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HEALTH CARE

The Acupuncturist's Role in Overcoming Disparities in Care

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COVID-19 is not the only pandemic that America is experiencing. Racism,[1] ableism, elitism, white supremacy,[2] sizeism,[3] ageism, sexism, xenophobia, and the gender-binary[4] that currently exist in the medical system and society are themselves perpetuating many of the issues that as practitioners we currently treat.

Discrimination is not always overt, causing many of us to misunderstand its effects or miss it outright. Policies such as food deserts,[5] predictive policing,[6] mass incarceration,[7] environmental injustice,[8] "urban redevelopment,"[9] and even the BMI[10] are having similar effects on health, longevity and quality of life.

A Flawed System at Work

The Western system we are considering integration with is built on patriarchal, white, binary, Eurocentric ideas around health, leading generations of physicians, practitioners and patients who have assumed these biases,[11] often unknowingly.[12] It affects care provided and received, and manifests itself in different ways – from weathering[13] (the toll taken on the health of marginalized people from chronic and systemic discrimination) to rates of medical malpractice[14] people of color experience disproportionately to whites.

Medical technology is not equipped to be universally applied, rendering it expensive and often unhelpful for diagnostics in those communities for which it is of little use;[15] and biomedicine is also falsely enamored with metrics and measures like scans and bloodwork, giving us information that translates poorly off of paper into an understanding of people's chief complaints.

Also of consequence is what happens to the Affordable Care Act.[16] If the health conditions from which these communities are suffering (due in part to how they are treated by social, legal, criminal justice, medical, housing, and economic systems) are then used to further disempower or discriminate against them, then politicians will have succeeded in closing the loophole for corporate entities, with disastrous consequences for the individuals most at risk.

Our cost-prohibitive, capitalistic, privatized insurance market is balanced precariously on the backs of ill-equipped providers, and regulated by tightly controlled access to education,[17] resources,[18] support, high-quality care,[19] preventative medicine,[20] and public health[21] services – critically important to understanding marginalization in healthcare due to race or poverty.

It's not working. People are in pain, addicted to opioids,[22] dependent on medications to control symptoms without addressing the root cause of disease, increasingly taking antidepressants,[23] and the looming economic recession and mental-health crises of the COVID pandemic have yet to show their depths. We need societal, structural and holistic responses to these issues that we, as practitioners of Chinese medicine, are able to provide.

Our Responsibility and Opportunity

But until we make it part of our medicine's mission to decolonize and desegregate systems and institutions,[24] we too risk continuing to perpetuate harm for marginalized patients, people and

providers of all kinds. In addition to honoring the individual, we need to understand the predisposition certain populations have in terms of genetic and cultural indicators of disease, without using these differences to further disenfranchise them.

Many of us have come to this medicine due to experiencing marginalization ourselves. And all of us have treated patients who have received subpar or medically negligent care due to skin color, socioeconomic status, cognitive and physical ability,[25] or sexual orientation.[26] Although it's *yin*, *yang*, *qi* and blood circulating throughout us all, our patient's makeup also includes factors like poverty and prejudice. Intersectional issues, like being a woman, immigrant or "queer," make it essential to understand administering culturally appropriate care.[27]

We can be leaders in providing community-forward solutions - our medicine shows us the way. But we have to acknowledge injustice in order to correct it and engage in these conversations in order to do so.

At its best, Eastern medicine has room for it all. It is safe,[28] effective[29] and empowering for the people we treat. However, even with thousands of years of quantifiable results, we are still not being called into the conversation about how to deliver better health care in America for many of the same reasons people are being discriminated against. Barriers to inclusion in the discussion of how to re-imagine medicine in America have to do with a lack of public awareness about what the practice of Chinese medicine entails, restricted access (in the form of affordability and lack of representation), and a general lack of consensus among providers about what our role in response to these disparities truly is.

We Can Help Restore Balance

In Chinese medicine, we learn that if any part of the system is affected, the system as a whole is affected. Balance must be restored. Because we have assumed the role of leadership in our businesses and communities, the onus is on us as providers to meet the needs of the marginalized and uphold our code of ethics[30] through providing truly objective and affirmative care to the public at large.

Our regulatory and educational institutions must respond in the form of more comprehensive education in these areas, and practitioners need to commit to continued training and the development of resources that help us reach and treat these communities.

Moving forward as a field, we need better representation on the practitioner, policy and leadership levels[31] or our medicine will continue to only reach the privileged few who can afford treatment, or see themselves reflected in it. This includes

- Updating paperwork, signage and language to be gender-inclusive
- Cultivating a referral list of colleagues who are competent in issues facing marginalized individuals
- Making efforts to promote and lift up minority practitioners and voices
- Supporting places like community acupuncture clinics

It also means asking ourselves not only if we are equipped to treat a patient given our intersectionality with a discriminatory system, but also to look honestly and objectively at the ways in which we might be perpetuating it. And it means advocating for our medicine in a way that does not commodify its true origins,[32] instead honoring the ancestors and lineages who have kept it alive.

Let's Invest in Doing the Work

Diversity in thought, experience and background leads to more creative solutions for our patients, new breakthroughs in our medicine's application, and a larger number of people we can respectfully serve - increasing the social reach of our medicine, as well as the economic impact for us as practitioners. By investing in doing the work, we have an opportunity to not only carry forward this ancient art, but also to meet the crisis in health care with confidence, and show people what a truly inclusive and accessible system of medicine can look like.

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