

Original Research Article

Oral records and research on intangible cultural heritage inheritors of Yi ethnic medicine

Bochao Li

Sichuan College of Traditional Chinese Medicine, Mianyang, Sichuan, 621000, China

Abstract: As a national-level intangible cultural heritage (ICH), the living inheritance of Yi Ethnic Medicine relies heavily on the oral and hands-on transmission among inheritors. From the perspective of ICH protection, this paper sorts out the core value of oral records of Yi Ethnic Medicine inheritors, analyzes the inheritance characteristics and practical dilemmas reflected in these records, and proposes inheritance paths including standardized collection, digital archiving, and diversified dissemination. It aims to provide practical references for the systematic protection and innovative development of Yi Ethnic Medicine as an ICH resource.

Keywords: Yi ethnic medicine; intangible cultural heritage; inheritors; oral records; living inheritance

1. Core value of oral records for the inheritance of Yi ethnic medicine as ICH

With a thousand-year accumulation, Yi Ethnic Medicine has formed a knowledge system integrating regional characteristics and ethnic wisdom. Its inheritance has long relied on the living mode of "oral transmission and hands-on teaching", and many precious techniques and clinical experiences have not been documented in writing. Oral records, through the systematic collection of inheritors' personal memories, have become a key means to rescue such endangered resources.

From the perspective of knowledge preservation, oral records can fully capture the practical details and cultural connotations of Yi Ethnic Medicine. Inheritors' oral accounts include not only diagnosis and treatment plans for specific diseases, medicinal material identification and processing techniques, but also healing concepts related to the Yi people's "Ten-Month Solar Calendar" and the folk medical characteristics of "integrating divine and medicinal therapies"^[1]. These contents are vivid materials that cannot be replaced by written records. Through oral documentation, scattered single prescriptions, proven prescriptions, and clinical experiences in inheritors' memories can be systematically organized, making up for the relative lack of theoretical literature on Yi Ethnic Medicine.

In terms of inheritance continuity, oral records provide concrete learning models for young inheritors. Currently, Yi Ethnic Medicine faces a crisis of aging inheritors and a sharp decline in potential successors, with some techniques at risk of being lost as practitioners pass away^[2]. Oral records solidify core techniques in audio and video formats, combined with detailed records of inheritors' on-site demonstrations, which can lower the threshold for inheritance and provide standardized reference materials for academic education and folk transmission. In addition, the mental journeys and professional experiences contained in oral records help cultivate cultural identity and professional commitment among successors.

From an academic research perspective, oral records provide first-hand data for interdisciplinary studies on Yi Ethnic Medicine. These records include not only medical diagnosis and treatment mechanisms but also cultural information in ethnology, folklore, and other fields, offering empirical support for analyzing the inherent connections between Yi Ethnic Medicine, geographical environments, and ethnic customs, and promoting its development from experiential medicine to a standardized and scientific discipline.

2. Core content and characteristics of oral records of Yi ethnic medicine ICH inheritors

2.1. Core content dimensions of oral records

The oral content of Yi Ethnic Medicine inheritors presents multi-dimensional characteristics, which can be mainly summarized into three categories. Firstly, the context of technical inheritance, including the transmission process of core techniques in family or master-apprentice inheritance, such as the formula ratio and production

process of Yi ethnic medical water paste therapy, and the traditional processing technology of Boyun Ding (a famous Yi ophthalmic medicine)—Both national-level ICH projects. Secondly, clinical practice experience, covering diagnosis and treatment plans for common diseases such as rheumatoid arthritis, eczema, and fractures, as well as the application scenarios and efficacy observations of single prescriptions and simple formulas for intractable diseases. These contents confirm the regional adaptability of Yi Ethnic Medicine in "treating diseases prevalent in the living environment". Thirdly, the interpretation of cultural connotations. Inheritors' oral accounts often involve the connection between Bimo culture and medical theories, as well as health preservation concepts related to ethnic festivals and dietary customs, reflecting the cultural characteristic of "integration of medicine and customs".

2.2. Inheritance characteristics reflected in oral records

Distinct inheritance characteristics can be clearly identified from oral records. In terms of inheritance mode, vertical succession—i.e., the traditional mode of "transmission within the family and not outside" or "oral transmission from master to apprentice"—Remains dominant, while new forms of horizontal exchange under government intervention have also emerged. In terms of inheritance content, there is a tendency of "valuing practice over theory". Inheritors' oral accounts mostly focus on specific diagnostic and therapeutic operations, with relatively scattered explanations of theoretical systems, which is closely related to the development path of Yi Ethnic Medicine relying on practical experience accumulation. Geographically, oral resources are mainly concentrated in Yi-inhabited areas of Yunnan, Sichuan, and Guizhou provinces, with Yunnan accounting for 70% of the identified inheritors, making it the core region for oral record collection.

3. Practical dilemmas of oral records of Yi ethnic medicine ICH inheritors

Despite their important value, oral records face multiple challenges in practice. Firstly, insufficient standardization in collection. Some oral records lack standardized processes, with incomplete documentation of core information such as inheritors' years of practice and proficiency in techniques. They also fail to fully combine field surveys for cross-validation, affecting the academic credibility of oral materials. Secondly, low digitization level. Existing oral resources are mostly scattered in audio or text formats without a unified digital archive, leading to difficulties in retrieval, vulnerability to damage, and poor sharing—Failing to meet the requirements of "digital protection" for ICH^[3].

The status of inheritors themselves also restricts the quality of oral records. Some elderly inheritors have limited educational backgrounds and express themselves incompletely, while some core techniques are not fully disclosed due to the tradition of "secrecy". Meanwhile, the shortage of young inheritors results in insufficient in-depth understanding of traditional techniques in their oral accounts, leading to information gaps. In addition, insufficient funding support makes it difficult to sustain oral collection work, and many techniques of inheritors in remote areas have not been timely recorded, facing the risk of extinction as inheritors age^[4].

4. Optimized inheritance paths based on oral records

4.1. Standardize the oral record collection process

Establishing standardized collection norms is fundamental to improving the quality of oral materials. A professional team consisting of personnel from medicine, ethnology, and archival science should be organized to sort out the core technical list of Yi Ethnic Medicine in advance and design differentiated interview outlines for different inheritance types. During collection, on-site observation methods should be combined to simultaneously record practical links such as inheritors' diagnosis and treatment operations and medicinal material processing, fully presenting technical details through multiple media such as images and photos. Meanwhile, an audit mechanism for oral materials should be established, combining literature research and multi-party verification to ensure the authenticity and completeness of records.

4.2. Build a digital archiving and sharing platform

Relying on digital technology, establish a digital archive database for oral records of Yi Ethnic Medicine. Standardize the cataloging of collected oral audio, video, and text materials, and classify them into dimensions such as medicinal material identification, diagnostic techniques, and cultural connotations to achieve efficient retrieval and long-term preservation of resources. Drawing on the experience of digital resource construction for Yi oral archives in Yunnan, build a provincial or national-level sharing platform with functional modules such as an inheritor database, technical video library, and interactive learning area, ensuring resource security while

providing convenient channels for inheritance learning and academic research.

4.3. Promote diversified dissemination and application of oral resources

Transform oral record resources into diversified inheritance carriers, develop standardized textbooks for academic education, produce popular teaching videos for folk inheritance, and create communication products such as short videos and VR experiences for public science popularization to enhance the social recognition of Yi Ethnic Medicine. Meanwhile, integrate core techniques from oral records with the big health industry, develop related health products and cultural tourism experience projects, and feed back the continuous collection and inheritance of oral resources through industrial development.

4.4. Strengthen the training and protection of inheritors

Improve the identification and incentive mechanism for inheritors, incorporate contributions to oral materials into the evaluation system of inheritors, and encourage them to participate in oral collection and inheritance teaching. Establish special funds to support inheritors in carrying out master-apprentice inheritance activities. At the same time, cooperate with academic institutions to set up professional courses on Yi Ethnic Medicine, and conduct practical teaching combined with oral record resources to cultivate compound inheritors with both traditional techniques and modern literacy.

5. Conclusion

Oral records of Yi Ethnic Medicine ICH inheritors are the core carrier of living protection. Their value lies not only in preserving endangered knowledge but also in building a bridge between tradition and modernity. Faced with current inheritance dilemmas, it is necessary to adopt measures such as standardized collection, digital archiving, diversified dissemination, and comprehensive protection to ensure that the wisdom contained in oral records is systematically preserved, widely disseminated, and innovatively applied, enabling this precious ICH resource of Yi Ethnic Medicine to thrive in the contemporary era.

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