

ALONG the ROBESON TRAIL

by Dr. Stan Knick, Director,
PSU Native American Resource Center

In recent weeks we have been looking at the contemporary struggles of Mayan-speaking Indians in Southern Mexico. As they fight for basic human rights, and for the right to participate in the political and economic mainstream of their country, they are also resisting the destruction of Indian culture. They realize that they stand not only to lose their lives in the struggle, but also their way of life.

Much disappears when traditional cultures are over-run by the "progress" of a developing country. One of the most significant losses is the disappearance of traditional medical practices. This happens when the people who carry the traditional knowledge and wisdom about those medical practices are forced to change their ways in order to survive.

But in modern times it also happens when the local environment in which these traditional cultures live is destroyed. This is especially significant because modern (Western) medicine is just now beginning to realize that the cures for many worldwide diseases may someday be found in these traditional medicine kits and in the forests from which they come. One particularly poignant example of current destruction of environment, and the costs it can have for humanity, is in the loss of medicinal plant species in tropical forests such as the homeland of the

Maya. Mayan people know about *siv-yak-tun-ich* (*Anthurium schlechtendalii*), a plant they use as a treatment for arthritis and rheumatism. They chop the leaves and put them in hot water, and the affected parts of the body are bathed in this solution. Mayan people know where to find these plants, what time of day and what season of the moon is best to pick them.

They also know about *cu-shub* (*Bixa orellana*), a plant used to treat pain and fever. The Maya utilize the leaves, roots and fruit of this plant. They know that only the mature plant has the best medicinal properties.

They know about *shma-culan* (*Piper auritum*). This is a plant used for various purposes — its leaves can be boiled into a tea for pain-relief, or heated in oil and used as a poultice for swellings. The Maya taught the Spaniards how to use it, and today many use the Spanish word *obel* to describe it.

They know about *zac-xa-nal* (*Pouteria campechiana*), a tree with many uses. Its leaves are made into an herbal bath for the treatment of skin disorders and sleeplessness.

These are just a few of the hundreds of tropical plants used by Mayan people. When their culture is over-run by development, logging and roads, many of these plants will disappear. And beyond that, many

other plant species which are not currently being used as medicine by Mayan people, and which could potentially be found to have amazing curative powers, will also vanish. Tropical forests are environments with more biological diversity — greater numbers of plant and animal species — than any other place on earth. When we lose traditional Mayan culture, we also lose the forest, and vice versa.

Ix Chel, the Mayan spirit responsible for medicine, is most often depicted as a woman holding the leaves of a plant. An area of her tropical forests the size of New York, New Jersey and Connecticut is being destroyed every year. Meanwhile, less than 1 percent of the plants in tropical forests have been analyzed for their medicinal properties.

Last week we heard one of the Mayan leaders in Mexico saying: "...we came down from the mountains carrying our packs, carrying our dead, carrying our history..." They may also be carrying our future — in the form of what they know about the medicinal value of plants in their homeland environment — and in the forests they have protected for centuries.

For more information about traditional medical practices, visit the Native American Resource Center in Old Main Building, on the campus of Pembroke State University.

Pembroke Kiwanis Report

by Ken Johnson

President Bubby Bell presented his son, Dr. Joey Bell, M.D. a graduate of UNC Medical School and a Pediatrician of Robeson Health Care, located in Pembroke. The weekly meeting was held at the Town and Country Restaurant.

Dr. BELL served in Indian Medical Centers in Oklahoma before coming to Robeson County. There is a major revamping of Indian Medical Care Systems. When tribal control is in effect the services are free for legitimate tribal members. There is governmental supervision. Their care complete medical services. Emergency services are offered to anyone but after that members only are cared for at no charge. There are Indian Health Care as a branch of Public Health. There is a Veterans Administration under the direct supervision by the Federal Government with Civil Service requirements. If we have an Indian Health Service here we would be supervised by the Indian Office in Nashville, Tennessee. But a loose type of Administration that is to say it would be non supervised. But supervised by the tribe itself. Managed Health Care System is by contract to a hospital system for various services. There is a way from governmental supervision and you can contract any hospital or services you desire. If the Federal government grants Lumbec recognition, we would not have much change, we would use the area hospitals as we always have.

Questions and answers followed Dr. Bell's presentation. Invocation-Clay Maynor. Song Leader-Ed Teets. Reporter-Ken Johnson.

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RICK'S PLACE

Once again tax time has come and gone. There is not a whole lot we can do about it. Sure, we can stand around and complain, but deep down we all know what we must do to keep Uncle Sam happy. We have to do our duty. Fill out the appropriate forms and pay the price.

The same can be said about the upcoming elections. Many of us have been standing around and complaining about the folks in power and the political situation of the area for many years. Now is the time to stand together and be counted. We have the power to elect anyone we choose. We have the power to put qualified Indian candidates in positions of power that were unheard of in years past. Let's do it.

I was talking to a young Indian woman about the political situation in our county and about the election process in general. She ask me who I planned to vote for Sheriff. I told her I was voting for the most qualified Indian candidate in every election. In the sheriff's race, I believe Glenn Maynor to be the best candidate, regardless of race, for the job. She couldn't believe it. She started telling me about her candidate, A white guy, and how great he was. Before she worked herself up into a small lather, I stopped her and ask her to compare the qualifications of her candidate to mine. She admitted she knew very little about either candidate but was going to vote for her guy because he was probably better qualified. I saw red. Here was an educated, Indian woman voting for a white candidate

over an Indian candidate because of race, not because the Indian was less qualified! I was and still am astounded. She felt that the Indian would be less qualified because he was an Indian! For many years that may have been true. Not today. We have qualified Indians in all fields. We have Indians who can do the job, all they need is the opportunity.

Let's all take the time to learn about the candidates and their stance on the issues that matter to us as a people. Learn the facts. Many people will spread rumors and lies to discredit the opposition. As a small boy, I heard that if Lyndon Johnson was elected President, he would institute a 4 day school week. I believed it and wanted him to win. He did but the 4 day school week was just someone blowing smoke. I learned that you can't believe everything you hear (and I hear plenty). If someone tells you something that seems unbelievable about a candidate, it may be to your advantage to check the facts before jumping on the bandwagon.

I believe we should vote for the candidate who is best suited and best qualified for the job. If both candidates are evenly qualified, I will certainly vote for an Indian because the Indian candidate understands the problems of Indians as a people.

During the primary and the election, go to the polls and vote. Exercise your rights. Stand up and be counted. Make a difference. Be part of the solution. Put the right candidate in office.

Pediatric Pointers

By JOSEPH T. BELL, MD



Well, look who's back in the newspaper! I have finally settled back into Robeson County after almost four years in Oklahoma. You can't imagine how good it is to be home! Now that we have gotten into our routine at work with Robeson Health Care and at home, I can get back to writing about health issues affecting our children. Thank you for all the nice comments and words of encouragement about this article.

Today I thought we could discuss newborn rashes and birthmarks. Remember that no baby has perfect skin, but most newborn rashes are harmless and disappear within the first few months. More than 30% of newborns develop acne on the face, consisting mainly of small red bumps. This rash seems to be caused by hormones passed from the mom to the baby just before birth. It usually appears at 3-4 weeks of age and may last until 4 to 6 months of age. Since the condition is temporary, usually no treatment is necessary. Applying baby oil or ointments can make the rash

worse, so avoid these.

Most babies have a rash on the chin or cheeks caused by drooling. It is often caused by milk and acid that the baby spits up from the stomach. Rinsing the face with water after each feeding or spit up may help prevent this rash.

Prickly heat" (miliaria rubra) is another temporary rash seen on the face. It is caused by pressure and friction, especially during periods of warm weather and high humidity. To relieve the rash, change the baby's position more frequently, use a cool wash cloth on the area and make sure the room temperature is comfortable.

More than half of all newborns get a rash called erythema toxicum on the second or third day of life. The rash consists of large red blotches with a tiny white bump in the center that looks like an insect bite. They can be numerous and appear over the entire body. The cause is unknown; the rash is harmless and usually fades within a couple of weeks.

Milian are tiny white bumps that

occur on about 40% of all newborns. They are commonly called "milk bumps." They are blocked pores which open up and disappear by one to two months of age.

Mongolian spots are bluish-gray flat birth marks found on more than 90% of Native American, Orientals, Hispanics and Black babies. They occur most commonly on the buttocks and back but may be found anywhere. They vary greatly in size and shape and usually fade by 2-3 years of age.

Flat pink birth marks occur over the bridge of the nose. The eye lids or the back of neck is more than 50% of newborns. The marks are commonly called "stork bites." The ones on the face clear by 1-2 years of age, while the ones on the neck may persist into adult hood.

Well, that's all on newborn rashes and birth marks. I hope everyone gets a chance to attend the upcoming Lumbec Constitution hearings that are going on this week and next. Your input on the matter is important.

Take care and we'll talk about next week!

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Sink your teeth into this

Contrary to what you may think, sweet foods aren't the only cavity culprits. Foods that stick are just as responsible for encouraging plaque build-up. But it isn't always easy to tell what's stickiest. For example, which would you say sticks more to teeth, caramels or crackers? A hot-fudge sundae or a piece of bread? A dried fig or puffed-oat cereal? Believe it or not, the stickier items are the second ones, so be sure to brush whenever possible after eating.

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