

A Challenge

to

Macrobiotic Healers

by Michael Rossoff

The most important element which macrobiotics offers to society is a sane, natural, practical medicine available to everyone. The reason that it can work for everyone is because it is based on a profound set of principles which brings to consciousness the full implications that man is the harmony between the macrocosm and the microcosm.

The focus of this article is to look at some of the hindrances to realizing the full potential of macrobiotics as medicine. I hope to open the way for a more thorough discussion of the points raised so that a growing clarity and increasing depth of meaning can emerge for each of us.

Some of the more immediate difficulties at the present stage of macrobiotic application are due to self-imposed limitations. Too often, ideas or viewpoints are either accepted too narrowly or without full reflection. This reflects a personal fear of developing one's understanding and application of macrobiotics as the culmination of his/her experiences and desire to help others. For example, it is assumed that brown rice is the perfect grain for all humans and that other grains are secondary or simply unnecessary. This a prevalent concept throughout macrobiotics. There is a need to broaden this concept to the understanding that whole grains are the principle food, with specific cultural applications. Without the willingness to make these applications we are actually mis-applying the true intent of macrobiotics.

In a similar way, there is a strong bias toward using only the most common (domesticated) vegetables and special Oriental vegetables. These choices are fine. However, there remains an entire world of "vegetables" called herbs which macrobiotic practitioners have been slow to investigate. Actually it is more accurate to say that these have been avoided as unnecessary in macrobiotic healing. There is a long history in our culture and many others of the simple, practical use of indigenous herbs. Common sense should tell us that these herbs have great potential healing powers. What we need to do is to extensively apply the Unique Principle in order to build a comprehensive understanding of their practical usage.

Another self-imposed limitation is the persisting idea that Yang is good and Yin is bad. Although everyone might quickly agree that this type of thinking is not valid, it still prevails when people do consultations or give advice. Indeed, even within their own minds there is a lingering sense of guilt associated with eating "yin foods." What is needed is to break a very deeply rooted dualistic bias which we all had before becoming macrobiotic. The truth is that most people have disguised it through the language of yin and yang and macrobiotics. Discovering the dynamics of yin/yang in food, in living and thinking is the most important challenge for all of us.

A final self-imposed limitation concerns the meaning of teacher/student. We are all students . . . of life, of macrobiotics, of George Ohsawa and of Michio Kushi. Most teachers/consultants are limiting them-

selves by staying strictly within a certain scope in the use of macrobiotics. If Michio Kushi, for example, has not introduced a particular subject, then it is assumed to be either unimportant, unnecessary, unacceptable or untrue. This reflects the student's fear to explore or experiment. It is not a matter of respect and gratitude. The real issue is the unwillingness to explore for one's self, to want to fathom and embrace the entire universe through a deep inner curiosity and acknowledge our own ability to exercise our fullest judgment. Our unique, individual potentials are greatly limited when we look only to Michio or others to provide answers or approval.

Macrobiotic medicine needs Western medicinal knowledge. For example, all macrobiotic consultants need to know human anatomy, physiology and basic pathology to qualify as consultants. This level of knowledge needs, of course, to be understood through the "eyes" of yin/yang. Still, the position and function of every part of the body must be learned and appreciated, because these give important depth and methods of approach to our practice. Furthermore, this helps our communication with doctors become more comprehensive and shows the patient our commitment to unifying traditional and modern medical practices.

Another important area to learn from Western medicine is the drugs which are prescribed. Almost everyone we see in consultation is taking or has taken a variety of drugs. It is necessary to know much more about them. Which are yin? Which are yang? Which should be continued? Which could be reduced and at what rate? And which can be stopped quickly or immediately? Without this understanding, we are placing ourselves in a naive position with the possibility of creating dangerous results. There is another side to drugs which needs both appreciation and investigation. What are the deep and long-term consequences of some of the more potent drugs? Some examples include the different chemotherapy drugs, dilantin (given for epilepsy) and birth control pills (hormones). Which organs or systems are more obstructed or seriously injured? And what are the different effects this may have on our recommendations?

When are Western medicines necessary in macro-

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biotic healing? This is a question that deserves more attention. It is arrogantly assumed that they are not needed. Is this always true? This question is not referring to emergency first-aid. The point is whether we can totally ignore Western medical therapy in specific, crisis situations. Some examples are: insulin shock, thyroid storm, epileptic seizures, schizophrenia, extreme and unrelenting pain, and severe asthmatic attacks. We need to learn when and why Western medications are necessary. At the same time, these crises should be a stimulus for us to further develop macrobiotics to deal with such dangerous situations more immediately and effectively.

Everyone who has tried to help others through macrobiotics has "successes" and "failures." We can learn a lot by our successes and be stimulated to improve the application of macrobiotics because of our failures. Some reasons why macrobiotics fails to heal (serious illnesses) are: (1) Past--The degree of the sickness, which has been existing for years, means that the time required for natural healing will be greater than for mild sicknesses. More often than not, the more serious the sickness the more intrusive and abusive forms of symptomatic therapies the individual has had. Furthermore, the whole time the person was having standard treatments, they were continuing to eat the very foods that had created their sickness, which compounds their imbalanced condition. (2) Present--The recommendations, no matter how accurate and appropriate, are unlikely to be applied by the client with the precision and quality required for true healing. This refers specifically to improper cooking, imbalanced proportions, poor chewing, over-eating, and secret binging. Often there is no family support, which is vital for the progressive phases of healing to continue smoothly. Further, there are erratic judgments and frequently an

unwillingness to change other aspects of lifestyle. And, most importantly, there is an unwillingness to learn more deeply about macrobiotics.

All of these are very significant factors for explaining why macrobiotics does not heal many people's serious conditions. Still, they are not enough. Or rather, there is a common tendency among us to quickly use these as a rationale for failure, instead of stopping to reflect on our part in the failure. To so quickly rationalize the failures is to minimize our learning and growth. Everyone we attempt to help is teaching us so many things, if we are open to seeing, hearing and understanding. So, again, our failures can stimulate us to delve deeper into the practice of macrobiotic healing.

Many macrobiotic healers are themselves afraid to experiment with the fuller scope of healing practices. These wider dimensions include emotional, psychological and spiritual growth. If we present a front to the public that we know everything, then there is no room to grow, either from the people we are advising or from other holistic approaches. Thinking we have all the answers is a dangerous protective device because it eliminates our full communication and sensitivity on the total spectrum of relationships. These attitudes weaken macrobiotics as a social force and as a springboard for personal development.

We know that everything changes. We appreciate the wonders of the universe. We can marvel at the endless variety of human expression, experiences and conditions. No one is above improvement and further development. Let us use the magic of macrobiotics to transform us more and more, with an open caring for each other and desire to be real companions in the world. The development of macrobiotics requires that we share and grow together. Only through our maturing will macrobiotics mature enough to be a great presence in the world.