

Integrative Medicine in New Mexico

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Policy Article

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Abstract

It Is Time for Integrative Medicine: This policy brief provides a current state of affairs with regards to complementary and alternative medicine in Mexico. In collaboration with the Department of Integrative Health and Medical Message located at Taos, Mexico and with the University of New Mexico Center for Life, we conducted a qualitative study that assessed the barriers and success. Key themes that emerged centered on finances, power, and stigma. We recommend crafting policies and devoting resources to emphasize the creation of inter-professional educational and increasing awareness of consumer rights. These are critical given our current fragmented and expensive health care system.

Keywords: Complementary and Alternative Medicine; Healing; Herbalist; Acupuncturist; Yoga Therapist.

Abbreviations: CAM: Complementary and Alternative Medicine.

Policy Article

Complementary and Alternative Medicine (CAM) in New Mexico

Complementary and Alternative medicine (CAM) [1] refers to a range of health systems, modalities, and practices that are not part of conventional and politically dominant health systems. According to the National Institute of Health, when non-mainstream practices are used together with conventional medicine, it's considered "complementary" When non-mainstream practices are used in place of conventional medicine, it's considered 'alternative". Integrated medicine brings conventional and complementary approaches together in a coordinated way. This integration provides the provider and patients the option to use non-mainstream approaches alongside with conventional treatment.

There are challenges. For example, the insurance billing and short treatment windows do not align well for (mind, body, and sprit).

Few studies have explored the New Mexico context. Conduced over 100 interviews at eight clinic sites. They found judgment, lack of initiative, and concerns about safety as key barriers that limited complementary medicine. In 2017, a New Mexico survey found 35% utilizes some kind of traditional treatments. There is a growing recognition that Western medicine has focused too heavily on reductionist frameworks and approaches.

Journal of Natural & Ayurvedic Medicine

Clients' narratives and stories are essential to healing and health. Western medicine is slowly waking up to the power of illness narrative and other modalities of healing [2]. We contribute to this body of literature given New Mexico's rich diversity.

Integrated Medicine Study: Methods and Results

Researchers organized a regional conference, Building Bridges, targeting practicing providers in the state of New Mexico. This conference took place over the course of two days in April, 2017. Herbalist, acupuncturist, yoga therapist, and other traditional medicine providers were invited to speak. Afterwards, we held two focus groups that discussed barrier and solutions with bridging Western and traditional medicine [3-6].

A total of 32 attended Building Bridges. Eight participated in one focus group and six in the second. Participants' background included medial doctors, pharmacist, and physical therapist, to complementary providers such as traditional health educators, yoga therapist, herbalist and a doctor of Chinese medicine [7-10].

Theme One: Finances

Participants discussed the economic incentives that exist for health care systems. A yoga therapist said, "So much of the physicians' salaries are tied to performance: how much patients you see a day and how much you bill." Discussions highlighted the financial elements of the medical system that ultimately maximized profit over patient care.

Theme Two: Power

Traditional providers reported a dislike towards being referred to as alternative or complementary. A traditional healer said, "It is funny how Chinese medicine and Ayurvedic medicine have been around for thousands of years and yet they are the alternative" The language utilize conveys power dynamics that must be addressed in order to be equal.

Theme Three: Stigma

A medial provider shared, "I have a patient who had a tremendous amount of emotional distress from having a miscarriage. I was trying to refer her to acupuncture but she wasn't allowed time off from work...it had that stigma." Participants discussed even more mainstream treatment still struggle with the issue of stigma. As a follow-up to the focus group findings, we distributed a brief survey for medical doctors at the Integrative Conference, Simply Spicy. The survey inquired about referral practices, training, and barriers. 60% of providers always refer CAM therapies to their patients and 90% felt medical doctors would benefit from additional training in CAM therapies.

Protect Equal and Full Access to Integrated Care

There remain structural and cultural barriers to integrating Western medicine and Complementary medicine. The following are two policy considerations for New Mexico.

- Inter-professional Training: In New Mexico there are modalities of CAM that do not require a license or formal training program under the New Mexico "Unlicensed Health care Practice Act" HB 664. This protects traditional complementary healers but their training remains in silos. To address financial, power, and stigma barriers more inter-professional training early on must be a priority to build bridges [11-16].
- Consumer Rights: Increasing patients' awareness to integrate both modalities for maximum gain remains absent. New Mexico has a number of Senate Memorial to increase people's access to traditional, cultural, complementary and alternative health care therapies. Senate Memorial 20, 21, and 48 were introduced in 2006 and 2007 but has yet to be adopted. It is necessary to ensure the protection of patient's rights to improve market choice outcomes in a capital driven health care system.

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Journal of Natural & Ayurvedic Medicine

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