Integrative medicine: A contested practice

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Abstract

In contemporary Western society, the healthcare arena has become increasingly technology-based, rationalised and specialised with alternative forms of medicine being taken up alongside orthodox medicine. This shifting healthcare terrain has brought forth challenges to practitioners' and patients' identity and to the practitioner-patient relationship. Today, the expertise and autonomy underpinning general practitioners' professional identity has been challenged. In parallel, patients have become reconceptualised from subjects in need of medical expertise, to 'informed' and 'active' health consumers. Within this fluid healthcare arena integrative medicine (IM) is emerging, a practice which amalgamates orthodox medicine with forms of alternative medicine. This emerging form of healthcare produces a number of paradoxes. These occur around the paradigm clash between treatment philosophies, issues of professionalism and the standardisation of treatments, power relationships and debates around dominance and subordination, and issues relating to patient autonomy and treatment responsibility. A discursive analysis of IM practitioners' and patients' talk reveals that the practice of IM gives rise to a number of contradictions and challenges for both IM practitioners and patients. Practitioners draw on discourses of holism, liberal humanism, spirituality and empowerment to construct IM as a healthcare model which maintains elements of both allopathic and alternative medicine in place, but also to legitimate practices inherent in IM. Through doing so, they reconstruct their medical professional identity. In conjunction, patients' draw on practitioners' extended knowledge-base and open-mindedness to construct IM practitioners as trustworthy professionals and to legitimate their own engagement in exploratory forms of treatment. This has implications for patients' and practitioners' subjectivity. Patients become individuals who deserve to be understood on a multitude of levels: psychologically, spiritually, emotionally and physically through which they gain recognition. Concurrently, practitioners' become placed in a paradoxical position with respect to their practice. They resolve this by resisting the position of biomedical expert and by incorporating a range of alternative medicine treatments to extend the healthcare they offer to patients. In conclusion, the practice of IM is shown to legitimate patients' engagement in self-reflexivity practices and to reproduce Cartesian dualism. Further, the research reveals how discourses of holism and empowerment, that are held to represent the fundamental difference between allopathic and alternative medicine, are drawn on by practitioners to legitimate a more in depth practice and a deeper level of

engagement with patients. Finally, the research questions whether IM constitutes a truly 'integrative' medicine.

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To Dad, with love

Table of Contents

Abstract ii
Acknowledgements iv
Table of contents v
List of tables vii
Abbreviations viii
Terminology ix

Chapter 1:
Healthcare in context **1**
Introduction 1
The impact of medicalization and pharmaceuticalisation on society 5
The fluidity of medical professionalism 7
The emergence of the healthcare consumer 11
Healthcare in contemporary New Zealand 14
Conclusion 17

Chapter 2:
The growth of alternative medicine; the emergence of integrative medicine **19**
The growth of alternative medicine 20
The professionalisation of alternative medicine 23
The problem of defining integrative medicine 25
The paradoxes of integrative medicine 29
The incommensurability of alternative medicine and allopathic medicine 29
The contradictions underlying holism and empowerment 31
Professionalism, best practice and autonomy 33
Conclusion and implications 33
Research objectives 35

Chapter 3:
Methodology **37**
Theoretical underpinnings 38
An initial foray into the field of integrative medicine 43
Participants 45
Method 47
My reflections on the interview process 50
Data analysis 52

Chapter 4:
Practitioners' talk: Reconstructing medical professional identity **56**
A holistic practice and "a whole different philosophy" 57
Patient-centred medicine: The provision of personalised care and compassion 65

Reconstructing expertise and facilitating education through 'best practice' and 'good doctoring' ... 71
'Best practice' ... 73
'Good doctoring' ... 76
Conclusion ... 81

Chapter 5:

Practitioners' talk: Reconstructing the patient ... 86
The patient's treatment pathway: A perpetual journey ... 87
The patient: A complexly interconnected "whole person" ... 93
"Optimal health" and "ultimate healing" ... 98
Illness as transformative ... 102
Conclusion ... 105

Chapter 6:

Patients' talk: Recognition, trust and responsibility ... 107
The integrative medicine patient: A collaborator and a 'normal' citizen ... 108
The collaborator ... 108
Recognition and constructing the 'normal' citizen ... 111
The integrative medicine practitioner: A professional to trust ... 117
The integrative medicine practitioner-patient relationship ... 122
Integrative medicine treatment: Holistic medicine and responsibility for health ... 127
Health, illness and wellbeing ... 135
Conclusion ... 141

Chapter 7:

Discussion ... 145
The positioning of practitioners and patients within and by integrative medicine ... 146
How do integrative medicine practitioners resolve the paradoxical position they are shown to occupy? ... 149
Is integrative medicine integrative ... 151
My reflexive engagement with the research ... 153
Future directions ... 156

References ... 158

Appendices ... 170
Appendix A: Practitioners' information sheet ... 170
Appendix B: Patients' information sheet ... 172
Appendix C: Locality assessment form ... 174
Appendix D: Interview guide for practitioners ... 176
Appendix E: Interview guide for patients ... 177
Appendix F: Ethics approval ... 178

List of Tables

Table

1 Practitioners' sphere of alternative medicine practice, duration of experience and patient participants treated 44

Abbreviations

AIMA	Australasian Integrative Medicine Association
CAM	Complementary and alternative medicine
DHB	District health board
DTCA	Direct to consumer advertising
EBM	Evidence-based medicine
GP	General practitioner
HPCA	Health Practitioners Competence Assurance Act (2003)
IM	Integrative medicine
MACCAH	Ministerial Advisory Committee on Complementary and Alternative Health
PHO	Primary health organisation
RCT	Randomised clinical trials
SES	Socio-economic status

Terminology

A variety of terms are used interchangeably throughout this thesis to describe the healthcare practices referred to. These fall within three categories:

1) Allopathic medicine, orthodox medicine, conventional medicine or biomedicine
2) Alternative medicine, complementary medicine, complementary and alternative medicine (CAM), and non-orthodox medicine
3) Integrative medicine (IM)

These categories are outlined below. In each case the term that is most frequently referred to throughout the thesis is used as the descriptor for each category.

Allopathic medicine refers to treatment modalities conducted under the Western scientific paradigm. However, it should be noted that allopathic medicine is also practised in many non-Western societies. In New Zealand, allopathic medicine is the dominant model of healthcare practised and receives funding from the state (largely through taxation revenue). GPs in New Zealand operate as private businesses and set their own consultation fees. However, the government has recently injected more funding to ensure lower cost GP consultations for people enrolled in primary health organisations (PHOs), to which most GPs belong, and to encourage free GP consultations for children under six.

Alternative medicine is the term used to describe treatment modalities that fall outside the parameters of the Western scientific paradigm. However, it should be noted that what is considered 'alternative' medicine tends to shift over time. For example, through processes such as professionalisation, alternative medicine modalities may become understood differently and, in conjunction, individuals are likely to differ in their views about what is considered allopathic medicine and what is considered alternative medicine (Dew, 2003). In New Zealand, alternative medicine is considered marginal in comparison to allopathic medicine, largely because alternative therapies (and the training required to become proficient in such therapies) do not attract government subsidies.

Integrative medicine refers to healthcare which combines biomedicine with some form(s) of alternative medicine. The term integrative medicine is used in the current context to refer to treatment employed by medical doctors who combine the use of allopathic medicine and alternative medicine. In New Zealand, IM practitioners are not provided with government subsidies.

It should be noted that all participants understood the types of healthcare I referred to during the research. However, on a few occasions some clarification became necessary. In those instances, I clarified the meaning of the term used, and if the participant had a preference for using a specific term to describe that modality of healthcare, I attempted to use this myself so as to overcome any confusion.