

<http://somatosphere.net/?p=13214>

## Beyond Miracles: How Traditional Chinese Medicine Establishes Professional Legitimacy in Post-colonial Macau

2016-12-09 07:40:38

By Loretta I.T. Lou

[Editor's Note: An earlier version of this article appeared in *Imponderabilia: The International Student Anthropology Journal* (2014). This piece is updated with new data and photos collected between 2015 and 2016.]

*In Search of Reclusive Doctors (xunzhao yin shi yishu)* was the first Chinese TV documentary about medical miracles “made” by doctors of traditional Chinese medicine (TCM). When it was first broadcasted in 2001, it evoked great public interest in the Pearl River Delta region. In exalting the Chinese doctors’ miraculous power to save people on their deathbeds, the documentary paradoxically placed great emphasis on the scientific validity of TCM and folk medicine. In line with this, Mei Zhan’s ethnographic study of TCM doctors in Shanghai and San Francisco also found that the legitimacy of traditional Chinese medicine is built upon its ability to treat difficult cases (Zhan 2001:454). She argues that TCM doctors have used “miracle-making” to “craft a niche for traditional Chinese medicine within a biomedicine-centered health care system. The everyday practice and discourse of traditional Chinese medicine has come to be a site for the ‘production of the extraordinary’” (Ibid).

In an environment where TCM is in fierce competition with biomedicine, it is understandable that some TCM practitioners feel they have to establish their legitimacy through miracle-making. However, my research in Macau suggests a different story. A former colony of Portugal (1557-1999), Macau was returned to the People’s Republic of China in 1999 and is now a Special Administrative Region (SAR) of the PRC. Although Macau had the first Western-style hospital in Asia, it was not until 1984 when the Macau-Portuguese government finally reformed its health care system and established a public health network composed of a government hospital and a dozens of community health centers. As of 2015, there are three major hospitals and 708 primary healthcare premises in Macau, most of which are privately operated.



The Portuguese Consulate-General in Macau used to be St. Raphael's Hospital, the first hospital that adopted Western medical treatments in China and the first Western-style hospital in Macau. It was founded in 1569 by Belchior Carneiro, a Portuguese Jesuit missionary bishop who arrived Macau in 1568 (Barnes 2007:46).

### Official recognition of TCM in Macau

Without doubt, Macau's medical landscape is shaped by its colonial legacy. While TCM doctors in the PRC were endowed with "a clear-cut professional identity" as early as in 1955 (Farquhar, 1994:12), in Macau, it was not until 1998, a year before the city's handover to China, that the Macau-Portuguese government began to regulate the licensing of private health care services and the qualifications required for entering the profession of Chinese medicine (Decree-Law no. 84/90/M). In terms of the number of practitioners, by 2012, there were 353 registered TCM doctors (*zhong yisheng*; recognized through an accredited degree) [1], 204 TCM practitioners (*zhongyi shi*, recognized by a professional TCM committee), 13 massage therapists, and seven acupuncturists in Macau[2].

Prior to 1999, Chinese medicine was not a part of the public health service (Serviços de Saúde) in Macau. Centro Hospitalar Conde de São Januário (CSCHJ), Macau's only public hospital, still does not have a dedicated department for traditional Chinese medicine. The two TCM hospital departments in Macau are run by two private hospitals—the University Hospital and Kiang Wu Hospital. Yet things started to change after the

handover in 1999. Not only has Serviços de Saúde begun to run a *TCM* outpatient service in some of its primary health centers, the government has also made clear its ambition to promote and industrialize the Chinese medicine sector in Macau. This move is closely related to Mao's successor Deng Xiaoping's determination to "rejuvenate the nation through science education" (*kejiao xingguo*), a development strategy to make science and technology (*keji*) a national priority. This is a significant departure from some of Mao's earlier policies, which deemed progress as something to be achieved through self-reliance, revolutionary virtue, and mass mobilization rather than Western science and technology (Kirby 1989:24).



Statue of Sun Yat-sen at the front of Kiang Wu Hospital. Sun Yat-sen was the first president and founding father of the Republic of China. Before he devoted himself to the revolutions, he practiced as a doctor of Western medicine at Kiang Wu Hospital.

When I started this research in 2005, "make Chinese medicine great

again” was all talk and no action. But over the past 10 years, the Macau government has made significant progress towards making Macau a “national hub” of traditional Chinese medicine. Local officials are keen to use it as an opportunity to express their patriotism. They also hope that the industrialization of Chinese medicine would help diversify the economy of Macau, which has always been heavily dependent on its gambling industry. Since 2011, Macau has been an active member of the World Health Organization (WHO) Collaborating Centre for Traditional Medicine. Yet the biggest breakthrough was the recent joint venture to construct the Guangdong-Macau Traditional Chinese Medicine Science and Technology Industrial Park (GMTCM Park)—a gigantic, state-of-the-art business park set in Hengqin in the south of Zhuhai, Guangdong province.



Visions for the Guangdong-Macau Traditional Chinese Medicine Science and Technology Industrial Park. Photo Courtesy of the GMTCM.



### **It's “science”, not miracles**

Despite the hopeful future, the delayed recognition of TCM within Macau's legal-medical framework has caused a lot of anxiety among the TCM doctors there. Unlike practitioners in San Francisco and Shanghai,

TCM doctors in Macau feared of being further marginalized as the “miraculous healers”. Dr. Tam, a key interlocutor of mine, was really irked by people who think Chinese medicine is a medicine good at making miracles. He complained loudly: “They think Chinese medicine can cure everything? That’s ridiculous! We’re doctors, not deities! To ask us to clean up the mess is to look down on us! A death case is a death case!” Indeed, most TCM doctors that I spoke to in Macau corroborated that miracles are not easily “made”, if they are something that can be “made” at all. So even though miracle-making is an “unmistakable sign of professional accomplishment” for some TCM doctors (Zhan 2001:453), for others the stereotype implied unscientific practices, which they took offence at. Also, since the majority of TCM doctors survive without the halo of miracles, it is imperative to find out other ways of “doing” Chinese medicine.

When Dr. Tam urged me to let my American colleagues have a look at the TCM syllabuses used in the University Hospital, he wanted to make the point that TCM doctors are superior to their Western counterparts. Not only did he stress that modern TCM doctors are no longer trained within the family or through an apprenticeship, which he considered an unprofessional tradition, he also emphasized that nowadays TCM students are required to study both TCM and Western medicine. The following excerpt from *The Journal of Chinese Medicine Doctors in Macau* accurately captured Dr. Tam’s points:

The scope of Chinese medicine is very wide. It involves literature and history, animal physiology and plant ecology, meteorology and astronomy, geography and geology, chemistry and genetic engineering. Chinese medicine is a holistic discipline that involves much high science and technology. Every Chinese medicine practitioner should be proud of our nation. We are responsible for exalting our nation’s traditional medicine. To achieve this, we should make use of modern science and research new ways of improving our field.

### **Looking at illnesses together**

Besides nationalism, the professional legitimacy of Chinese medicine was reinforced by the practice of “looking at illness” (*kanbing*) together with patients (Farquhar, 1994:2) rather than producing miracles on deathbeds[3]. The fact that both TCM practitioners and their patients were involved in producing the medical norms (Ferzacca, 2000:30) has greatly contributed to the legitimatisation of TCM in Macau. When I was doing fieldwork in small TCM clinics, I came to realize that many TCM patients were extremely knowledgeable about their conditions. They were able to

use TCM jargons such as “fire in the bones” (*gu huo*), “depleted fire” (*xu huo*), “cold cough” (*han hai*), “hot cough” (*re hai*), “dry” (*gan*), “wet” (*shi*) to describe their states of health. They called this *jiubing chengyi*, which means when you have to cope with an illness for a long time, you will eventually become your own doctor. Indeed, many TCM users said they are able to interpret their own prescriptions.

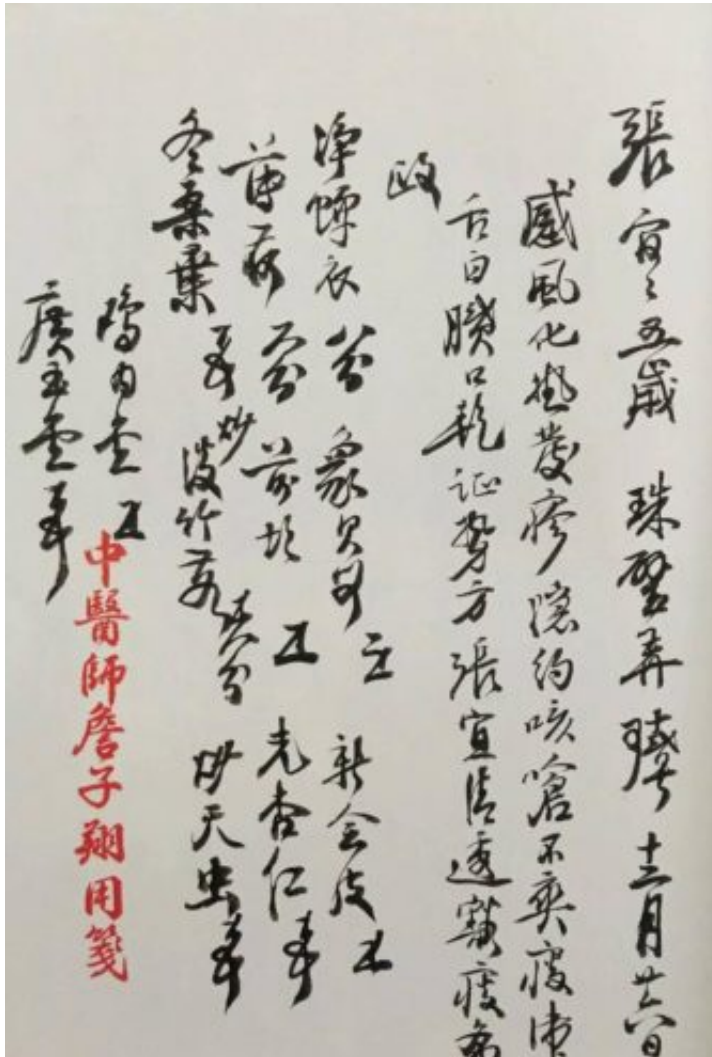
“Licorice root is *yaoyin*<sup>[4]</sup>,” Mrs. Lam analyzed her doctor’s handwritten prescription for me while we were sitting in the waiting room.

“How do you know?” I asked.

“I’ve been eating Chinese medicine[5] for many years now. *Jiubing chengyi*.”

“Do you think you would be able to read the Western medicine prescription?”

“How could I?” Mrs. Lam laughed. “I’ve only had five years of primary school education. I don’t know English or Portuguese! How could I read it?”



A handwritten TCM prescription comparable to a work of calligraphy. Many older TCM doctors in Macau retain the tradition of writing prescription with brush and ink. Photo courtesy of 360doc.

TCM users are also proactive in self-diagnosis. When Mr. Chan was diagnosed with Sciatica, he was sure that his medical doctor got it wrong. "I am pretty sure that it is rheumatism. I felt so much better after drinking the herbal tea you prescribed me last night." Mr. Chan told his TCM doctor. "Xiyi (doctors of Western medicine) only know to give me pain killers!"

Similarly, when Mr. Lee was diagnosed with mental disorder (*jing shen bing*) by his doctor in the government hospital, he came to Dr. Tam's clinic with a short article cut from the newspaper, titled "The Ancient Ways to Cure *dian* (epilepsy)[\[6\]](#)". He urged Dr. Tam to give him the treatments mentioned in the article because he seemed to suffer from the same symptoms. "Well, not all *dian* are the same", Dr. Tam rejected his request. Mr Lee was so disappointed that he got agitated in the consultation room.



“The hospital people said I have mental disorder! I don’t! I just have numb fingers!” Mr. Lee protested as Dr Tam tried to calm him down, “I believe you! I believe you! The hospital is very wrong in prescribing you those drugs.” After Mr. Lee left, Dr. Tam sighed: “Whenever a patient can’t speak clearly, doctors of Western medicine would prescribe him psychotic drugs. Alas, even if he wasn’t crazy, he certainly would be after taking those medications for such a long time!”



A typical traditional Chinese medicine clinic in Macau.



In Macau, the legitimacy of Chinese medicine is not built upon miracle making. Instead, it is achieved through a celebration of cultural tradition rejuvenated with discourses of nationalism and modernity, and through the mutual constructions of medical references between doctors and patients. In the TCM circle, the term “science” was used synonymously with ‘modern’—and being “modern” is considered a good thing. The shared cultural references used in TCM also make it possible for both parties to contribute to the conceptualization of health and illnesses. The knowledge of Chinese medicine is thus owned not only by the doctors but also by the patients. Unlike doctors of Western medicine who sometimes feel the need to shift to another identity when they are on duty (Good 1993), TCM doctors tend to speak the language of their patients and are not afraid of showing the more personal side of themselves. Indeed, it warmed my heart that my 70-year-old TCM doctor still remembered I like to have haw flakes with my bitter herbal tea. It is this human touch that helps Chinese medicine keep its strength even in the absence of miraculous treatments.



Bitter herbal tea with haw flakes.

*Dr. Loretta Ieng Tak Lou is a Postdoctoral Associate at the Institute of Social and Cultural Anthropology (ISCA), University of Oxford. Her doctoral research is an ethnographic study of “green living” and its implications for self-knowledge, social relations, ethics, and political mobilization in post-handover Hong Kong. Her research interests lie in the areas of environment, health, science and technology studies, re-enchantment, and social movements in East Asia.*

## References

Barnes, Linda L (2007). *Needles, Herbs, Gods, and Ghosts: China, Healing, and the West to 1848*. Harvard University Press.

Brown, Melissa J (2010). Changing authentic identities: evidence from Taiwan and China. *Journal of the Royal Anthropological Institute*. 16(3): pp.459-473.

Decree-Law no. 84/90/M. (2005). Translated by U Wan-Ian from Portuguese. Retrieved from the Internet. .

Farquhar, Judith (1994). *Knowing Practice: The Clinical Encounter of Chinese Medicine*. Boulder: Westview Press.

Farquhar, Judith (1994). 'Eating Chinese Medicine.' *Cultural Anthropology*, Vol. 9, No. 4, 471-497.

Ferzacca, Steve (2000). "Actually I don't feel that bad': Managing diabetes and the clinical encounter." *Medical Anthropology Quarterly*. 14(1): pp.28-50.

Good, Byron J. (1993). *Medicine, Rationality and Experience: An Anthropological Perspective*. Cambridge University Press.

Kleinman, Arthur (1998). *The Illness Narratives: Suffering, Healing & the Human Condition*. Basic Books.

Kirby, William, C. (1989). "Technocratic Organization and Technological Development in China: The Nationalist Experience and Legacy, 1928-1953. *Science and Technology in Post Mao China*. Cambridge: Harvard University.

Zhan, Mei (2001). "Does It Take A Miracle? Negotiating Knowledges, Identities, and Communities of Traditional Chinese Medicine." *Cultural Anthropology*. 16(4): pp.453-480.

## Notes

[1] Any Macau residents with a university degree in Chinese medicine can apply for a TCM license from the Serviços de Saúde. There is no licensing examination.

[2] Statistics obtained from Serviços de Saúde.

[3] Admittedly, many other factors may have contributed to the professional legitimacy of traditional Chinese medicine in post-colonial Macau, such as accessibility, price, and public policy. However, in this short article, I want focus on how TCM doctors establish their legitimacy

on nationalism and their shared cultural references with their patients.

[4] *Yao yin* is also known as *yao yin zi*. In Chinese Medicine, *yao yin* serves as a conduit for certain medicines to reach their targeted organs, arteries or veins.

[5] See Farquhar 1994.

[6] The word *Dian* deserves further analysis. *Dian* literally means 'insanity', but it can also refer to epilepsy.

#### **AMA citation**

Lou L. Beyond Miracles: How Traditional Chinese Medicine Establishes Professional Legitimacy in Post-colonial Macau. *Somatosphere*. 2016. Available at: <http://somatosphere.net/?p=13214>. Accessed December 9, 2016.

#### **APA citation**

Lou, Loretta I.T.. (2016). *Beyond Miracles: How Traditional Chinese Medicine Establishes Professional Legitimacy in Post-colonial Macau*. Retrieved December 9, 2016, from Somatosphere Web site: <http://somatosphere.net/?p=13214>

#### **Chicago citation**

Lou, Loretta I.T.. 2016. Beyond Miracles: How Traditional Chinese Medicine Establishes Professional Legitimacy in Post-colonial Macau. *Somatosphere*. <http://somatosphere.net/?p=13214> (accessed December 9, 2016).

#### **Harvard citation**

Lou, L 2016, *Beyond Miracles: How Traditional Chinese Medicine Establishes Professional Legitimacy in Post-colonial Macau*, *Somatosphere*. Retrieved December 9, 2016, from <<http://somatosphere.net/?p=13214>>

#### **MLA citation**

Lou, Loretta I.T.. "Beyond Miracles: How Traditional Chinese Medicine Establishes Professional Legitimacy in Post-colonial Macau." 9 Dec. 2016. *Somatosphere*. Accessed 9 Dec. 2016. <<http://somatosphere.net/?p=13214>>