Doctoring in the Plaza

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NEW MEXICO is a fascinating land with its three distinct civilizations—Indian, Spanish-American, and “Anglo” or white people like ourselves. Our work is confined entirely to Spanish-Americans. These people are descendants of the early Spanish “Conquistadores.” Many of them could pass as “Anglo” if they so wished for their features, complexions and general bodily developments are very much like our own.

It is like stepping into another world to enter one of the little villages tucked away in some mountain valley. There the farming is done with very primitive tools, harvesting is done with the scythe and threshing by sheep or horses trampling out the grain which is afterwards tossed up in the air by the women for the wind to blow the chaff away.

Our medical work is not confined to the hospital. Much of the work is done in the homes of our people. After holding one of our clinics in a remote village one day we were asked to go to some of the homes to examine those who were too ill to come to the clinic. The first home we entered was one where there were no chairs—just a rough hewn bench upon which to sit—the floors were of mud and everything was most plain though clean. There we found a woman about thirty-eight years old who was sick but up trying to do the house work. Eight days before her fifteenth baby had been born dead. When questioned it was found that she had only two living children for all the rest had died in early infancy. This woman had never seen a physician “because they were too poor.”

In another home we found a little baby eight months old covered with sores. With a little medicine and instruction to the parents the child was soon on the road to recovery. In spite of ignorance and superstition the people who come to us as a rule try to follow our instructions. It is indeed a rare privilege and opportunity that is ours to be able to lend a healing touch. In some of these villages a new house has not been built for 400 years and extreme poverty existed long before the “depression.”

The hospital is the nucleus about which our work has developed. It has been here for twenty years ever increasing the territory to which it ministers and with enlarging opportunities for service. In the early days it was hard to get the people to come to the hospital as patients. Although there is still considerable opposition in some sections, it is diminishing. We have had fifty-three hospital patients since April of this year. Though that does not sound like many it is five more than we had during all of last year.

One of our elderly patients was Mrs. Lupita Mascarenez, who entered with a very large tumor. Her condition was so poor that an operation was out of the question. Besides this she would not give her consent to have one for these people are very much afraid of “going to sleep.” They think they will never awake. So we had to do the next best thing and tap the tumor. Two large buckets of fluid weighing forty pounds drained off while Mrs. Mascarenez praised the Lord continuously. She rejoiced to think that she had come to us for she had been told by her mother that it would be better for her to stay home and die rather than come to the mission hospital. When she was discharged we told her that the tumor would probably recur and she assured us that if it did she would be back again.

Not all of our patients fare so well however. For many are not brought to us until their own people have given them up and then it is often too late for us to be able to do very much. Others are brought and left only a day or so, then taken out of the hospital. When that happens there is usually some superstition back of it or religious pressure has been brought to bear upon the parents.

Recently a little eleven months old baby was brought to us in a dying condition. He had been sick for several months before his condition became critical. His parents were school teachers in a public school near here. When the baby was admitted to the hospital we told them that the child might die but we would do all we could for him.

The next day we were surprised to have the parents come and insist on taking him home. The baby was very seriously ill but had shown some slight improvement while in the hospital and we were most anxious to have him remain. We had one of our other patients explain to them in Spanish that they could remain with the child if they would leave him here and tell them how the baby had improved. But nothing could persuade them to stay—the baby had to go home.

After they were gone our other patient told us that the people thought we had “put the evil eye” on the baby. We had not known of this superstition and had all remarked about what a lovely baby they had. They believe that an “Anglo” can catch a baby by admiring it. This we had done and the baby was still sick after a day in the hospital so they thought the only thing to do was to take the baby away. The way the child would have to be unwatched would be for a certain person to put water from his mouth into that of the child. So our baby was taken home undoubtedly to die.

The superstition and ignorance these people are held in is unbelievable in

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our land today. It is very similar to the ignorance and superstition of the religions of the Orient. But this seems far worse to us because it is done in the name of our own Christian faith. The heartless extortion of money from these poor Spanish-Americans rivals that of the Buddhist priests in the Orient. A death will put the family in debt for years. When one realizes this he begins to understand the great change and awakening it requires for a Spanish-American to give up his old faith and become a Christian as we understand the term.

Our opportunities for service are numberless. These people in our own land greatly need the message of healing, love and salvation which our Saviour came to earth to give to all people.