Outline of presentations

VALENTINE, Kate

The Ideal Doctor and Medicine’ Hero Complex

Reflective rituals in the Healers Art as protective factors against burnout through the facilitation of a reconnection to self, an affirmation of identity and the development of healing relationships

Abstract

Human beings are a highly adaptive species; our adaptive capacity is related to our fundamentally social nature. How we understand ourselves and our place in the world is intrinsically linked to the complex social networks we develop and maintain. Watching the transformation experience of the participants of the healers art program has yielded a clue to how we may utilise our socialisation desires to assist us in fostering resilience.

The connections we experience as part of belonging reaffirm our identity and inform our understanding of who we are and where we fit in the world around us. The sense of self fostered by this understanding creates the opportunity for reflection and introspective thought enabling us to process our experiences in a safe and supported way.

This research explores the significance of identity and connection to achieving and maintaining a positive emotional state. The research also highlights the danger to clinicians when identity expectations are not met, particularly when this occurs within the socialisation system of medicine. This project suggests that opportunities to develop and strengthen our sense of self through connection and belonging to a group of ‘like’ people (peers) are generally not well facilitated through the core medical curriculum and yet, could be of real benefit to students and faculty alike by acting as a protective factor against burnout.
LEI, Li
Social Network and Health in Chinese Society

Abstract
This thesis reports the results of exploratory reading research into the social networks and their impact on the health and health-care access in Chinese society. The paper sets out to understand social networks by looking at the definitions of social ties in the patterns of social relationships, especially interpersonal relationships (guanxi) in Chinese community. It aims to analyse what the nature and composition of social networks among Chinese people, and discuss the barriers/facilitators to the establishment of social networks in Chinese society and subsequent impact on health and health-care access; as well as assess the types of support and constraint resulting from the social networks on health-care access, and to develop ideas for further research into healthcare system policy and health promotion to Chinese people (may alter).

The first chapter will address the definition and their linkage among social networks, social ties, social capitals and interpersonal relationships in Chinese context; and explain the reason of interpersonal relationship means a lot in Chinese society from traditional cultural and Chinese philosophy perspectives. The second chapter will use Latour’s (1999) theory on social ties/attachment as a framework, give examples to illustrate how social networks and interpersonal relationships serve as both barrier and facilitator to health and health-care access in Chinese society: on one hand, it provide some assistance including financial and emotional support; on the other hand, the limited social networks bring many negative effects on Chinese people’s health, as well as restricting health-care access. The third chapter argues that social networks as one factor create the formation of the coexistence of traditional Chinese medicine, biomedicine and folk treatment in China.

HUANG, Weiran

Tibetan Medicine in China

Abstract: Coming from a background of Buddhism, Indian and Chinese traditional medicine, the unique art of Tibetan medicine had once been a major influence amongst the Tibetan region. Current interests towards Tibetan medicine are high from the societies with a strong biomedical background. However, incidents such as health reform, past conflicts and powers shifts in the Tibet Autonomous Region (TAR) has resulted in Tibetan medicine slowly stepping down as the one and only powerful source of healing in Tibet. Health reforms have been established to integrate Western biomedicine into the teaching and practice of Tibetan medicine, forming a systematic theory to adopt with the modern requirements. Unfortunately, some varieties in Tibetan medicine have already been lost due to this and this is not helping Tibetan medicine to spread out more within China. Also past power feuds over the TAR raised social conflicts affecting the culture and causing levels of social suffering in the area. It eventually drove Tibetan medicine to fall into two camps,
one centrally recognized by the PRC government in Lhasa and the other one based in India founded by the Dalai Lama alongside with the exile. The institution and hospital in Lhasa can somewhat be viewed as a bio-power control over the public in order to migrate to a more biomedical approach alongside with the rest of China. In such ways has Tibetan medicine been unable to reach to the majority public outside TAR and can only exist as minor privatised clinics in the periphery of the region. In order to establish medical plurality of Tibetan medicine throughout China, there requires a tendency to lift the social barriers, increase flexibilities of the centralised control and encourage cultural exchanges in the future.

STEPHENSON, Kellie,

*An Andean Kallawaya Ecological Perspective: the Embodiment of the Environment Through the Self*

Do our perceptions define our world, our customs, our beliefs and our identity?

**Abstract:**
Kallawaya people of the Bolivian Andes have a unique way of understanding their bodies and their environment; an Andean peoples; Kallawaya perceive of their bodies in relationship to their environment. In 2009 Bolivia underwent a constitutional change that incorporates the rights and beliefs of indigenous people, further a law was passed in 2010 that granted nature or pacha-mama the same rights as humanity including legal representation (Vidal, 2011; Valle, 2009 and ‘La ley de derechos de la Madre Tierra’, 2010); pacha-mama or mother earth is based on the Andean indigenous view of the cosmos that incorporates all living beings into one interconnected system, a personification of the earth and cosmos. This thesis examines this perception of interconnectedness of the body and environment as one through the perspective of Kallawaya people to demonstrate the embodiment of the pacha-mama cosmology in tangible and historical form and to contribute to further analyse of how our perspectives shape our environment, our identities and our beliefs. The foundation of this thesis will be based on ‘perception’ and ‘embodiment’ (see works of: Csordas, 1988, 1992, 1994; Merleau-Ponty, 1962) analysing the metaphoric and interconnected relationship Kallawaya people have to the environment and how this is embodied in all aspects of life; chapter 1 will introduce a Kallawaya cosmovision, chapter 2 will analyse a Kallawaya understanding of health and illness; chapter 3 will analyse the role of ritual and continuation of cosmological belief systems; and finally the thesis will conclude with a conclusion and discussion on the implications of Kallawaya cosmology in a global context.

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