TRADITIONAL, COMPLEMENTARY, AND ALTERNATIVE MEDICINE IN MEXICAN-ORIGIN POPULATIONS

The issue

Traditional, complementary, and alternative medicine (TCAM) is commonly used by both Mexican immigrant and U.S.-born Mexican-American populations. In the U.S., 18% of Mexican immigrants and 27% of Mexican-American adults use some form of TCAM. Methods combine physical, emotional, social, and spiritual health to treat both specific health conditions and to increase social and/or cultural connectedness. Mexican traditional medicine is frequently combined with Western medicine as well as other methods such as acupuncture and homeopathy. While Mexico’s government health care systems have recently made major efforts to integrate TCAM with Western medicine, U.S. systems have not. Maintaining traditional health care knowledge may support health among Mexican immigrants and their descendants.

TCAM demographics

• **Gender**: As in other ethnic groups, women of Mexican origin use TCAM more frequently than men.

• **Socioeconomic status (SES)**: Mexican-American women with higher income and education level are more likely to use TCAM than those with low SES.

• **Health care access**: Mexican and Mexican-American adults are more likely to use TCAM when Western medical care is difficult to access or financially unattainable.

• **Age**: Approximately 1 in 4 Mexican-American adolescents and young adults use TCAM, most commonly herbal and chiropractic remedies. 31% of Mexican-origin adults over 65 use TCAM.

• **Culture and Western medicine**: Lack of confidence in medical doctors is associated with use of Mexican traditional medicine. Among Mexican immigrants, positive attitudes towards TCAM are associated with a lower likelihood to follow Western medical providers’ recommendations. Women and the elderly use TCAM because they are natural treatments that support their beliefs.

TCAM in Mexican-origin population in the U.S.

• TCAM is accessed in community health centers, regulated and informal private practices, botanicas/casas de salud, and private homes.

• Herbal remedies are the mostly commonly used form of TCAM and are often used as self-care in the home.

• *Curanderos, sobadores*, and other traditional healers are more often used by recent immigrants.

• Chiropractic and massage therapy are more often used by those who have been in the U.S. for longer.

TCAM uses

• For Mexican-American women, TCAM is most often used to treat osteoporosis, cancer, and heart disease.

• For urban immigrants, herbal remedies were most commonly used to treat gastrointestinal illness.

• Herbs and other methods, including massage, are commonly used for weight loss.

• Some Mexican immigrants use homeopathy, herbal remedies, or curandero treatment against tuberculosis.

• Among those with HIV on the U.S.-Mexico border, herbs and traditional healers are commonly used in combination with anti-retroviral medications to increase immune system health and treat medication side effects.

Public Policy Recommendations

• While it is clear that TCAM is used at all ages and for acute and chronic medical conditions, there are no standardized TCAM definitions or measurements. Quantitative and qualitative research on TCAM should be expanded and standardized.

• Many people do not tell their medical providers that they use TCAM. Providers should routinely ask patients about TCAM and encourage open communication, recognizing that their patients, particularly immigrants, may expect Western medicine providers to disapprove of TCAM.

• Health care professionals including doctors and nurses should be trained in understanding the basics of TCAM methods, communicating about TCAM with patients, and integrating multiple approaches to healing as part of their culturally relevant care training.

---

*Curanderos* are Latin American traditional healers whose methods typically include a spiritual component. *Sobadores* practice traditional massage.
References

Author Information
Ariana Jostad-Laswell, PhD candidate in Medical Sociology, UC San Francisco
Sylvia Guendelman, PhD., M.S.W, Professor of Community Health and Human Development, UC Berkeley School of Public Health
Xochitl Castañeda, Director, Health Initiative of the Americas, UC Berkeley School of Public Health

Acknowledgements
This factsheet was reviewed and edited by Rachel Wexler, Caroline Dickinson, and Stefany España from Health Initiative of the Americas.

Suggested Citation