spiritual causes of disease, which may be indicated by general, nonspecific, and persistent symptoms such as fatigue, weakness, bad dreams, and loneliness. Cure is effected by the shaman by retrieving lost or captured souls of the ill person in a special ritual.

Hmong patients increasingly seek help from Western health care providers and health care systems. However, their level of acculturation and traditional beliefs modulate their participation in Western health care; many in the Hmong community consider Western biomedicine as "alternative." Physicians who seek to provide the best care from an evidence-based, biomedical standard-of-care perspective may be frustrated by this; some may feel as if they have to work harder with Hmong patients than majority culture patients to ensure comprehension of and adherence to treatment regimens. It is important for physicians to understand that now, more than 25 years after the

Hmong began arriving in America, majority-culture knowledge about the contemporary role of the shaman and of shamanic healing is crucial for efficient, effective, and satisfactory care for the most challenging diseases in the Hmong population.

In the past two years, the authors have interviewed 11 shamans (5 males, 6 females ranging in age from 35 to 85) and 32 Hmong patients (14 males, 18 females ranging in age from 21 to 85). All interviews, which were conducted in Hmong, were recorded, transcribed, translated, and reviewed for common themes. Based on these interviews, this article provides a brief description of Hmong spiritual perspectives and shaman training, skills, and professional activities. Additionally, this article will convey contemporary patient perspectives on this ancient practice. It concludes with practical recommendations for physicians seeking to understand their Hmong patients.

## The Role of the Shaman

The shaman is the foremost Hmong traditional healer. Table 1 summarizes the shaman's role in Hmong health and healing. Nonshamanic healers also are part of Hmong traditional practices. Their roles are described in Table 2.

#### Traditional Worldview

Traditional Hmong religious beliefs are considered animistic. Life is seen as a continuous circle of birth and rebirth, and the Hmong believe that there are two worlds—physical and spiritual—that coexist side by side. Beings in both worlds may interact with one another in various ways.

The Hmong believe that a per-

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son has a certain number of souls. The souls and the physical body function as one unit to give life and health to the individual. This unit must remain intact and whole for spiritual, mental, and physical health. When this relationship is disjointed or out of balance, illness afflicts the individual. When a soul or souls are lost or taken by other spiritual forces, the physical body becomes sick.

When a body part or organ is removed, the body is no longer considered whole. The result may be that the soul will lose its ability to find its ancestors in the spirit world after death or it might be reincarnated with a negative fate. Thus, surgical solutions to medical problems are not necessarily seen as curative and life saving and may be perceived as a profound force for harm, affecting a person not only in this life but also in many lives to come.

#### The Initiation

Being "chosen" (yuav ua neeb) is the first step in becoming a shaman, and this is generally precipitated by an unusual illness. Both men and women, even children, can be "chosen." One interviewee describes the process as follows:

"When I was 12 years old, I began to experience some body shaking and felt something awaking me. I was very ill and passed away for seven days and seven nights. My family thought I was going to die. They tried everything to help me until they invited a shaman to look into my illness. Immediately, the shaman informed my family that I [was] chosen to become a shaman. The shaman called my soul and performed the shaman ceremony. During the ceremony, my body was shaking and felt the emotional movement."

Once a person has been "chosen" to be a shaman, he or she will look to the spirit world for "treatment training." Another shaman might help with the external details of the practice (i.e., the tools needed, altar set-up [teeb thaj neeb] etc.), but the shaman would not provide training or education in any of the skills needed to be a shaman healer; that information is understood to be provided by the spirits. Training, education, learning, or attempts to gain the right amount of knowledge in order to achieve a level of power do not appear to be part of Hmong shaman traditions.

Some shamans specialize in the

very illness that afflicted them when they were chosen and will only treat people with similar ailments. Others may be referred to as "generalists" and treat more common spiritual causes of illness. Shamans must first be able to treat their own families in order to take on the role of community healers.

#### The Professional Practice

The act of being "chosen" requires that the person make a lifelong commitment to being a healer. This includes being open and accessible to the entire community; it often involves diet restrictions and ritual regimens. Unlike physicians, Hmong shamans do not provide a physical diagnosis of the people they help. Rather, they try to determine the "soul status" (ua neeb saib) of the person through entrance

#### Table 2

#### Nonshamanic Hmong Traditional Healers

- 1) Kws tshuaj ("kau chua") One who knows about herbal medicine; a gender-neutral term, but generally these are females. The following is a partial list of problems they treat:
  - Infertility
  - Menstrual irregularities
  - Impotence
  - Broken bones
  - Joint pains
  - Wounds
  - Kidney stones
  - Abdominal pain
  - Headaches
  - Nausea/vomiting

3) Tu kws khaw koob ("du gu ker kong") - Magic healer; not "chosen" by the spirits as a shaman is; usually taught as an apprentice. Khaw koob ("ker kong") is healing through the use of powerful magic words; the following is a partial list of problems treated:

- Burns
- Infertility
- Broken bones
- Eye infections
- Wounds
- Removal of "stones" (real ones, such as kidney stones, or imaginary) put in bodies by black magic

#### Table 1

#### The Role of the Shaman in Hmong Healing Practices

#### The Hmong Shaman

- is a traditional healer who can diagnose and treat spiritual illnesses,
- is called or chosen for this role by spiritual forces,
- is granted authority as a healer by the Hmong community,
- is selected by patients as the result of a shaman-calling ceremony,
- receives all knowledge and wisdom for this role from the spiritual dimension,
- conducts healing ceremonies at great risk of personal harm with no expectation of reimbursement,
- serves people of all ages and both genders with wide-ranging symptoms perceived as spiritual illnesses including stress, depression, schizophrenia, fainting, breathing problems, and infertility.
- refers to physicians and is open to partnerships with physicians in Hmong patient care.

## The results of this study demonstrated that in the Hmong community shamanism is

- widely used,
- seldom used independently of physician care,
- · perceived as effective care,
- considered to be a valuable cultural resource,
- part of a spectrum of traditional healing practices.

into the spirit world to confront the spirit(s) causing the illness.

The goal of the shaman's confrontation is not to overcome or defeat the spirits that have taken the soul. One described the work this way:

"We are there to rescue the victim. In order to communicate with the spirit, we have to use their language. Our purpose is to have a good understanding of each other and a mutual respect of one another. Also, we are there to make peace between good and evil."

They engage in negotiation (puaj dab) for the person's soul. This might involve offering gifts such as spirit money (ntawv nyiaj) and/or the souls of animals in exchange for the soul of the sick person. Negotiation with the spirits often requires outsmarting the spirit and tricking it into giving up the person's soul. Stories are told of shamans who have died because the spirits they were negotiating with were too powerful for them and took their souls.

When families ask shamans to help an ill person, they never charge for their services. However, the family of the ill person may need to provide an animal for sacrifice, burn incense (xyab), provide spirit money, or build a temporary altar, and families may choose to reward the shaman for a successful soul retrieval.

## Patient Attitudes toward Health Care

Shamanism appears to be widely used in the Hmong community, often in conjunction with seeing a physician, and only rarely without a physician (see Tables 3 and 4). Twenty-four of the 32 subjects in this study, reported using a shaman. Just 2 of 32 subjects used shamans only. The 25% that seek only Western medical treatment do so specifically for religious reasons, i.e., they have converted to Christianity and no longer follow the traditional "old" religious practices.

Shamans and shamanism are not opposed to physician care. Twenty-two of 32 subjects reported using both shamans and physicians.

All 11 shamans seek physician care for themselves. Three shamans identified specific instances in which they had worked beside a physician in providing patient care. Of the 43 individuals interviewed, only 1 cited an instance when a physician referred a patient to a shaman.

Religious orientation appears to affect the health care choices Hmong patients make. Of the 19 participants who identified themselves as traditional religion only, none use physicians only. Of the 7 subjects who identified themselves as Christian only, none use shamans exclusively.

Many Hmong use herbs. Fourteen of the 32 subjects reported using herbal medicines. This includes 2 of the 8 subjects who reported using only physicians for their medical care. Religious orientation did not affect herbal medicine use. Half of those participants who identified themselves as either traditional religion only or as Christian reported using herbal medicines. Of note, gender does appear to affect Hmong health care choices regarding use of medicinal herbs. Eleven of the 14 subjects who reported using herbs are female.

## Discussion

Our interviews have shown how clearly the Hmong community understands the need for various types of health care services. Both shaman practitioners and Hmong patients recognize the need for medical treatment of both acute and chronic conditions. However, the perceived cause of the illness determines the health care choices Hmong patients make. All 22 patients who use both shamans and physicians identified using the shaman for spiritual illnesses (loss of spirit, night fright, unhappiness, stress) and physicians for physical illnesses (dizziness, high blood pressure, intestinal problems). Surprisingly, all 11 Hmong shamans visit physicians for certain needs.

Hmong patients who use both a shaman and medical practitioners might view symptoms as problems of a spiritual nature and may seek help from a shaman. If the shaman

is able to help them, then they may not feel the need to seek medical help and vice versa. All healing options may be considered. Two patients made these comments:

"We believe the traditional religion and the medical treatment. If we cannot fully depend on the medical support, we reach out to the traditional healing. Both treatments are good for us. We can depend on either one. They are there to save us."

"We need many supports and depend on both. If the person is ill and the doctor cannot diagnose the cause, the person may get worse. We may reach out to the shaman to conduct a ceremony to examine the spiritual causes. We need the shaman ceremony."

Whether Christian or animist, spiritual healing remains important in the Hmong community. One participant said, "Well, our family is converted to Christianity now, and we don't practice shamanism anymore. We still appreciate what the shaman can offer to people. Now, we see doctors when we are sick. We see our doctor and then ask our pastor to pray for us. My family stopped practicing the traditional healing because my husband passed away in Laos. We don't have anyone in the family [who] knows the ritual ceremony well. My children will not be able to continue the tradition. The church is a place where my children can go and pray for help."

Of the two-thirds of our interviewees who have tried both shaman and Western treatments, most have had positive and negative results from both. If, however, a medical doctor was not able to help them, they generally felt it was because the patient was not heard or the physician did not understand what to do.

"I think, the workers and doctors, the way they ask questions and listen to how Hmong explain their illness is very important because the person may have many illness[es] in their body or may be stress[ed] and want to inform a doctor and would like for him/her to listen. Although the doctor may not consider it to be important, but for the doctor to try their best to listen to what we are

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saying and to see what is going on."

All of this suggests that practitioners have an even greater responsibility to listen to patients to recognize what Kleinman et al. refer to as the "ethnomedical pathogenesis," that is, the power of religious or cultural belief to either cause or heal illness. This is best accomplished through focused interviewing of Hmong patients to avoid stereotyping them. One Hmong person's beliefs, values, and practices may differ from another's. Thus, under-

standing what's important to each individual and his or her family should be the basis for establishing a therapeutic relationship.

# Practical Guide for Clinicians

In order to develop therapeutic relationships with Hmong patients, physicians and other health professionals need to be aware of their patients' religious and spiritual concerns. For example, an important culturally based diagnosis within the Hmong community is "loss of soul," a condition perceived as devastating that might be termed major depressive disorder or other affective disorders but that a Hmong patient might believe could only be healed by a shaman. Failure to recognize this powerful belief may mean failure to forge a therapeutic relationship. A clinician asking the standard set of interview questions is not likely to uncover such a perception. Questions to enhance cross-cultural care currently taught

Pt#	Age	Gender	Years in US	Health Insurance	Traditional Religion	New Religion	Use MD and	Annual MD	Herbs	Annual Shaman	MD Only	Shaman Only
							Shaman	Visits		Visits		
1	23	M.	19	No			X			: -		
2	45	**F**	13	Yes		X X		3-4	Х		: X	11
3	34	M	18	Yes	Χ	Χ	Χ			1	***	
4	21	M.	18	Yes ( A	,		X				1000	
5	51	M	20	Yes	Χ		Х	* ***		<b>K</b> 1	0.50 P.S. (1975)	
6	27	M	. 19	Yes .		χ		1-2.16			X	
7	37	F	20	Yes		Χ		1-2			Χ	
8 -	50	* Fam	25	∴ No :: .		* X.	X		#X 1			
9	66	F	19	Yes	Х		Х	44	X	2-3		
10	43	: M : §	10	Yes . +	X		14 X	1-2 11				
11	67	M	24	Yes		Χ	Χ	1-2	Х	5-6	**************************************	
12	43	, M	12 5	Yes	X		X			100		
13	53	F	22	Yes	X		Χ	1-2			-	
14	75,	M ,	14	Yes	X	X					X	18
15	19	F	17	Yes	X	X			X		Χ	
16.	35	M	16	Yes				1.35		100	+X.	
17	40	М	24	Yes	Х		X	7617		1-2		
18	-62	M	22	Yes	X	16.			X			X
19	35	M	27	Yes	X		Х		Х			
	20	M	20	Yes	X-3		era X Bass	1-2				3.00 10.00
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24	70	- Mac/A	10	No -	<b>X</b>	•	X					100
25 2	21	F F	20	Yes		X			• 25.5	Table	X	
26 27	85		23	Yes	Χ	-16	X		X	483.44		
27 20	85 39	F A F	23 20	Yes	X		X	200	X			
28 20			Contracto se successivo	⊵∗Yes i	. Χ.	A Company			X			<b>.</b>
29	59	F F	22 - 27	Yes	X	350	X		X	1.4.75		
30 • 31	37 65	F	14	Yes Yes	X		X X		X	10 mars 10 mar		

	Interviews
Table 4	

Shaman	Age	Gender	Years in US	Years of practice	Work with physicians	Seek personal physician advice
1	35	F	20	25	Yes	Yes
2	65	F	20	24	Yes	Yes
3	85 85	F	10	60	Yes	Yes
	78	F	22	22	No	Yes
4	79	, F	22	49	No	Yes
5	79 78	, M	24	30		Yes
6	64	M	9	30		Yes
7	-	M.	16	57	No	Yes
8	82		9	56	No	Yes
9	86	M			No	Yes
10	85	F	22	<u> </u>	No	Yes
11	<b>7</b> 1	М	25	<i>5</i> 0	140	

Table 5
Traditional Hmong Home Remedies (practiced by parents or other adults in the community)

- Khi hluas tes ("key lua tay") Wrist string tying, which is part of celebrations of birth, marriage, illness, and other events or conditions. Usually done by elder family members or friends. Khi tes ("key tay") is the actual wrist string-tying ceremony.
- 2) Nchos ceeb ("chaw cheng") or Khaws ceeb ("ker cheng") Fright Release, to relieve fear in infants and young children, performed by any adult (parents, elders, etc.).
- 3) Npaus ("ber") Pinching of different body locations, generally to relieve headaches.
- 4) Txhuav ("tsua") Cupping various parts of body to relieve pain.
- 5) Kav ("ga") Rubbing with a spoon to relieve pain.
- 6) Hu plig Soul-calling ceremony that does not require a shaman; usually done by head of household. *Tus hu plig* (" too who plee") is the person who performs a soul-calling ceremony.

to medical students include What do you call your sickness? What problems has this caused? What do you think has caused the problem? Why do you think it started when it did? What do you think the sickness does? How does it work? How severe is the illness? What kind of treatment do you think you need? What do you fear most about the sickness?

From our interviewing of patients and shamans, we have developed additional questions to consider when serving a Hmong patient:

1) Do you practice the new ways or the old ways?

This is the equivalent of asking,

"Are you Christian or animist?" The answer to this question helps physicians understand their patient's subjective experience of, and subjective understanding of, ultimate reality. A physician may respond, "Tell me about it," or ask follow-up questions, including: How is this important in your life? What do you want me as your doctor to be aware of? As a result, patients will often feel "heard." This is important for efficient, effective, and satisfactory communication and care.

Many Hmong Christians may shy away from the shaman ceremonies because these are seen as going against their current beliefs and practices. However, it is important to understand that there is a continuum of religious practices within the Hmong community. Some Hmong Christians are fundamentalists who choose not to use shaman ceremonies, name-calling ceremonies, and other traditional animist practices. Christian Hmong who are more liberal may continue to practice some traditions such as name-calling ceremonies, blessing ceremonies, or healing. While magic Hmong animists continue

to call on the shaman and other traditional healers, they may also call on Christian leaders, pastors, and priests to help them. Some Hmong individuals and families have gone from animism to Christianity back to animism based upon health and illness circumstances.

2) Are you working with any other healers?

The answer to this question helps physicians comprehend if and how their patient and/or patient's family see their religious and/or spiritual beliefs as resources. This question may help physicians determine appropriate referrals to chaplains, clergy, or traditional healers for complementary spiritual care.

3) Are you using any herbs for

your condition?

The spectrum of traditional Hmong healing practices includes herbalism (kws tshuaj) and a variety of home remedies. These herbs are pharmacologically active, albeit mildly, when used appropriately. Research into their indications and contraindications is being conducted by the University of Minnesota Center for Spirituality and Healing and the Bell Museum of Natural History's herbarium.

4) What else are you using to

help with your condition?

The small percentage of Hmong people who do not seek Western treatment will try a variety of traditional healing practices. However, some converted Christians continue to use herbal medi-

cine and traditional home remedies such as cupping (txhuav), spoon rubbing (kav), fright release (dhaws ceeb), etc. Table 5 lists Hmong home remedies.

#### Conclusion

These focused interviews suggest that Hmong shamanism is an active form of religious healing in Minneapolis and St. Paul. Shamanism appears to be considered effective care by many in the Hmong community. Some Hmong who see physicians continue to rely on shamans for their trusted healing skills and abilities to restore health and balance of the soul and body. Conservative Hmong Christians tend to dismiss these ancient healing practices as contrary to their religious beliefs. However, some Hmong individuals and families have gone from animism to Christianity and back to animism based on health or illness circumstances. A small minority of practicing Hmong Christians use a shaman and always do so in conjunction

with a physician. Because the shaman continues to play an important and powerful role in the lives of many Hmong people, the shaman should be considered a resource and ally for health care professionals serving Hmong patients.

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Tapes and transcripts of interviews for this project will be stored with the Archives of Creative Theatre Unlimited at the Andersen Library, University of Minnesota, Minneapolis.

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