Copyright is owned by the Author of the thesis. Permission is given for a copy to be downloaded by an individual for the purpose of research and private study only. The thesis may not be reproduced elsewhere without the permission of the Author.
THE PRACTICE OF CHINESE MEDICINE
IN NEW ZEALAND

A thesis presented in partial fulfilment of the requirements for the degree of Master of Arts in Social Anthropology at Massey University

Kim Gloria Baxter
1997
ABSTRACT

Chinese medicine has been practised throughout history in a variety of forms in a variety of countries. This study is concerned with discovering the particular form Chinese medicine has assumed in New Zealand. Data was collected by means of an ethnographic survey of 39 practitioners and 130 patients of Chinese medicine from throughout New Zealand. The thesis explores three main areas: first, what types of Chinese medical practices exist in New Zealand; second, who seeks and supports Chinese medicine as a health therapy in New Zealand; third, the perspectives that practitioners and patients of Chinese medicine have on the practice of Chinese medicine in New Zealand. An attempt is made to balance quantitative results with the qualitative descriptions and observations of the research participants. Primarily this thesis has been written with the needs of the research participants in mind - to be an independent source of information for them. Currently, Chinese medicine has no legislative protection in New Zealand, and there are a great variety of practitioner groups and practitioners practising “Chinese medicine” (particularly acupuncture) here. The research findings suggest that the practice of Chinese medicine in New Zealand has many forms, and is frequently fragmented and mixed with other health therapies. It is concluded that adaptation to context, including the presence of “non-Chinese” therapies, is a positive feature of Chinese medicine that long predate its arrival in New Zealand.

KEYWORDS: CHINESE MEDICINE; ACUPUNCTURE; ALTERNATIVE AND COMPLEMENTARY MEDICINES; ETHNOGRAPHY.
ACKNOWLEDGEMENTS

Many people have supported and contributed to this project, not all of whom appear in this thesis. I would like to begin by thanking all the practitioners and patients of Chinese medicine for their participation, particularly for their candour and openness. Special mention is due to the members of the New Zealand Register of Acupuncturists, the New Zealand Physiotherapy Acupuncture and Pain Modulation Association, and the Medical Acupuncture Society of New Zealand who took the time to explain their views on the practice of Chinese medicine in New Zealand. Second, I wish to thank my thesis supervisor, Professor Margaret Trawick for her enduring support and encouragement. Thanks also to Henry Barnard and Professor Jeff Sissons for their advice and help with administrative matters, and to Mrs Ann Austin for checking and editing the grammar and punctuation of this thesis.

I would also like to gratefully acknowledge the Health Research Council for its grant to Professor Trawick to conduct pilot research on the health cultures of Asian immigrants to New Zealand. Part of the grant was used to defray travel, accommodation, and other expenses incurred during this research. It was when the project was well underway that we learned that “Chinese medicine” is practised here by a large number of non-Chinese people! In addition, I am appreciative of the Kakano Fund grant from the New Zealand Association of Social Anthropologists, which has enabled the printing of extra copies of this thesis for distribution to the libraries of the different Chinese medicine practitioner associations involved in this study.

Finally, I would like to thank my parents whose support, understanding, and strength throughout the highs and lows during the period in which this thesis has been written, has sustained and strengthened me. Thanks also to my friends for their advice and support - especially for reminding me that my work is important. Last but not least, thanks to my son who has been a blessing and inspiration to my life - and furthermore, who has taught me how to make the most of each day!
PREFACE

I am not a practitioner or authority on Chinese medicine, consequently this thesis is not an expert’s exposition on the topic. Rather, it is the product of fieldwork research involving observations of treatment sessions, interviews with practitioners of Chinese medicine, patient and practitioner questionnaires, and library research. As a researcher in the field of social anthropology, my position as a non-medically trained person with little previous experience of Chinese medicine, meant that I often wondered if I was qualified enough to be researching the topic of “The Practice of Chinese medicine in New Zealand”. What I could offer to this project was simply an unpartisan approach, with skills in researching and writing about culture and society, an interest in Chinese medicine, and a Chinese heritage.

My interest in and choice of the topic of Chinese medicine arose due to three main influences. First, during my final year in undergraduate studies at university, I took a paper called “Systems of Healing”, which opened my eyes to the different worlds of healing. During that year, we learned about the health practices and views which exist in different cultures, including Chinese medicine, Ayurvedic medicine, and Western medicine. It was then that I began to learn that “health” and “medicine” are understood and practised in many different ways, and my interest in and respect for healing traditions outside the boundaries of “Western medicine” grew. Before this, the healing worlds outside “orthodox” Western medicine were entirely invisible to me, as neither I nor my family or friends had needed to search outside Western “biomedicine” for health care. As a result of my studies, I began to see the important role that “alternative”/“complementary” medicine can have in people’s lives, culture, and their attitudes to health care.

Second, the topic of Chinese medicine interested me particularly because of its approach to health and healing. I was especially interested in the theories of yin and yang, and the connection of our health and well-being to the wider scheme of things, for example, our physical, social, and mental environments. As I read through the translations of the oldest Chinese medical texts, the “Huang-di Nei-ching” - the Inner Classic of the Yellow Emperor, compiled by unknown authors between 300 and 100 BCE (Kaptchuk, 1983:23) - I was surprised to learn that “Chinese medicine” has many incongruent and even
conflicting traditions within it. In this pluralistic tradition, the old is not replaced by the new, rather systems practised exist along side each other (Unschuld 1985). The more I learned about Chinese medicine, the more I became interested in understanding how it is being practised in New Zealand, who is practising it, and who seeks it as a therapy.

Finally, on a more personal note, being half Chinese, I was motivated to learn about Chinese medicine because it was also a part (albeit remote) of my heritage. This was important to me, as a researcher, for personal and ethical reasons. My maternal grandmother and other relatives, although they live outside China and have mostly settled in Papua New Guinea and Australia, do still seek Chinese medicine as well as Western medicine for their health care needs. Nevertheless, being half Anglo-Saxon, I was raised according to Western standards and culture, and my immediate family prefers to rely on Western “biomedicine”. So, for me, this project was a chance to explore and reacquaint myself with the other half of my distant culture and heritage. Therefore, my approach to this research topic, was not just a quest for knowledge, but also a personal inquiry with a motivation to connect with people and learn from them about a tradition that is distant, but also related to me.

Although the participants in this research project come from many varied backgrounds and viewpoints, they each in their own way celebrate choice in the health care options available to our multi-cultural New Zealand society - for the benefit of working towards good health for all. This thesis has been written for them and is dedicated to them.
CONTENTS

Abstract i
Acknowledgements ii
Preface iii
List of Figures vii

Introduction
Chinese Medicine as a Research Topic 1
The Focus of this Research 2
The Structure of this Thesis 5

1. What is Chinese Medicine?
Section One: Sorting through Traditions of Literature
Interpretations and Representations of Chinese Medicine 7
The First Current: The Idealisation of Chinese Medicine 9
The Second Current: The Scientism of Chinese Medicine 14
The Third Current: Contextualizing Chinese Medicine 21
Beyond the Three Currents 25
Section Two: What is “Chinese Medicine” in New Zealand? 26
The Macro-Level: The New Zealand Health Sector 27
Historical and Political Context 30
The Micro-Level: Practitioner Associations 33

2. Research Methods
Introductory Discussion 45
The Research Process: - Research Design 48
- Methodology 49
- Ethical Issues 55
- The Research Process and the Problems Experienced 56

3. The Practice
Section One: The Clinic 66
Section Two: The Treatment 76
- The Type of Treatments Available & the Types of Disorders, Illnesses and Injuries that are Most Often Treated.

4. Practitioners and Patients of Chinese Medicine in New Zealand
Section One: Practitioner Profile 94
Section Two: Patient Profile 105
5. Chinese Medicine as a Mixed Method

Section One: Perspectives on the Treatments 117
Section Two: Explaining and Understanding the Treatments 125
Section Three: The Place of Chinese Medicine in New Zealand 138

Conclusion
Chinese Medicine and Kiwifruit 145
Suggestions for Further Research 147

Appendices:
1 Letter of Introduction, Research Proposal, Participation Invitation Slip, and Reference sent to Practitioners of Chinese Medicine throughout New Zealand 148
2 Questionnaire Survey for Practitioners of Chinese Medicine in New Zealand 151
3 Questionnaire Survey for Patients of Chinese Medicine in New Zealand 161
4 Letter to Patients enclosed with Patient Questionnaire 169
5 Summary of Personal Data: Practitioners and Patients 170
6 Patient Data: Summary of Ailments 175

References Cited 176
List of Figures

Chapter One:
1  a) Articles on Acupuncture Indexed on Medline 1966-85 16
   b) Cumulative Growth of Complementary Therapy Articles
      Indexed on Medline 1966-1985 16
      (Leibrich, Hickling, and Pitt 1987:25-6)
2  How the New Zealand Health Care System Fits Together 29
   (Shipley:11)

Chapter Two:
3  Practitioner Responses to this Research Project 51
4a  Research Methods used During the Research Process 57
4b  Chinese Medicine Practitioners and their Associations 63

Chapter Three:
5  Figure: *Practitioners* 1.1a, Location of Practitioner Clinics 67
6  Table 1 - A Summary of Clinic Characteristics 68
7  Figure: *Practitioners* 1.2a, Number of TCM Practitioners
       Working at the Clinic 70
8  Figure: *Practitioners* 1.2b, Percentage of Practitioners:
       Other Staff Employed at the Clinic 71
9  Figure: *Practitioners* 1.3, Practitioner Clinics:
       Patients Treated Per Day 72
10 Figure: *Practitioners* 1.4, Clinic Opening Hours 74
11 Figures: *Practitioners* 1.1b, Reasons for Choice of Clinic Location 75
12 Figure: *Practitioners* 2.1, Percentages of Treatment Types Offered 76
13 Table 2 - A Summary of Treatment Characteristics 77
14 Figures: *Practitioners* 2.1a, Frequency of the Practice of
       Acupuncture, Acupressure, Herbal Medicine, and Reflexology by Practitioners 79
15 Figure: *Practitioners* 2.1b, Percentage of Practitioners:
       Further Treatments given Frequently or Occasionally 81
16 Figure: *Practitioners* 2.3a, Duration of a Treatment Session 83
17 Figure: *Practitioners* 2.3b, Average Number of Treatments
       it Takes to “Cure” Patients 84
18 Figure: *Practitioners* 2.2, Disorders, Injuries, or Illnesses
       Most Often Treated at the Clinic 87
19 Figure: *Practitioners* 2.4, What Practitioners Say they are

1 The figures in Chapter Three, Four, and Five have been numbered according to the corresponding
question in practitioner or patient questionnaires (see Appendices 2 and 3). For example, “Figure:
*Practitioners* 4.1a” refers to the practitioner questionnaire, section 4, question 1. In addition, as a result
of the combination and comparison of practitioner and patient data, particularly in Chapters Four and Five,
figure numbering may not appear in sequence.
Chapter Four:

23 Figure: Practitioners 4.1a, Percentage of Practitioners: Degrees/Qualifications Achieved 95
24 Figures: Practitioners 4.1b, Countries where Practitioners’ Qualifications Obtained 96
25 Figure: Practitioners 4.2, Practitioners: Length of Time Working as a Practitioner of Chinese Medicine 97
26 Figure: Practitioners 4.3, Practitioners: Length of Time Practising TCM in NZ 97
27 Figure: Practitioners 4.4, Percentage of Practitioners: Countries where TCM Practitioners have Practised 98
28 Figure: Practitioners 4.6a, Percentage of Practitioners: Other Training or Occupations 98
29 Figure: Practitioners 4*, Practitioners: Parents’ Occupations 99
30 Figure: Practitioners 4.5, Percentage of Practitioners: Reasons for Becoming a TCM Practitioner 99
31 Figure: Patients 1.1, How Did You Find Out About This Clinic? 106
32 Figure: Patients 1.1(4), Composition of: (4) Referred by Others 107
33 Figure: Patients 1.2, Ailments that Patients Identify for which they Seek Chinese Medicine Treatment 108
34 Figure: Patients 2.4, Patients: Anticipated Time to Curing of Ailment 109
35 Figure: Patients 2.1, Patients: First Visit to the Clinic 110
36 Figure: Patients 2.2a, Amount of Time Patients have been Undergoing Treatments 110
37 Figure: Patients 2.3, Number of Times per Week Patients Visit the Clinic 111
38 Figure: Patients 2.5, Patients: Reasons for Seeking Treatment at this Clinic 112
39 Figure: Practitioners 3.7a, Practitioners: Percentage of Patients who Receive ACC 115

Chapter Five:

40 Figure: Practitioners 4.6b, Practitioners: Treatments Used in Combination with TCM 119
41 Figure: Patients 2.2b, Number of Treatments Patients have had 122
42 Figure: Patients 1.4, Treatments that Patients Say they have had Before 122
43 Figure: Practitioners 3.2, Treatments which Practitioners Say are Most Popular with the Patients 123
44 Figure: Patients 2.8, Patients: Other Methods of Treatments Sought 124
45 Figure: Patients 2.10, Is Interaction with TCM Practitioner Different from Biomedicine Trained Doctor? 126
46 Figure: Practitioners 3.6, When Practitioners Explain the Treatment to their Patients 126
47 Figure: Practitioners 3.5, How Practitioners Explain the Treatment to their Patients 130
48 Figure: Practitioners 3.3, Conceptions that Patients have about Treatment when Beginning Treatment 132
49 Figure: Practitioners 3.4, Patients Understanding, Awareness and Curiosity in the Principles of TCM Treatments 133
50 Figure: Patients 1.5, Patients Explain the Cause of their Present Health Problem 135
51 Figure: Patients 1.6, Patients Explanations of How their Treatments Work 137
52 Figure: Patients 1.8a, How Well Practitioners Explain the Treatments and the Principles Behind the Treatment 138
53 Figure: Practitioners 4.7, Percentage of Practitioners: Present Place of TCM Within the NZ Health System 140
54 Figure: Patients 2.10a, Patients: The Place of Chinese Medicine in NZ 141
55 Figure: Practitioners 4.10, Practitioners: Should there be More Control Over the Practice of TCM in NZ? 142