

## CHAPTER EIGHT

## EAST MEETS WEST

## THE EMERGENCE OF AN HOLISTIC TRADITION

THE PAST 30 OR 40 YEARS have seen a progressive re-emergence of the holistic tradition in the Western world – paralleling that which has been more consistently established in the East over many centuries. The concept of holism itself has not been defined in a single way to everyone's satisfaction, but it can be taken to be based on the involvement of the whole person in the promotion of health and the prevention of illness – in which the interplay of mind, spirit and body is perceived within the wider social context. The notion of holism itself in modern times derives from Jan Christian Smuts (1870–1950), a South African philosopher and statesman – he served twice as South Africa's Prime Minister and helped found the League of Nations. He developed the term as a counter to the reductionism of Western natural scientific thought. Holism in his definition makes the important recognition that the whole is greater than the sum of its parts.<sup>G4</sup>



ABOVE Jan Smuts first coined the term 'holism' in the 1920s.



ABOVE Western and Eastern pharmacists alike use a pestle and mortar.

Holistic traditions in this sense have long been pivotal to health care and indeed to life itself in the East, based on philosophies linking mental and physical processes. This is best highlighted by such time-honoured practices as traditional Chinese medicine and Indian Ayurvedic medicine, which see mental and physical processes as existing in harmony in a healthy person.<sup>K2</sup> These medical traditions can be broadly viewed as holistic approaches, as they recognize that the patient is a whole being and they are centred on person-focused care. They are also based on the connection between the individual and his or her broader environmental setting. This is an important background for discussing the question of East meeting West, although in an historical sense Eastern and Western health philosophies, as will be seen, can only really be depicted as being in serious tension in this respect with the rise of



ABOVE An image that suggests a body in balance and a calm mind. Holism recognizes the interplay of mind, body and spirit.

scientific biomedicine in developed societies in the modern Western world.

Holism is in fact by no means a new concept in relation to health care in the West; it derives in part from the Greek physician Hippocrates who, as early as the fifth century BC, acknowledged the relationship between illness and the environment and the emotions.<sup>A2</sup> Building on the philosophy of ancient Greek medicine, which also has resonances in the East, health care in the Western world has a long subsequent history that in many respects echoes the ancient Greek Hippocratic tradition. This is no more apparent than in the Greek doctrine of the need to balance the four humours in the body to achieve health, in which the elements of fire, water, earth and air of Greek cosmology were adapted to explain the state of health in the microcosm of the human being.<sup>K2</sup> An holistic frame of reference that can be traced back



The written record of Chinese medicine is of considerable antiquity. Knowledge of Eastern practices first diffused to the West in the seventeenth and eighteenth centuries. More recently, Western interest in holistic therapies has focused attention on the medical practices of the East. This painting of a Chinese scholar is attributed to Lam Qua.







ABOVE Eighteenth-century apothecaries' drug jars. The health-care 'market' at this time embraced a wide variety of treatments – many holistic in nature.

to the Greeks in this sense certainly exerted an influence over the Western medical tradition.

In sixteenth- and seventeenth-century Britain, for example, a diverse range of holistically-oriented treatments were on offer, including charms and incantations, herbal preparations, astrology and magic – which were often provided on a self-help basis.<sup>L1</sup> A wide array of practitioners from bonesetters to healers were actively selling their wares on the developing health-care marketplace by the eighteenth century.<sup>P5</sup> In this period even regular practitioners and their patients viewed illness as a result of the malfunctioning of the individual constitution in which vital forces were in disequilibrium. The theory of humours in particular emphasized that this could occur if the system became too hot or cold, dry or wet, or if too little or too much blood was produced. Any imbalances needed to be remedied by such actions as blood-letting and/or an improvement in life-style, which might involve recommended changes to diet and taking exercise.<sup>P4</sup>

In the United States, early forms of medicine were also centred on the idea of helping nature to deal with the underlying causes of illness, with the family/community context and prevention being regarded as pivotal to a person's health.<sup>L2</sup> The United States, too, had its range of holistic practices, the most prominent of which involved the use of botanical medicines that became strongly associated with the populist Thomsonian movement in the early nineteenth century (see page 88).

These were used not only by the colonialists, but also selectively by many native North American tribes, who employed them mainly on a symptomatic basis in order, among other things, to reduce bleeding and to serve as purgatives. It is clear from this example and the growing number of pills and tonics that were taken on a similar basis at this stage on both sides of the Atlantic that even in earlier times not all traditional health-care practices could be regarded as genuinely holistic.<sup>R3</sup>

### EASTERN INFLUENCES AND WESTERN PRACTICES

The gradual diffusion to the West of Eastern healing methods linking mind, spirit and body had some impact on the prevailing patterns of health care, as international communication networks slowly began to develop. This is illustrated by acupuncture which – having initially diffused from China to other Eastern countries like Korea and Japan – began to spread from the Orient to parts of Europe by the seventeenth century. This mainly took place through the influence of Jesuit missionaries and Western doctors working abroad for the East India Companies. The merchant and explorer Marco Polo (1254–1324) also played a part in the transmission of knowledge from East to West at a much earlier date. Knowledge of acupuncture finally reached North America through

BELOW Marco Polo and his entourage are shown on this Catalan map. His account of his travels in China (1275–1292) stimulated European interest in the East.







Europe by the early nineteenth century. The influence of such developments in medical circles, however, was limited; as witnessed by the fact that the traditional philosophical tenets underlying the practice, and its broad scope of application, were only vaguely understood at this stage (see also *Chapter Four*). It was primarily used in the West in a very specific manner to deal with cases of pain, in contrast to its broader Oriental employment within a philosophical framework centred on holistic balance.<sup>54</sup>

ABOVE The influence of European missionaries and teachers working abroad ensured that knowledge of Eastern practices found its way back to the West.



ABOVE Descartes' argued that mind and body are distinct; his dualism undermined holistic philosophy.

However, following the Enlightenment in Europe in the eighteenth century, the rise of biomedicine progressively squeezed out the more holistic tradition in the West, especially in the nineteenth and first half of the twentieth centuries. Biomedicine in this sense is seen as deriving from the classic philosophical distinction between mind and body propounded by René Descartes (1596–1650), which contrasts with conceptions of health and illness based on the whole person. The body in the Western biomedical frame of refer-

ence is seen as the predominant focus. It is treated as though it is divisible into parts that can be repaired if they break down, through such means as drug therapy and surgical intervention. Crucially, the biomedical approach tends to be geared more towards the physical aspects of health and illness than the

mental processes and the broader environmental factors that affect an individual – with little recognition of the uniqueness of the patient who is being treated.<sup>61</sup>

The transition to biomedicine in the West was associated with the emergence of an officially designated medical profession which has gained a virtually monopolistic status in health care – not least in Great Britain and the United States.<sup>62</sup> The biomedical approach, with its emphasis on 'scientific rationality', has played a key part in advancing the rise of doctors to power with state support in the Anglo-American context. Their role in the West has been further reinforced by the emergence of nurses and other professional groups subordinated to medicine in the wider health-care division of labour. The consequence of this has been the marginalization of both more holistic forms of therapy and of groups of alternative practitioners who are associated with an holistic approach. The latter were placed in a disadvantaged position in the health-care division of labour,

#### THE DECLINE OF A WESTERN HOLISTIC APPROACH TO HEALTH CARE

The shift away from holism can be seen to have taken place in three historical phases in the West. The initial phase was based on the practice of 'bedside medicine', where rich, fee-paying clients in the seventeenth and eighteenth centuries could shape their own diagnosis and treatment by medical practitioners in an holistic manner. It is important to emphasize that at this stage aspects of the patient's emotional and spiritual life, as well as the physical disposition of the individual, were seen as central by the practitioner in making a diagnosis within the established system of health care.

This frame of reference was progressively replaced, however, as the nineteenth century wore on with the move in Western medicine towards 'hospital medicine'. This new phase was characterized by concentration by doctors on the generic classification of diseases that were manifested in the patient, which meant that doctors moved away from the earlier focus on the individual as a whole person. The third phase that emerged as the twentieth century unfolded was the development of 'laboratory medicine', which removed diagnosis and therapy even further away from the whole patient – who came to be medically conceived as little more than a depersonalized object, comprised of a complex of cells.<sup>61</sup>

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sometimes being completely prevented from practising within the restrictive legal framework that eventually emerged in the West – including many countries in continental Europe and several states in the United States of America.<sup>S2</sup>

The influence of biomedicine in the early to mid-twentieth century is also evident in the way in which it has affected the East, not least through the consequences of Western imperialism. The initial impact of Western expansionism in this regard arguably affected health adversely by, among other things, importing disease, destroying and syphoning off harvests and introducing colonial production systems that had deleterious effects on the indigenous population. On the other side of the

coin, some of the positive features of biomedicine increasingly became available through the work of a relatively small number of Western health personnel in countries such as India and East Africa. Their focus, however, seems to have been primarily directed towards the care of the Western colonialists and only secondarily to the native population – and, when the latter group were treated, it was mainly in relation to mass conditions like malaria and sleeping sickness that might, if allowed to run unchecked, spread from the latter community to the former.<sup>D1</sup>

The effect that biomedicine and the related work of missionaries actually had on indigenous Oriental healing traditions, many of which were based on a more holistic approach, was limited. Much depended on the stance adopted by the governments formally in power in Eastern countries, especially with regard to their policies on the overall balance of health care provided by local health workers. In some Eastern settings, such as in China under the Kuomintang Nationalist Government in the period from the 1920s to the 1940s, the increasing use of Western biomedicine was seen as synonymous with the effective modernization of the nation. Accordingly, as in Meiji Japan in the nineteenth century, the employment of traditional medicine like acupuncture and herbalism was formally banned, even if in practice traditional therapies continued to hold considerable sway with some practitioners and the general public at a grass-roots level.<sup>S4</sup>



ABOVE Western biomedicine has had a beneficial impact on other cultures, not least in the virtual eradication of mosquito-borne diseases.

Just as more holistic forms of health care retained their importance in the East, despite the impact of biomedicine in the period leading up to the mid-twentieth century, so the newly defined alternative forms of holistic medicine did not completely disappear in the West in this period, notwithstanding the powerful influence of orthodox medicine. The medical profession certainly consolidated its position of power and become increasingly well organized in the West during the first half of the twentieth century, backed by further state support – which resulted in the numbers of rival alternative practitioners generally declining in face of the ideological assault by the medical establishment on homeopaths and other groups of

fringe practitioners both inside and outside the profession.<sup>N1, K3</sup>

However, this attack did not totally eliminate the range of alternative approaches; for instance, therapies from water cure to Christian Science were still available. The latter, indeed, was particularly prevalent in this period in the United States, where alternative therapies tended to be especially buoyant, in part because of the stronger populist pioneer tradition that prevailed in this country.<sup>W1</sup>

Some of the therapies on offer in Western societies even at this stage were influenced by the East. Hypnotism, for example, was given significant momentum by the work of James Esdaile (1808–1859), a Scottish surgeon who had employed a mesmerist in Calcutta in the mid-nineteenth century to assist in performing operations on the employees of the East India Company. In addition, there were also the more immediate influences of migrant populations living in Chinatowns and other ethnically based communities in the West in which traditional health-care practices persisted.<sup>L3</sup> These and other more holistic approaches formed part of a minority subculture in the first half of the twentieth century in many Western societies. However, from the 1950s onwards – the period on which this chapter focuses – the nature and scale of this subculture, as well as the extent of the Eastern influence on it, grew dramatically in the West, bringing it closer to becoming part of a new integrated medical orthodoxy.