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By Jessica Scully

Seth Holmes spent five years studying migrant farmworkers from the Triqui people, an indigenous group from the southern Mexican state of Oaxaca. In a year and a half of that time, he lived and worked alongside them, sleeping in uninsulated tin-roofed shacks in labor camps, picking strawberries, and crossing the border into the U.S. and getting caught by border patrol agents along with them.

What Holmes, now a professor of medical

anthropology and public health at the University of California Berkeley, discovered was not just racism against the Triqui from individuals, but ingrained systems throughout American society that resulted in discrimination on many levels. Holmes documented his experiences in his recently published book, *Fresh Fruit, Broken Bodies: Migrant Farmworkers in the United States*.

"I'm hoping that having the stories and interviews of actual immigrants will help people in the immigration debate see them as real humans, as hard-working people who are providing us with healthy fruit and healthy vegetables," Holmes said.

"I hope that will help all of us care about their health."

Holmes, a medical doctor who speaks fluent Spanish, began his study of the Triqui for his dissertation in medical anthropology. He had been told the Triqui had a reputation for violence and shunned outsiders, and initially, he struggled to gain their trust. Eventually they accepted him, let him interview them, travel across the border from Oaxaca to the U.S. with them, and live and work alongside them on farms in Washington and California.

His goal was to understand what medical anthropologists call structural vulnerability, how "certain people are made vulnerable by political and social structures like ethnic hierarchies and institutional racism," he said. What he discovered was an intricate, step-by-step pecking order, with the Triqui people on the bottom--below even another indigenous group from the same state in Mexico.

Holmes was fascinated by how people made sense of and justified the pecking order. For example, a farm supervisor told Holmes that the Triqui, or Mexicans in general, are "closer to the ground," and therefore better built to pick berries. Others said that the Triqui liked to work in the field, he said. Even the Triqui themselves felt their bodies were different, Holmes said, and would say that their bodies were tough, and that *gabachos*, or white Americans, were delicate and weak.

But picking fruit from the ground is backbreaking work for anyone, as Holmes himself discovered. In *Fresh Fruit, Broken Bodies*, Holmes relates that he picked berries once or twice a week and was frequently in pain for days afterwards. He often felt anxious about not being able to pick the required 50

pounds per hour of fruit, and his knees constantly ached from bending, stooping, and moving rapidly to try to make the weight requirement. When Holmes asked Triqui workers, who picked daily, how they felt, one said she no longer felt anything. Others answered that they were always in pain, or that they could no longer run because running hurt too much.

The difference in treatment between the Triqui, other Mexican groups, Mexican-Americans, and whites wasn't just on the farm, but throughout the community and society at large, Holmes said. One of the most surprising examples for him occurred off the Washington farm, at a fast food restaurant that he and a Triqui family frequently visited on payday.

On one visit, they weren't given what they ordered. He promptly suggested one of them go to the counter and request the mistake be corrected. The Triqui adults looked at each other, uncomfortable with his suggestion.

As a white, educated male, Holmes said he was used to "knowing how to ask things of people who respond to my race, class, all those kinds of ways that I'm marked as belonging to certain places, and they usually fix things, are nice about it and apologize."

The Triqui people had the opposite experience, he said. "If something went wrong, and they asked for it to be fixed, it would get worse," he said. "So they never asked for things to be fixed."

These experiences held true for some of the Triqui farmworkers Holmes worked with who sought medical care. Many studies have documented that farmworkers experience worse health than other groups. Triqui farmworkers who went to physicians came to the conclusion that "'los médicos no saben nada,' doctors know nothing," Holmes said.

The Triqui found medical care at migrant health clinics, urgent care clinics, and emergency rooms. Holmes found that some physicians treating the Triqui weren't equipped to best help their patients. In one case detailed in *Fresh Fruit, Broken Bodies*, a Triqui farmworker who speaks very little Spanish went to see an English-speaking physician for chronic stomach pain. The physician didn't have a translator, and used the farmworker's daughter-in-law, who speaks no Triqui and a little English, to translate. In the patient's chart, the physician wrote that he was an old boxer wondering if boxing caused his stomach

pain. In fact, the man had been beaten by the Mexican military, who suspected him of being part of an indigenous rights movement. Although the Triqui man repeatedly explained that he needed medicine for his stomach pain, he was admitted to the hospital for chest pain he didn't have, tested for a heart attack, and billed \$3,000.

Holmes noted that individuals are only a small part of the problem. The culture of medicine trains people to think about behavioral or biological causes of illness, he said. "But it doesn't train us to think about economic or even political and social causes of illness."

That's starting to change, Holmes noted. Several universities across the country have started departments in the new field of social medicine, and in 2015 the MCAT will include a social determinants of health section. Undergraduate universities are starting to think about what social science and humanities classes should be offered for premedical students.

But much more needs to be done, he added. Hospitals and clinics need translators. And doctors, who have a moral authority when it comes to patient health that other professions don't, need to help foster social change, Holmes said.

"We can have a voice alongside our patients in trying to change the way society works."

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