Cultivating healthy relationships between humans, environments and the spiritual realm is fundamental to much indigenous knowledge pertaining to community and environmental health and has much to contribute to what we know about health in modern, Western or biomedical medicine.

The forest as source of healing
As ecological studies have demonstrated, the health of the ecosystem depends upon many symbiotic and reciprocal relationships between plants, animals and non-biotic elements. Studies in psychology demonstrate that there are similar requirements for individual human health. The intuition that psychological problems arise not only from internal variables, but rather that they also depend upon the contexts in which people live, work, relate and change is not new. To better understand patients’ suffering, and to find ways out of this suffering, psychology has drawn from the application of systems theory in the therapeutic field. In particular, psychologists have focused on contextual variables such as the familial and social dynamics in which patients are situated.

More recently, we have come to understand that it is not only our social systems, but also the ecosystems in which we live that have a profound impact on our psyches and our general sensations of well-being or illness. It becomes obvious that there are environmental contexts that facilitate the appearance of psychopathologies and others that favor health. According to eco-psychology reports, access to nature acts as a protective resource to maintain psychological well-being. In contrast, the alienation of human beings from nature (such as the loss of direct contact with forests, rivers, mountains) seems to be related with the sensation of alienation from oneself and the loss of a sense of meaning. The high rates of anxiety, depression and addiction to legal and illegal substances prevalent in large urban populations seem to correlate with the lack of access to nature. This deprives many of the fundamental human experience of feeling a sense of connection to, as though we are a part of, nature.

Plant Teachers as a Source of Healing in the Peruvian Amazon

Gonzalo Brito and Claire Sieber
Addiction to drugs is a psycho-social problem of special relevance, contributing to our understanding of the complex relationship between psychological well-being, direct contact with nature and spirituality. To approach the subject of addiction and the potential for rehabilitation through direct experience in contact with nature, we refer to the experience of a Center for Drug Rehabilitation and Research of Traditional Medicines, Takiwasi, located in the city of Tarapoto, in the department of San Martin in the Peruvian Upper Amazon. Takiwasi provides an interesting example of how wild forests can be a source of healing and how local medicinal knowledge can have global significance by restoring a respectful relationship with nature.

Takiwasi Center is a non-governmental, not-for-profit organization that since 1992 has offered treatment to patients dependent on drugs. Patients proceed through a protocol of treatment that integrates the tools of psychology and Western medicine with the knowledge and practices of Amazonian medicine. In practice, this is realized through the collaborative work of psychotherapists who are responsible for both group and individual therapeutic interventions, curanderos or healers who administer medicinal plants according to traditional Amazonian medical practices and Western-trained doctors who supervise the general state of health of the patients in their process of detoxification and recuperation.

Takiwasi has a chacra (local word for a piece of land in the jungle) of 124 acres on the edge of the San Martin jungle. This land is used with three principal objectives: to conserve the native forest; to have an adequate place for patients, therapists and healers to complete their dietas (healing retreats and apprenticeships explained below), and to cultivate medicinal plants endemic to the region and used in the treatment of patients.

Generally, a person who takes drugs looks for an experience that would bring them out of their habitual perceptions, feelings and thoughts — usually because in ordinary reality they perceive an intolerable level of suffering or lack of meaning. This necessity to feel extraordinary experiences which offer meaning contrasts with a notable lack, in our post-industrial society, of ritual spaces that provide youth with the important experience of belonging to a community and access to the sacred — or, in other words, to feel that one’s own life is not trivial but significant. Unable to access this initiation into community, the addict lives in a state of counter-initiation, experimenting, without adequate guides or protective rituals, with modified states of consciousness through transgressive, inadequate use of sacred plants.

Apart from synthetic drugs (which are often also modeled after active plant compounds), many addictive drugs we know are derived from plants that have been used as sacred or medicinal plants in indigenous traditions. In their original environmental and cultural contexts, plants such as the coca leaf have been used for millennia by Andean cultures, cannabis has been used in northern India and tobacco in the shamanic traditions of North and South America, to name just a few examples. Ayahuasca is a principal medicinal and sacred plant among the indigenous peoples who live in the Amazon Basin from Peru, through Colombia and Ecuador. Its continued use for millennia as a source of healing and wisdom without any documented cases of addiction is a testament to the healing potential of Ayahuasca and the cultural knowledge surrounding its use.
In Takiwasi’s view, addiction to drugs implies a transgressive relationship of a person with a plant; the plant is not respected in a sacred dimension, but rather is treated as a simple object of consumption. The healers at Takiwasi explain that when a person disrespects a sacred plant through irresponsible use, the anima or spirit of the plant takes revenge on that person by taking their spirit captive through addiction. Some examples of disrespectful or irresponsible use include refining a plant to extract the alkaloids, not respecting the numerous abstinences that are required for working with plants or taking them outside of appropriate, spiritually protective rituals. The cost of these transgressions is the loss of a person’s liberty.

Rehabilitation for addicts and the therapies offered to the local population and to visitors provide a tangible possibility for patients to repair their relationship with the world of plants, the world of the spirits and consequently, their relationship with themselves. This is realized through experiencing personal contact with the forest and its medicinal resources following the ethical rules and specific behaviors observed in the local healing tradition. Thus, the forest is presented as a double therapeutic resource: first, as a source of a rich variety of medicines and secondly, as a healthy context in which one can retreat to find oneself.

The immersion of the patient into the exuberant nature of the jungle, with very few belongings at hand besides a change of clothes and a flashlight, usually turns into a fundamental experience of healing for the patient. Specifically, this experience is the radical opposite of drug consumption. More broadly, it is contrary to consumption in general. Without anything to do during this time, the patient has the opportunity to simply be and to open their perception to the gifts of nature. Regularly, with this experience of extreme austerity and introspection, a great recognition and gratitude emerges for that which one has and, for many, this recognition takes a spiritual form.

The experience of Takiwasi, with 15 years of work, more than 600 patients who have passed through the resident therapy program, and some 1000 patients who have received ambulatory treatment, shows how the forest can be an effective source of physical, emotional and spiritual health.

**Experiential knowledge**

Experience as a way of knowing is basic to many traditional knowledge systems. Healers apprenticed in Amazonian medicine must dedicate years of their life to prolonged dietas in the jungle to learn from the plantas maestras the skills for healing. Healers experience the medicine that they learn to prescribe to their patients. They accompany their patients through healing ceremonies having ingested the medicine themselves. Healers also have intimate knowledge of the plants that they work with because they have learned to harvest, prepare, ingest and administer them, and through the dietas they learn the sacred songs that the plantas maestras impart to them. This close relationship with the plants demonstrates how healers’ experience of nature is vital to their healing practice.

At Takiwasi, therapists are also required to participate in healing rituals, to take plant medicines and to complete dietas in order to understand and relate to the patients’ experiences. Visiting researchers are encouraged to experience first hand the medical knowledge that they have come to observe. Health
practitioners at Takiwasi express a need for more research that includes an experiential perspective of Amazonian medical practices. They explain that researchers often come to observe medical practices and document knowledge systems without knowing, experiencing or explaining how these knowledge and practices actively work upon and change the individual.

Claire visited the Takiwasi Center from May to November of 2006 to conduct research for her masters in anthropology. What follows blends an outline of Takiwasi’s healing regime with Claire’s personal experiences there.

**Experience, insight and responsibility**

Although not addicted to drugs, I found treatment at Takiwasi for many emotional anxieties that have been afflicting me on a physical, emotional and spiritual level. Participating in weekly purges, Ayahuasca sessions and one dieta of eight days gave me an opportunity to discover the health benefits of Amazonian medicine combined with therapeutic follow-up.

**The purgas**

Purge plants are administered in a ritual setting at Takiwasi, led by an experienced healer. They involve the ingestion of a designated purga plant accompanied by the ikaros, or healing songs, of the healer. After one to two hours of vomiting, I would return to my home in Tarapoto to rest and contemplate the experience. Often, as I was vomiting, memories of past anxiety, guilt or insecurity would surface. The physical force of vomiting felt like a cathartic release of those emotions. The memory stimulation continued for hours after the purge, and although they seemed random and insignificant, these memories linked to significant experiences in my life. I recognize that I am exposed to memory triggers constantly, but as the healers explain, plants help us to remember these memories passing them through the heart. I was able actually to feel and afterwards to integrate the emotional meanings linked to these memories. The following is an excerpt from my fieldnotes, June 5th, 2006.

This small Chinese bowl was a simple object that took on enhanced significance after my paico purge, digging up memories about a close childhood friend from whom I had grown apart. Remembering my brother and his interest in Chinese and Japanese traditions also brought back memories of how much I admired and have been greatly influenced by my siblings. As a child, I felt a great loss when my siblings left for university, unable to understand at the time the distance that came between us.

Contemplating this bowl helped me to get at the root of some of my fears about losing contact with friends and family. I could see
why I keep myself distant and non-committal with people in my life, but I was also reminded of how these people have supported and inspired me, which gave me deep gratitude.

**Ayahuasca**

Guilt, insecurity, fear, envy and doubt: these were the main emotional anxieties that I felt emerge from my experiences with **Ayahuasca**. Talking to other visiting patients, I surmised that these were common feelings that arose in Ayahuasca sessions. There are also a few corresponding illnesses that are identified among local Amazonian healers, including *susto* (fear), *nerviosidades* (stress), nervousness and *envidia, mal ojo* (envy or evil eye). The ability to see images and memories relating to these emotions helped me to confront them, to reflect upon how they influence my life and to release some of the tension surrounding them from my physical system through vomiting and diarrhea. The visions inspired by **Ayahuasca** provided visual tools to creatively overcome my anxieties of guilt, doubt, insecurity, envy and fear.

Tiny flecks of light appeared in the periphery of my darkened vision. The more faith I gave, the more elaborate the visions ... I started to imagine and let the visions flow. Feeling skeptical, I asked “Is this just my imagination?” As a response, **Ayahuasca** showed me a big clay belly with a window into it, then, while clearing another moon-shaped window into the belly, a voice inside me asked “Just your imagination? Isn’t your imagination a way to see? An insight?” I was amazed and relieved at the same time, realizing that I could trust my intuition and my imagination, and that so many fragments of my past could be stitched together now with these visions — that the plant was showing me how valid my imagination is for processing my thoughts, my anxieties, my insecurities — my problems. The clay belly became a recurring symbol, and each time I worried that I was making up the visions myself, **Ayahuasca** reminded me that my imagination is a means to understanding and that I need faith to create my reality.

Although not educated in psychotherapy, I recognized immediately that the images produced by **Ayahuasca** surrounding my emotional anxieties, were very healing. Through visualization of these anxieties I could accept them, take responsibility for them, release them or consciously work through them in my daily life outside of Takiwasi. The psychotherapeutic follow-up definitely confirmed and elaborated
upon this, and I began to see how these medical knowledge systems are complementary.

**The dieta**

The dieta at Takiwasi is eight days in duration, a time in which the person maintains exclusive contact with the forest, protected by a rustic construction of cane stalk walls and a palm thatch roof. During the dieta patients must avoid all perfumed products, excessive heat through sun exposure and contact with anyone else besides the healer. This permits the energetic body of the patient to open up and allow the planta maestra to do its work.

Removed from daily anxieties, small details become precious revelations. The delicate petals of a fallen flower after heavy rain hold a perfume that fills my head with blissful serenity.

This was an insight that I had after six days of isolation in the jungle. My therapist at Takiwasi suggested that I take the plant *Ajo Sacha* (*Mansoa alliacea*), which is meant to address physical problems of general discomfort, pain and heat and on a psychological level reinforce strength and will power (Giove 2002: 48). It was also explained to me that *Ajo Sacha* helps to develop one’s spiritual connection.

During my dieta, I connected with the writing of Thich Nhat Hanh, a renowned Zen master, poet and peace activist. Among the few things I had with me was his book *The Miracle of Mindfulness*. The writings of this book complemented what I was learning about Amazonian medical practices and psychotherapeutic attention to dreams and visions. Thich Nhat Hanh advocates contemplative meditation and mindfulness in every act. Through attention to my breathing, my thinking, my dreams, my every little action, I became painfully aware of the cacophony of my mind — always leaping to think of something else. In the setting of my jungle tambo, or shelter, I was able to practice calming my mind, and appreciate the interdependence of everything around me. I read:

Recall a simple and ancient truth: the subject of knowledge cannot exist independently from the object of knowledge … the practitioner meditates on mind and, by so doing, is able to see the interdependence of the subject of knowledge and the object of knowledge (Nhat Hanh 1975:70).

This passage resonates with increasing global awareness of the interconnectedness of all systems. It helped me to cultivate compassion, empathy and patience in my thoughts about my life and the people I know. During the dieta I had the luxury of seemingly limitless time to sort through my memories, to reflect upon my relationships with people and places in my life, to dream about decisions that I needed to make about my life and to take those dreams seriously. I drew pictures, I wrote down thoughts I have never been able to articulate about my relationships with family, friends and environments in my life. It was as though I could finally be myself, and not be distracted by all of the things I had to do or consume.

Daily meditation became my way of connecting to something deeper that had been pushed aside by all the daily tasks I obsessed about. Now, I was learning to practice mindfulness in those daily tasks, which would prove to be a skill I needed to draw upon when I returned to my daily routines. In that jungle...
tambo, with only one simple meal of boiled plantain and rice, one change of clothes, one book to read, my journal, my camera and some watercolor paints — I felt intense joy over a fallen flower, baths in the river, a beautiful river rock, the sound of wind and rain and the music I was learning to pull from a small bamboo flute. I knew that when I returned to cities and my regular routines that I could easily be convinced that my happiness depends upon the consumption of material things, obscuring the basic joys that I had during the dieta. Mindfulness and meditation have helped me to reconnect often to that deeper happiness that simplicity uncovers.

**Conclusions**

The plants, systems of knowledge and healing, and the local communities of the Upper Peruvian Amazon are in a relationship of dynamic and interdependent health. Urban development strategies, usually based on centralized and decontextualized decision making, threaten to destroy this delicate socio-spiritual and psycho-biological balance (Ibacache et al. 2002) that has been maintained for centuries.

With growing international interest in and awareness of the use of Amazonian medical knowledge comes the responsibility to respect the community and environments within which these knowledge systems have emerged, changed, and been maintained through the relationships of many healers with their plant teachers, and their communities. Through our experiences at Takiwasi and in the region of San Martín, we have come to understand the paramount importance of nature and spirituality in the Peruvian Amazonian medical practices and ways in which these practices complement psychotherapeutic practices. Takiwasi provides an example of how the perennial wisdom maintained and cultivated by people living in contact with nature can have global significance in repairing the social and environmental impacts of modern, post industrial and capitalist consumption. Specifically, these medical knowledge systems demonstrate how cultivating healthy relationships of reciprocity and gratitude among humans, nature and the spirit world can be a source of healing for our communities.