

# 11 Moving Beyond Biomedicine: Medical Pluralism

## Learning Objectives

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- Describe medical pluralism through a social constructionist perspective
- Explain why alternative medicine is on the rise
- Compare and contrast alternative medicine in relation to “traditional medicine”
- Organize and distinguish between three research streams dominant in complementary alternative medicine (CAM) research
- Theorize the effect of social location on alternative medicine
- Explain “pragmatic acculturation” or crossing cultural boundaries in pursuit of health and wellness

## Summary

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This chapter, through a social constructionist perspective, introduces medical pluralism—the notion that there are differing, culturally-based beliefs for practicing medicine. This is often referred to as alternative medicine, an approach that confronts much controversy, especially among the mainstream medical profession. In western cultures, since the rise of medical dominance, alternative medicine has been frowned upon. That being said, alternative medicine persists and even is on the rise as a healing practice.

Alternative medicine is a term that describes health treatment that is not biomedicine. Complementary medicine is when an individual uses both biomedicine and alternative medicine to treat their health condition, and this is referred to as complementary alternative medicine (CAM). There are three research streams associated with CAM: medical, epidemiological and social scientific.

The use of alternative medicine varies by social location. Women who are more affluent and experience chronic health problems are more likely to use alternative medicine than their male counterparts. What continues to be unclear is why people pursue alternative health care. One explanation is changing population demographics; older people experience more chronic health problems such as arthritis, which biomedicine has not effectively treated. A second explanation is an overall dissatisfaction with the impersonal care biomedicine offers. A third explanation is a mistrust of biomedicine, and this is referred to as the postmodern condition. The fourth reason offered is that individuals are product of a consumerist culture, and embody an individual responsibility for health ideology.

The term “pragmatic acculturation” captures the increasing trend of different cultures borrowing ideas or methods for practicing medicine from one another, offering alternative ways of pursuing health and wellness. The pursuit of alternative treatment is an outcome of social location in combi-

nation with dissatisfaction with biomedical care underpinned by a consumerist ideology. Ethnicity in relation to health and wellness is now viewed as a form of cultural capital. Thus, increasingly, there is a coupling of alternative and traditional western medicine (integrative medicine), where a physician will draw on massage therapies as well as anti-inflammatory medication to treat a patient with a back injury. Integrative medicine is based on the belief that the mind and body are connected, the approach to medical practice is client-centred, and that medicine should draw on evidence-based research on alternative therapies when treating patients. Aside from all the benefits that an integrative approach has to offer, it is highly contentious both among physicians who are committed to a biomedical focus and alternative practitioners who believe that biomedicine is not only unwilling to relinquish its dominance in alternative practices but also there is no pressure to do so as the State supports biomedical care. The textbook authors believe that integrative medicine supports a neoliberal agenda, which promotes individual responsibility for one's health and healthcare.

## Key Concepts/Terms

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**Allopath:** A term referring to the treatment of disease using remedies whose effects differ from those produced by the disease (p. 363).

**Alternative medicine:** Forms of health care that are used instead of biomedical care (p. 363).

**Complementary medicine:** Forms of health care that are used alongside biomedical care (p. 363).

**Health belief system:** A systematic set of ideas with regard to health, healing and self-care that are shaped by aspects of culture and social location (p. 356).

**Holism:** An approach to understanding the world that views whole entities as made up of more than the sum of their parts (p. 372).

**Integrative medicine:** A form of health care that brings together complementary alternative medicine treatments that have been scientifically proven safe and effective with conventional biomedical treatments (p. 372).

**Medical pluralism:** The coexistence in a society of differing medical traditions grounded in different cultural principles or based on different world views (p. 356).

**Pragmatic acculturation:** The borrowing of ideas, ways of thinking, or ways of doing things from a culture that is not one's own for the purpose of solving particular problem such as illness (p. 368).

## Study Questions

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1. What is medical pluralism?
2. What is the relationship between alternative medicine and biomedicine?
3. What does the term “stereotypes of marginality” refer to?
4. What does the term “allopath” refer to?
5. What group of people is more likely to use alternative medicine?
6. Why is alternative medicine on the rise?
7. What is pragmatic acculturation?
8. What is integrative medicine?
9. What factors support the continued dominance of biomedicine in health care?

## Explore and Discuss Questions

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1. Foucault wrote that health could be viewed as “a cultural fact.” Discuss.
2. There are three research streams associated with complementary alternative medicine. What are they and how do they differ?
3. Alternative medicine, according to the *Canadian Community Health Survey*, is on the rise. Does alternative medicine usage vary by social location? How do you explain the growing trend in alternative medicine?
4. Integrative medicine is a practice style that combines both mainstream and alternative practices. Some scholars believe that integrative medicine will never be fully realized in mainstream medicine practice. Discuss.

## Further Exploration

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## Recommended Films

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1. **The Business of Being Born (2008)**

Compelled to find answers after a disappointing birth experience with her first child, actress Ricki Lake recruits filmmaker Abby Epstein to explore the maternity care system in America. Focusing on New York City, the documentary reveals that there is much to distrust behind hospital doors and follows several couples who decide to give birth on their own terms.

<http://www.thebusinessofbeingborn.com/>

2. **... First Do No Harm (1997)**

This feature film is a story of one woman’s struggle against a narrow-minded medical establishment.

[https://en.wikipedia.org/wiki/...First\\_Do\\_No\\_Harm](https://en.wikipedia.org/wiki/...First_Do_No_Harm)

## Recommended Websites

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1. **Birth & Midwifery in Canada: Resources for Parents and Practitioners**

“We’ve been serving midwives, birth enthusiasts and your community since 1986. Through networking and education, Midwifery Today’s mission is to return midwifery care to its rightful position in the family; to make midwifery care the norm throughout the world; and to redefine midwifery as a vital partnership with women.”

<http://www.midwiferytoday.com/international/canada.asp>

2. **Canadian Association of Naturopathic Doctors**

The Canadian Association of Naturopathic Doctors (CAND) is the national non-profit professional association representing regulated (or, in unregulated jurisdictions, those who meet the criteria for regulation) naturopathic doctors.

<http://www.cand.ca/>