Tashi Lhamo
Narrator

Tsewang Sangmo Lama and Charles Lenz
Minnesota Historical Society
Interviewers

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Tashi Lhamo Residence
Columbia Heights, Minnesota

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Tashi Lhamo - TL
Tsewang Sangmo Lama - TS
Charles Lenz - CL

TS: I'm Tsewang Lama. It is September 8, 2005. I'm interviewing Tashi Lhamo. We are also with Charles Lenz.

Can you say your name?

TL: Tashi Lhamo.

TS: How do you spell it?

TL: T-a-s-h-i, Tashi. Last name Lhamo, L-h-a-m-o.

TS: Does it have a Tibetan meaning to it?

TL: Yes, Tashi generally means, you know, good luck. Lhamo means goddess. Good luck goddess. [Chuckles]

TS: Where did you live before moving to Minnesota?

TL: I mostly lived most of my life in India. I was born in India and grew up in India and educated in India, too.

TS: How old are you right now?

TL: Right now, I'm thirty-two.

TS: Like, which part of India did you live?

TL: Southern part of India. It's called Mysore, Karnataka State.

TS: Is it a Tibetan settlement?

TL: Yes, there are a lot of Tibetans. This is one of the biggest Tibetan settlements in India.

TS: Can you tell us about how the settlement is? Is it a traditional setting?

TL: Right. Mostly people living in Southern part of India, especially Tibetan people, they have the same . . . they still retain the same culture, and they do practice all the Tibetan religions. It's more of Tibetan culture itself, not much difference from the Indian culture.

TS: What do they do for a living, most of them?

TL: Majority of Tibetans down there are farmers, and nowadays, I think, probably, moving more towards business.

TS: You said you were educated in India?

TL: Yes.

TS: So what degree did you get? What were your studies?

TL: I studied from first to twelfth standard. I was in Tibetan Central High School. There, we have different subjects like English, Tibetan social science, geography, and all this stuff. Then, after completing my graduation in India, then I decided to continue my education on Tibetan medicine. That's my interest. Then I moved to Dharamsala, which is northern part of India, to continue my education. I studied there for five years.

TS: You said you studied Tibetan medicine?

TL: Yes.

TS: Can you tell us about the institute? What is its name?

TL: The name of the institute . . . that's the only institute in India where Tibetan medicine is being taught . . . is Tibetan Medical and Astrological Center.

TS: Is it very competitive to get into the Tibetan Medical Astrological Center?

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TL: Yes, it's getting more competitive right now. You know, the student has to graduate first. That's one of the characteristics, that you have to finish that first. Then you have like an entrance test. In that test, you not only have to know Tibetan reading and writing perfect . . . still you have to have additional knowledge about like good English writing and reading as general knowledge, also.

TS: Can you describe your like typical day as a Tibetan medical student in India?

TL: When I was student there, we start our day in the morning, we have prayers and medicinal prayers every day, and, then, have our breakfast, and, then, like, we start with our daily school, like have at least four to five classes every day. We also taught Tibetan medicine. In addition to Tibetan medicine, as a Tibetan medicine student, we also taught Tibetan astral, so we have a astral class. As well, we taught also biology and English, also.

TS: And then the medium of instruction, is it in Tibetan or English?

TL: It's all in Tibetan. The Tibetan medicine and astral, they taught in Tibetan. Obviously, it's in Tibetan, but as far as biology and English, we have a volunteer for from Western country.

TS: The Tibetan Medical and Astrological institute, was it established by Dalai Lama?

TL: Yes, it was established in 1961 by His Holiness the Dalai Lama.

TS: When did you move to Minnesota?

TL: End of 2002.

TS: Why did you choose to move to Minnesota?

TL: It was kind of like my mom and dad was here before. It's almost been seven to eight years now. So since my whole family in Minnesota, I decided . . .

TS: So you're part of an immigrated family?

TL: Yes.

TS: Were you excited when you, like, heard the news that you'll be here?

TL: Oh, you know, to be honest, I wasn't really excited. I really don't have . . . what do you call that . . . moments that, I wanted to go there and join . . . something like that. I don't have that feeling before. [Chuckles] Like some of my friends really wanted to go to United States. They always are really excited about doing that. I don't really get that

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feeling before. But, after coming here, it's like, you know, I thought, yes, it's really better life [unclear].

TS: When you were in India, what did you think of the U.S.?

TL: I know for sure that this is a land of opportunity. You'll get to see a lot of different educational opportunities, but since I was well rooted in India and I have a good professional line and I was all set up and I also knew that once I was in the United States, probably I won't be able to practice my knowledge, you know, which I almost spent like six years studying Tibetan medicine. So maybe that could be a reason that I wasn't too excited.

TS: How long did you practice your medicine in India?

TL: The duration of the education was five years and one year internship addition, so it's like six years. After finishing that, I did almost like four or five years in research department. Then, I practiced couple of years in Southern part of India where there's a Tibetan clinic, branch clinic. I was there doing some clinical trials on diabetics.

TS: So when you moved to Minnesota, what was your first job?

TL: Mmmm . . .my first job, I started with nursing assistant, and I worked in a nursing home for seven months straight. Then, after that, I decided to work in the hospitals, because I thought, maybe, in the future, I wanted to be able to be a nurse. In order to get better experience in Western way of dealing with the patients, I decided to work in the hospital rather. Currently, I'm working in the hospital.

TS: As a nursing assistant?

TL: As a nursing assistant.

TS: Because you were a Tibetan doctor, is nursing assistant easier for you?

TL: It's definitely easier, much easier, since I have the medical background. I think it's much easier dealing with the patients.

TS: Then, I heard you also taught at the U of M?

TL: Yes, once a year.

TS: What courses?

TL: It's "Tibetan Medicine: Ethics, Spirituality, and Healing," the topic.

TS: What did you teach to the students?

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TL: Last year, we taught Tibetan Medicine and then we showed some videos. Probably this year, also, we will do the same thing. More on Tibetan medicine. At the same time, we also teach students about Tibetan cultures and how Tibetan people over here still continue the religion and practice their own culture.

TS: What else do you do besides your nursing assistant and teaching?

TL: I'm going to school right now.

TS: For nursing?

TL: Yes.

TS: I also heard you work in Crocus Hill Center?[1]

TL: Yes.

TS: What do you do there?

TL: Actually, I'm practicing Tibetan medicine. There are a lot of people over here beside Tibetan people. So the Caucasians, some of them are really familiar with herbal medicine and some of them also experience a lot of our Tibetan medicine. Those who are interested in Tibetan medicine will make an appointment and we'll talk about it. The majority of the patients, or what you call the client, is mostly, you know, from the U of M, because we teach there and people get to know more about Tibetan medicine. Most of my patients will come just to see their constitutional pulse, which means, what is their constitution? In Tibetan medicine, it's called whether it's rlung,[2] or mkhris-pa,[3] or bad-kan.[4] Since when they were in the class, they have a little bit of knowledge about constitution, so they just want to know if they're constitution is [unclear].

TS: So, basically, they come for minor like illness or—?

TL: I should say, you know, it depends, I think. There are some people who are really chronic illness like cancer and diabetes and high blood pressure problems. I think there are some, you know, who are just minor illness, like I said. Just to know their constitutional pulse.

TS: When you prescribe medicine, where do your kinds of patients get their medicine or medicine pills that you don't get in the U.S.?

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[1] Crocus Hill Oriental Medicine.
[2] Wind.
[3] Bile.
[4] Phlegm.

TL: Sometimes, you know, if I have some medicines over here, then I'll prescribe them or rather, some of them will just order from India or just write the name of the medicine and they can order from India.

TS: Isn't it very expensive to order and bring it here with all the taxes?

TL: Ah, I don't think it is expensive. You know, as compared to Western medicines, it's not at all expensive.

TS: What do you think? How informed are Americans about the Tibetan medicine?

TL: Well, I'm not so sure. It's very hard to know about it. When we teach in the class, some of them really know deeply Tibetan medicine, and some of them not. So it's like half/half. So I should say a lot of people know about Tibetan medicine.

TS: Do you also have Tibetan clients in Minnesota?

TL: Yes. I should say mostly Tibetan. Like they're used to in India and other state in India, so they're used to taking Tibetan medicine.

TS: Does it depend like if the younger population . . . do they come more or the older generation that come to see you more? Does it depend?

TL: It depends, also, yes. I think nowadays, the younger are getting more knowledge from elder, but usually it's more of older people. Yes, people do come and take Tibetan medicine.

TS: What is the most dominant disease that Tibetan people suffer? What is the most common disease?

TL: The most common and the most prominent disease is . . . what do you call that stomach disease? The gastric problem.

TS: In U.S., is it the same? Like Tibetans have more gastric problems?

TL: Yes, more gastric. Most of the elder people do have the gastric problem.

TS: What about in India? The Tibetan people, do they have—?

TL: Do you mean gastric?

TS: No, I mean does it differ? Like Tibetan people who live in India, they might have a different disease, the common disease that are different from the U.S. people.

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TL: The gastric disease, most of them, I think it's common, because Tibetan are used to like, you know, eating leftover foods and eat lots of red meat, which is hard to digest in the stomach and stays longer period of time. Then, at the same time, Tibetans don't take much fruit daily and green leafy vegetable. That's one of the things, you know, that people have more gastric problem or digestive problem.

CL: Do you think that this was a problem in Tibet as well, that they would have the same ailments?

TL: Yes. I heard that when I was India, when we were discussing with the students and the doctors. They said that it's really common among Tibetans that have this gastric, stomach cancer and stomach ulcer. Right now, when I came here, I figured out that there's a disease called GERD, Gastroesophageal Reflux Disease. I haven't heard about it. This is the first time I heard here. Now, I'm thinking that this is also one of the common diseases in India among the Tibetan community. So it's more of gastric problem than other else.

CL: I know that when a lot of the Tibetans came out of Tibet and into India and they started being seen by Western doctors or doctors practicing in a Western tradition, that high blood pressure suddenly came up a lot and that was quite a problem. It's often been cited due to the same thing, of a similar diet that they had in Tibet but a severe environmental change. Do you see that same problem in Minnesota?

TL: I remember when I was in India, when I was working in that research department, I found out that there was results, clinical trial they did before with the Tibetan community, and what they found was that they found a higher range of blood pressure among monks than among the lay people. Later on, we figured out that it's because of excessive drinking of Tibetan tea, and there's a lot of strong butter in it. It's always considered as a better tea if you put more butter in it. So, finally, people get to know that it's because of the butter.

CL: So, do you think that because it has a higher propensity to be shown in monks than in lay people that it's the monks that have stuck to that more traditional diet and the lay people have changed to some other fluid in the West?

TL: Not really changed, because they're not used to drinking so much Tibetan tea, like butter. The monks usually they go to people's home to perform spirituals and rituals and people tend to make strong tea in order to look better or something. [Laughter] So I think that's why that's one of the problems. Lay people, they drink Tibetan tea but not that strong.

TS: What are the main differences between Tibetan traditional system of healing or medicine to that of Western conventional medicine?

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TL: I think, basically, both systems are quite similar because, you know, the main aim of both systems is change the human, whatever the imbalance that occur in the body. But the basic principle in Tibetan medicine is more about the natural things, like the elements. It's a great profound subject, but if you know about it, it's kind of like the natural elements that's going on human body. It's explained in the Tibetan medicine text, "Every human body was made from those elements." So we consider there are four or five elements, like earth, water, fire, and earth. I mean, earth, water, fire, and air. Depending on with these elements, you know, the human body was formed. So due to imbalance of those elements, that's people how they get disease.

CL: That's what you were talking about before with people coming to discover their constitution, right?

TL: Yes.

CL: Like you mentioned rlung, which is air.

TL: Right. People with predominant of air usually tends to be like [unclear] imbalance. That's what here in Western system, I think that it's more of like depression and stress-related problem.

TS: Then is Tibetan medicine more inclined towards Buddhism? Does Buddhism have very huge influence on Tibetan medicine or how does that work?

TL: I think Tibetan medicine is very much related with astral, Buddhism, interlinked with each other.

TS: How do you [unclear]?

TL: For example, like being a Tibetan doctor, you really have to develop a good compassion, really have to develop a good heart, while treating the patients or anything else. The basic aim of Tibetan Buddhism is to develop a good heart, and that's why I think that the basic thing about relation between Tibetan Buddhism and Tibetan medicine is, you know, the soul of a person.

TS: In Tibetan medicine, how do they diagnose the patient? Like in the U.S., we use complex technology to diagnose people, but how do you—?

TL: Since it's a unique system of medicine, let's just say, we're not relying so much on modern techniques. Most of the Tibetan doctors don't even have knowledge about how to use modern technologies. But, we have this unique way of diagnosing the disease. That is the pulsation, urinalysis, interrogation, and we see the color of the tongue and texture, and all this stuff. While pulsating patient's pulse, we have to really concern deeply what's going on internal system, because, you know, these internal organs are

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divided into different parts on the physician's finger. So that's how we get to know what's going on inside.

TS: Beacause of the drawback of technology for advancement in Tibetan medicine, does the Tibetan medicine have the capacity to cure chronic illness, like cancer or emergency issues?

TL: In Tibetan medicine, it's not common that we treat the, what you call injuries or emergency case or traumatic kind of stuff? But we do treat mostly about the chronic ailments, like asthma or rheumatism and nerve damage.

TS: So people who suffer from chronic illness, they usually resort to Western medicine? Is that what you're trying to say?

TL: No. Rather, they would try to come in and check with Tibetan doctor.

TS: Can you think of any drawbacks in Tibetan medicine that you think needs improvement?

TL: I think that Tibetan medicine . . . well, I think that most of the Tibetan old doctors, you know, they don't even want to use Western tools at all, for instance, checking of blood pressure, for example. You know, the younger doctors are used to taking with a instrument, the blood pressure machines, and we really have to be careful when we're with kind of the older Tibetan doctors, because they always deny using that. You know, if we go on using these modern techniques, we're kind of relying more on that, and then lagging behind our unique way of diagnosing the patient. While I was here in the United States and working in the hospital, what I found is there are certain things that we do really have to develop. For example, maybe you will see the pulse and find out something is going on, or you will see some abnormal in the pulse. For example, with cancer, you know there's something really bad inside, but you don't know what kind of stage it has now, first or advanced or stuff like that. So in order to know that . . . I think there's certain ways that we really have to improve.

TS: What do you think the Western medicine can learn from Tibetan medicine?

TL: I think the basic thing that Westerner medicine should learn from Tibetan medicine, like I said before, when you go to a Western doctor here, what I found, you know, the doctors they don't recommend dietary change or lifestyle change. They just prescribe your medicine. They don't place much importance on diet, but in Tibetan medicine, I think diet and lifestyle is one of the most important in treating any diseases before prescribing medicines. So I think that, you know, placing more on nutrition is rather important to a traditional system.

TS: How are Tibetan doctors different from American doctors?

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TL: That's one of the . . . like I said before, like Tibetan doctors, first of all, place more importance on diet and lifestyle rather than just jumping on to medicine. Here, the Western doctors, you know, for every disease, they cure with a medicine, but rather don't place more importance on nutrition and diet.

CL: When you were young and in India, before you decided to go to the institute in Dharamsala and study, what was it that got you starting to think about the medical field or what interested you about becoming a doctor?

TL: [Chuckles] I don't know. For some reason, I just wanted to be on the medical field. I remember one time when I was in the yard playing and, then, I saw a frog laying there. The frog was dead, and I just wanted to cut it and just wanted to, you know, get me, like, what's inside there? I remember one time I was just cutting that frog and I don't even have a blade. I remember I was just starting using some kind of sharp wood or something like that. Then, I wanted to open it up and what's going on there? It just fascinates me. So I think there must be something really that interests me, going into that line.

TS: So, in the Western medicine, like whenever they make pills or anything, they test on animals or rats, anything. What about Tibetan medicine. Do they ever test?

TL: It was a very old tradition. You know, Tibetan medicine was more than 4,000 years now. So what we heard, it was already . . . what do you call it? They have done research. They had proved everything, you know, like this is not harmful and this is helpful for the disease. I think that those pills are really safe. I don't think that it was test . . . I should say it wasn't tested based on modern techniques, but it is already tested before so many years back. We don't really have any complaints taking Tibetan medicine that we've been practicing for so many years in India and never had any problem with a Tibetan medicine side effects. All people just should know that Tibetan medicine doesn't have any side effect.

TS: So we have a lot of new diseases like AIDS that came in recent years in the human history. How do Tibetan medicine try to fill up the drawbacks in improving its medicines for new diseases that come up?

TL: I remember some of the doctors, famous doctors, in Tibetan medicine in India, they're still trying to develop some new medicines for like AIDS and cancer and diabetes. But they are not so sure, still, like whether this really stopped developing or really stopped the progression of disease. It's for sure that these diseases are really hard to cure. But there are some disease that, you know, maybe act as a prevention.

TS: You said you have Tibetan clients in Minnesota. Then we know that there are like more 1,000, 2,000 Tibetans in Minnesota. So do you have any plans to open a Tibetan clinic in Minnesota?

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TL: Mmmm . . . I always have that idea in my mind, but there are some drawbacks to setting up a clinic. We talked about other people, too, like it's very difficult to set up clinic here. It seems that Tibetan medicine was not yet confidence in United States. So there are certain ways that we have to be concerned about.

TS: Why is Tibetan medicine not recognized in the United States? Isn't it considered a herbal product?

TL: It is a herbal product. It has to be approved by the FDA[5] and stuff. Then, it's really hard getting all the medicines from India and some of the medicines, you know, we consider Tibetan medicine as very sacred. It's very precious. Some of the formulas for making Tibetan medicines is very secret also. So they don't want to let everything open to the world. At the same time, it's kind of like a business, too. If you open your business to other people or if they are on to your business, then . . .

TS: Do you mean secret in the sense like they are only taught to Tibetan students who are in the Tibetan Astrological Medicine Center?

TL: Not only Tibetan people. There are some students from Russia, too. We have Russian students every year they teach. Of course, they should know Tibetan reading and writing, too, and they know how to read and write.

TS: Does the Tibetan Medical and Astrological Institute, do they have different branches all over the world or is this just concentrated in India?

TL: In Europe, mostly. In India, like there are nowadays at least forty-six branches in India and a couple of branches in Europe, too, but not in United States. Oh! I'm sorry. There is one being set up recently in Wisconsin.

CL: In Madison?

TL: Yes, Madison.

TS: Is it approved by FDA?

TL: I'm not so sure about it. I don't know how they set it up.

CL: There are lots of stories published about people going through the training to become a Tibetan doctor. One of the sources told over and over and over again is a series of grueling tests that students are subjected to, about having to go out and . . . at one time—and you may have had this, too—they had to go out and collect a whole list of things in a valley or identify through . . .

TL: Exactly.

[5] Federal Drug Administration.

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CL: . . . taste or touch or smell thousands and thousands of different things in one test.

TL: [Chuckles]

CL: And they couldn't get a single one wrong. Did you have to do those same things in school in India as they did historically?

TL: Exactly. Yes, that is also one of the important parts, to know how Tibetan medicine, you, know, what it looks like. You know, you really have to get to know that plant very well, so when you prescribe medicine you know what it looks like, what it's in there, what's the color, because color and taste is really important in Tibetan medicine. Taste contain a lot of qualities inside. So that's why we have to know what really it tastes like. I remember when I was student there, we have to taste all this kind of stuff and, you know, during the test time, we have to . . . I mean, it takes a lot of time, you know, seeing. There are all different plants out there and, sometimes, it's really confusing and takes a lot of time recognizing. You touch the plant and you smell and you taste it until you couldn't recognize it . . . takes so much time. I remember one time one of my teachers said, "Now you stop here and go to the next one." [Laughter] It's really hard to recognize. We have to be really used to that for quite some time.

CL: The institute that you went to, you said, focused on medicine and astrology?

TL: Yes.

CL: You had to take classes in both. Can you talk a little bit how—like in the U.S. or in the West, there's medicine and there's astrology, and they're very, very separate.

TL: Very separate.

CL: Can you talk a little bit about how Tibetan medicine combines those and the theories behind them?

TL: Right. The main thing that links between Tibetan medicine and astrology is that there are certain parts that when you do, especially like moxabustion . . . It's one of the therapies like moxabustion, blood letting therapy, especially for high blood pressure problems. When you perform that kind of therapies, it's really important for a Tibetan physician to know what day is today. Is it a good day? There are certain points that he have to recognize and what you call in Tibetan La, the vital force, energy force that usually travels all over your body. Then if you know that particular point that you're going to do moxabustion, then, you have to see that life force channel is in that point. Is it running today on that point or not? It's one of the things that's more important. You have to know about these life force channel, so, basically, they taught more deep the movement of these vital forces, more deeper in astral than in medicine. So in that way, we have to collaborate astral with Tibetan medicine.

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CL: Western medicine has a history of bloodletting as well as Tibetan medicine. But it's oftentimes, I think, regarded by a lot of Westerners as something that's very archaic in the medical practice. It's something that was done a lot of in kind of the early stages of developing Western medicine, and people didn't really understand what was going on, and it's largely been abandoned now. When you deal with some of your Western clients and maybe suggest something like that, what is their reaction and how do you overcome that?

TL: [Chuckles] I know from working that we can't practice something like that here. It's very dangerous, and it's not something that you can do it here, so I don't even talk about it. But in India or in Tibet, it's very common, especially among the older, you know, Tibetan doctors. They're so used to letting this blood out, like I said, for the high blood pressure problems.

CL: How do you feel about that as a doctor of Tibetan medicine? And how do you overcome that in the West then, of trying to practice but not being able to do all the practices that are involved in your craft?

TL: I think there are a lot of options out there. Like, for example, if somebody has this high blood pressure problem, you know, you don't have to do just the bloodletting therapy. You have, like, a lot of Tibetan herbal medicines. You can prescribe medicine. You see what's the root cause of that blood pressure. Is it because of taking, you know, like high fatty food or have a sit and relax style, just the environment they live and how stressful their life is? There are a lot of factors that cause the high blood pressure problem. So depending on what really causes the problem, you can, you know, seek out the options that . . .there are a lot of other remedies out there besides that bloodletting therapy.

CL: Is there a difference between—we've talked about diagnosis between Tibetan and Western medicine and treatment of it, but what about care? Care seems to come up a lot, especially in the news in the West now with what health care providers will pay for, won't, what doctors or hospitals will do. What are some of the different care techniques that you find between Western medicine and Tibetan medicine?

TL: Exactly, that is one of the point I was going to point out. In here, people . . . if somebody doesn't have insurance, health insurance or something like that, you know, they don't have a very good chance to see a doctor. But India and in Tibet, it wasn't like that at all. There's not even any health insurance, but people can just go whenever they are sick to see the doctor. Especially in Men-Tsee-Khang in Dharamsala, you know, we have this free medicine, no cost to older people, above sixty-five age. There's also discount charge for poor people, so stuff like that. So it's really accessible for the patient.

CL: I know that traditionally the payment system or how a patient is charged in Tibetan medicine is very different than Western medicine in that I know that in my own experience of going to Men-Tsee-Khang in Dharamsala, that you actually don't pay for

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seeing the doctor or anything like that. You pay for the medicine that the doctor prescribes to you—in most cases, at least. Is that different at Crocus Hill where you work now? Is there a charge for seeing you?

TL: Yes.

CL: Or is there just a charge for the medicine?

TL: Since it's the United States, you know, we probably should go through the same way how they practice over here. So, I'm working with . . . this is not my clinic. It's running under somebody else, so I'm doing the same thing as how people practice over here.

CL: When you came over and you started working, you said, you started working in a nursing home. Now, you're going through training to become a nurse, registered nurse, here in Minnesota. You've got a tremendous amount of history and experience dealing with one form of medicine, and now, I'm assuming that you're largely asked to abandon a lot of those techniques in your training now. How do you deal with that, not being able to address patients in the same way or to treat them in the same way?

TL: Actually, I'm not practicing like Tibetan medicine directly with the patient, but still, it's the same thing. I still able to whatever I had learned before explain and kind of advise to the patients. Like, even if I work as a nursing assistant at the hospital, I would just kind of be open with the patients, you know, what their problem is, and I ask whether the doctors will advise them not to eat certain foods. I kind of feeling that, you know, people really want to spend more time with the doctor here. In Western states here, doctors don't have much time. Either they're too busy or it's just the way they do it. They don't spend much time with the patients and patients really sometimes can get frustrated and not even a point on diet. Knowing that diet is really important, sometimes, I can just talk with the patients, like, "You should take care of certain diets. Diet is really important," and patients are really happy about knowing how diet plays importance in their life. So, in that way, you know, I kind of feeling that I was so proud to be a Tibetan doctor and I'm blessed that I still could learn something more about Western medicine, which I think that is really important to know both the system of medicine, not saying that Tibetan medicine is more important than Western or Western is more important that Tibetan. I think that everything in the universe works together. At the same time, this system, like, even there are different system, too, like Indian system of medicines or unionized system of medicine. I think it's important to every Tibetan doctors, and we should learn about Western medicine, too, so that, you know, it can help and develop more knowledge when you really know how to treat the patients also.

CL: Do you think that someday, or do you hope someday, to be able to practice more of that bridge between Tibetan and Western medicine?

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TL: Right. Exactly. I'm thinking that maybe in the future, you know, I will become a nurse here and then, if possible, set up a clinic over here. If not, maybe talk more on, like, what's the relationship between Western medicine and Tibetan medicine or stuff like that, to bring more knowledge to the people.

CL: Is there anyone in the community that you know that is fully practicing the traditional Tibetan medicine here?

TL: There are a lot of Tibetan doctors right now, not in Minneapolis, in New York and in other states. I don't think that really they are practicing . . .

CL: What kind of effect do you think that has on a community as large as the community here in the Twin Cities?

TL: What was the question?

CL: In the Twin Cities, we have the second largest Tibetan community in North America and so much of the community's actions are about preserving culture and holding onto things. But without that area of medicine, without someone being a full time practitioner and providing that service for the community, what effect do you think that has on the community?

TL: I think people are still really interested in taking Tibetan medicine, especially the older people, like I said before. At the same time I'm practicing Tibetan medicine here, you know, I feel more safe practicing on Tibetan people than with Caucasians, like I said. It's not really recognized yet. But I think, like I said, there's certain factors that still kind of places a barrier to set up a clinic. Well, it might be helpful if somebody knows how to really get education about how to set up a clinic. I think there must be some sectors or something that we really have to talk about. So maybe having a little knowledge about setting up this.

CL: Do you think there's something that could be done to—? You mentioned that there was a clinic being set up in Madison right now.

TL: Yes.

CL: Madison has a Tibetan population, but they have a significantly smaller population than we have here in the Cities. We've talked with other people throughout this project, and people have made statements about how many sponsors they were able to get in Minnesota in 1991 for the Tibetans that came over, sponsors that the Tibetans initially lived with. One of the reasons why the community is so large here is that there were just a large number of people that were willing to be sponsors here. So it seems as if Minneapolis should be geared for something like a clinic above almost anywhere else in the country because there are so many Tibetans here and so many Westerners that seem to know something about Tibet or be Tibetan-minded or Tibetan-friendly in some way.

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What do you think is holding the community back, the community as a whole, not just the Tibetan community, from accepting some of these practices?

TL: I remember one time when we talked at one of the bookstores downtown, they said that they were really glad that I was here practicing Tibetan medicine. One of the guys said, "Here, people in Minnesota are really open on alternative system of medicine," that is like Tibetan medicine. I heard before coming here it's really risky to practice any kind of natural herbal medicine. So that's why, I do know still really what could be the best step to take for what really started that. Maybe the Tibetan Association here should start doing something or . . . this is the second largest Tibetan population, like you said. Most of the Tibetans are still asking me like whether I wanted to set up a clinic here. I'm always telling that this is my interest to set up a clinic, but there are some risk factors, too, so that I really want some more knowledge about it.

TS: If a Tibetan in U.S. gets hospitalized, what kind of problems do they face? The orientation, like treatment, that they used to get in India or Nepal are very different from the U.S. Tibetan people who are hospitalized, what kind of problems do they face in the hospital? The hospital environment and then the treatment, doctor, and everything is so different from their tradition.

TL: I think one of the differences that . . . like in India, when they suffer, they go to the doctor and get some medicine. We don't really have, you know, it's not like in patient facility. I think there's one in Dharamsala, but not really another clinic, branch clinic. In Western, there's usually what you do is if you have a certain kind of, you know illnesses and if that . . . because you have to go through so much test, like x-rays and CT scans, you know, blood tests. That takes a lot of time. Usually, they put patients in the hospital for minimum two days. I think that could be one of the reasons, you know, the difference between how they are being, when they are ill in India and how they're being taken care of in the United States.

TS: So in the medical field, Tibetan medical field, are Tibetan women or men, which group is more represented or dominated?

TL: You mean regarding the disease?

TS: No. I mean the medical field, like are there more Tibetan women doctors or men doctors?

TL: I think it's the same. In our batch, we have twenty-three students and half boys and half girls.

TS: Is shamanism also a part of Tibetan medicine?

TL: I think it's one of the things that should be concerned about, yes. It's somewhat related.

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TS: Like how is it related? What do they do in shamanism?

TL: Depending on religion thing . . . I'm not so sure. I don't want to go deep into shamanism right now, but it is connected.

TS: So it's related to Tibetan medicine?

TL: Yes.

CL: You talked about, you know, as far as clinics are concerned in the community and whatnot—you talked a little bit about the community in general. How do you feel the community, in the medical sense or just in the larger sense possible, how do you think the community is doing here in the Twin Cities?

TL: In the Twin Cities, I think they are doing really good. The most difficult problem usually faced is they don't speak English, especially the older people. I think in the future, I think Tibetan people will do really well. I heard that even there are some students that do very good in the college and in the university. I talked a lot of youngsters here and they have a very good aim. They really enjoyed, here, being in the land of opportunity. They really wanted to open more and do more, whatever they can, because we're not used to that kind of thing before. People have more freedom.

CL: I know the community center, or the cultural center, has been a big acquisition for the community. A lot of people feel that it's really helped to strengthen the community now that they have a central place to go where activities can happen or teachings can happen, things like that. Do you feel the same way or do you have any reactions or feelings to the purchase of the cultural center?

TL: I think that . . . I don't see any problems with that right now. Instead, I feel like, you know, people are really are very helpful, kindhearted, and very open-minded and Tibetans are becoming more open-minded. I think that everything's going to go well in the future.

CL: Do you feel the need to preserve culture, preserve Tibetan culture, or do you think that there is—? Let me rephrase that for a second. Some people feel that the best way to preserve what is Tibet or what is Tibetan is through isolating the difference between Tibetan culture and Western culture and really focusing on that Tibetan-ness so that you don't lose it. While other people really feel that through integration more, by embracing both systems or both ideas or beliefs or whatnot, that's really going to strengthen the person as a whole and allow them to continue on doing whatever they're doing to preserve their culture. Do you have an opinion either way on that?

TL: I always feel like, you know, two ideas is always better than one idea. Like, being a Tibetan doctor, I feel that it always is better to have more knowledge for Western medicine so that you can cooperate more. At the same time, as the culture is . . . like if

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you are more open with the other culture, you get to know better, and you learn more, and, at the same time, you can develop more whatever you have before. So it's just an addition of knowledge, an addition of education. I think that it's also good to be, you know, more open-minded and learn as much as you can whatever is open out there. But, as a culture, I think people are still retaining, those like Tibetan people, especially the older people, they still have a lot of strong affection, love and affection, for our own culture. At the same time, there's also little, you know, fear that maybe the youngsters won't know the Tibet qualities maybe in the future. That's one of the things that usually, you know, parents at home have to concern with the young kids. They tend to speak in English and not in Tibetan, because they're so used to the English, like their Western friends. They spend most of their time in school speaking English. When they get home, it's kind of hard for them to speak two different when they're young. [Chuckles] Speaking is also one of the most important things saying which culture you're from. So I think that speaking should be really, you know . . . parents should really concern more on speaking than just other else.

CL: Do you think there's anything that the community as a whole needs to improve on, outside of emphasizing Tibetan language?

TL: Mmmm . . . I should say just learn everything, just learn everything out there, and keep on retaining your own basic knowledge.

TS: What are things that shocked you about the U.S.?

TL: The most shocking thing . . . I should say that people are so free here, so free in the sense like even, you know, when I was in school first day, the students are really free. [Chuckles] They get up and just move around the room without getting permission from the teacher or just the way they talk and all these things. I mean, people are really free here. So sometimes because of that excess free-ness, they just kind of overstep. So that's why I think that sometimes you encounter with, you know, other bad habits.

TS: What do you miss about India?

TL: India . . . I miss practicing Tibetan medicine. I still practice here, but not a whole like when I was in India. Then, basically, we're so used to eating Indian food. [Chuckles] [unclear] also. Then, my friends and people over there.

TS: Are you married?

TL: Not married.

TS: You said you are thirty-two. Do you still live with your parents?

TL: Yes.

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TS: Is it like part of tradition or—?

TL: Yes. It's a part of tradition. I think that's very common among Asian communities.

TS: Is it considered bad to move away from your parents or—?

TL: I don't think . . . I think maybe it depends on individual wish, individual opinion. But my concern that's really good to be with your family, so that, you know, you can connect more and can help each other more. That's always better, I think.

CL: Do you have anything else that you'd like to add or anything that you wanted to cover that we haven't?

TL: I think that we probably covered everything.

TS: You said you are taking classes here?

TL: Yes.

TS: So what are the similarities between Tibetan medicine and American medicine . . . despite all the differences?

TL: Similarities . . . Like I said, I'm going for a nurse line, right now, and I chose this line because, you know, since I practiced Tibet medicine before, and I was dealing people's problems, Tibetan health problems, and then being a nurse is also one of the best chance for me to help people when they're really in need. So I chose this line. Similarities—I think it's very similar as far as, you know, developing your good heart.

TS: So is Tibetan medicine more concerned with developing a good heart, like to cure the disease?

TL: Yes, developing a good heart is one of the basic things because every disease, it's started in the mind, because of, you know, influence from the mind that caused the problem. If a physician has a good heart and he can, you know, act better. He can treat a patient in a very calm way, and in that way, the way you talk with a patient, then patients will really change their mind. And expression is very important between patients and the physician.

TS: So, basically, in Tibetan traditional sense, happy people are those who don't suffer much. [Chuckles]

TL: Yes. Here in the United States, also, like, you know, I think . . . I remember I was just talking with one of the patients, and she is ninety-six years old, and she's still really hearty and like, she said to me that she never really had much problems in her life. Her teeth were just, you know, great, and I told her, "What's the secret behind all this healthy

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life?" and she said she's really happy all her life, not really stressful. That means, that mind plays a greater role in person's health.

CL: Do you think that's something that maybe Western medicine needs to emphasize more on, instead of just being reactionary in treating people?

TL: Yes, emphasize more on mind, and people really don't get much time to emphasize on their body and mind, because they're so busy with their daily routine over here. People just don't get the relation between those two. So it's more important to, you know, get more importance on their mind and body. I think it's important, too, like work on this always. [Laughter]

CL: We want to thank you very much for being part of our project.

TL: You're welcome. Yes. It's my pleasure.

TS: Thank you very much.

TL: Yes.

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