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IASTAM (International Association for the Study of Traditional Asian Medicine) Conference: Beyond Integration: Reflections on Asian Medicines in the 21st Century

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by Jürgen Schöpf, and an animation film of a Naga folktale by Tara Douglas were also included. Several conference participants also toured the Phonogrammarchiv, a research institute for audiovisual archiving and restoration.

The conference was successful in that it was interesting, informative and thought provoking. Future collaborations among several scholars are planned. Therefore, another conference on Northeast India is planned by the Centre for North East Studies and Policy Research (C-NES) in New Delhi for early 2015.

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IASTAM (International Association for the Study of Traditional Asian Medicine) Conference: Beyond Integration: Reflections on Asian Medicines in the 21st Century

Sancheong, South Korea September 2013

Since its conception in 1979 and through the initiative of key members such as Charles Leslie, Joseph Alter, Ken Zysk, Paul Unschuld, and others, IASTAM has developed into a forum in which medical practitioners and scholars meet to create a platform for a fruitful debate on Asian medicine. In its “antagonistic pluralism,” to use Volker Scheid’s term, IASTAM conferences encourage discussions on the often contentious and political aspects of traditional Asian medicine, which finds naturally fertile ground to instigate ideas where practitioners, scholars, and scholar-practitioners meet. Scholars from the humanities, who form a large part of the researchers attending IASTAM conferences, tend to contribute critical perspectives and awareness about the historical process of the medical practices, which medical practitioners sometimes lack and often appreciate. “At IASTAM conference I learn what was not taught in the TCM curriculum back home,” was the answer of an Australian acupuncturist to my question of why she attends IASTAM conferences. “They fill the gaps about history and social contexts that inform our day-to-day practice, but are not taught,” she concluded, summing up what many practitioners seem to have felt: that the conference is not an “epistemological carnival” as some critics predicted in the past, but has surfaced as a major get-together that pushes contemporary debates on Asian medicine forward. This became evident from the level of presentations by the distinguished key-note and plenary speakers, but also in the seven panels running parallel over the four fully-packed conference days.

IASTAM provides the platform in which academics also learn from or even are active medical practitioners, where people share how their theoretical analysis of the past still has meaning in present practice. An inspiring example of this combination is Vivienne Lo, IASTAM council member, who gave the Basham Medal Lecture. There she openly sketched an auto-ethnography, which she called “An Archaeology of Medical Time,” on how her study of Chinese medical history informs her acupuncture practice and how the former lets her discover the past in her present practice. Taking the example of the development of “lucky hours” and Chinese prohibition texts and the movement of renshen through the body, she took the audience on a journey through her personal discovery of the magic of the past in the present, giving examples of how her integrative academic approach resonates in her practice. She emphatically concluded that “if we deny that experience we deny the power of the medicine.”

The Korean Society of Medical History along with IASTAM proved itself a generous host, providing a professional venue at the Samsung Human Resource Development Centre in the green and hilly area of Sancheong, three hours drive south of Seoul. A dedicated group of volunteering Korean medical students tirelessly cared for the endless needs of the more than one hundred participants.

South Korea well exemplifies how government structures can actually support diversity in traditional medical practice. Standardization and strict government quality control of traditional Korean medicine does not necessarily lead to a reduction of diversity or a homogenization of medical practice. As Volker Scheid, the previous IASTAM president, commented during the closing ceremony: “Korea has strong institutions that do not strangle diversity of medical practice.”

Korean medicine, which at previous IASTAM conferences was still only marginally represented, came to the forefront, not only through the many presentations and medical practice exhibits at the venue (e.g. facial rejuvenation acupuncture), but also through the conference field trip to the World Traditional Medicine Fair & Festival in Sacheong and the tour to Kiom, an R&D venue that creatively seeks to combine traditional Korean
medicine with biomedicine. Whoever did not know about Korean medicine before this conference cannot claim ignorance hereafter: all participants received the generous gift of the entire English translation of the Donguibogam (published 2013), the four-hundred-year-old medical compendia of Korean medicine that was declared a “Memory of the World” by UNESCO.

The conference was also the venue for new networking: the Korean Medical History Project and the South Asia Medicine Group met separately during one evening, planning new projects. I attended the group of anthropologists and Sowa Rigpa practitioners, who met to form an IASTAM working group on Sowa Rigpa, organized by Mona Schrempf. It was encouraging to see how practitioners of Tibetan, Bhutanese, Himalayan Amchi medicine and Bonpo medical traditions found common ground under the new umbrella category of Sowa Rigpa since its official recognition under AYUSH by the Indian government in 2010. Promotion, preservation and research were key concerns mentioned during the meeting that drew an initial agenda for potential future collaboration. This meeting, as well as the numerous presentations on Sowa Rigpa, showed that this medical tradition is establishing itself on a firmer footing among Asian medicines, emerging from a weakened point of persecution and exile.

IASTAM panel contents were specific as well as broad, and as participants freely moved between panels on Unani, Siddha, Ayurveda, Sowa Rigpa, Mongolian, Japanese, Korean and Chinese medicine addressing issues of treatment evaluation, efficacy and safety, spirits, mind-body integration, politics, legislation, and history, everyone could find food for thought, knowledge, and networking opportunities. Several panels and papers addressed questions of new research methodologies that would be apt for Asian medical systems. For example, during the opening session, Volker Scheid mentioned future research opportunities provided by systems biology looking at pattern diagnosis as a bridge between system biology and TCM or Korean medicine.

Clinical demonstrations in the auditorium showed practical applications of Korean and Tibetan medicine. The keynote speakers were well selected and gave engaging presentations across the heterogeneity of Asian medical practice. Sienna Craig presented innovative projects and collaborative ethnographic events on Sowa Rigpa in Xining and Kathmandu; Judith Farquhar eloquently summarized the disintegrating futures of local medicines in China, and Narendra Bhatt critically reflected on the challenges Ayurveda faces in India.

Encouragement and recognition for young scholars at IASTAM are embodied in the Charles Leslie Prize for best presentations, which this time was sponsored by the Korean Society for the History of Medicine. The prize went to Karen McNamara from Syracuse University, USA, for her presentation 'Establishing a Traditional Medicine Industry in Bangladesh: Standardization and the Role of the WHO,’ with additional awards going to Daniel Trambaiolo of Princeton University and Stephen Boyanton of Columbia University, USA. Academic papers as well as practice reports by clinicians of Asian medicine can now be submitted online to the peer-reviewed IASTAM journal Asian Medicine through Brill Editorial Manager: http://www.editorialmanager.com/asme/. The new chief editors are Marta Hanson of Johns Hopkins University, and Mona Schrempf of Westminster University.

The next IASTAM conference will be held in India in 2016 and will be organized by the long-term IASTAM member and vice president Narendra Bhatt and his team, who enthusiastically welcomed the decision.

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